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Study Shows Groundbreaking Impact of Forge Care Model on Overall Health

National payor-led study found significant improvement in physical health and medical utilization among Forge Health patients treated for substance use, mental health, and trauma

Forge Health recently partnered with a major national insurer on a research study to determine the effect of the Forge Care Model on patient mental and physical health.

The outcomes of the study were groundbreaking. A full 12 months after completing treatment, Forge patients both achieved and maintained significant improvement in overall health, while also taking better care of themselves by seeing their primary care doctors more frequently.

The study compared the health and behavior of 70 patients over the 12 months prior to engaging with Forge Health to their health and behavior in the 12 months following. Results were striking, with members of the study showing:

- 62% reduction in emergency room visits
- 75% reduction in medical hospital admissions
- 39% reduction in all-cause hospital admissions
- 20% increase in primary care visits

These outcomes strongly suggest that Forge Health's approach is an effective way to improve quality of life and overall wellbeing for individuals under care, while also reducing costs for patients and insurers.

Most studies that examine the effects of treatment on patients are conducted by the treatment providers themselves. This study is significant not only because of its results, but because it was performed in partnership with a leading national insurer.

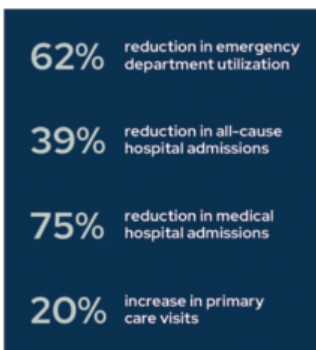
The Forge Care Model is trauma-informed and utilizes multidisciplinary clinical teams, data analytics, and streamlined treatment delivery to provide individualized mental health and substance use care. Both high- and low-acuity patients can be treated, and social and comorbid medical needs are addressed as part of the program.

Among American adults today, more than 65 million are living with at least one mental health condition, and more than 25 million are living with a substance use disorder. Anywhere from 60% to 90% go untreated, however, and the costs associated with substance use and mental illness are simply unsustainable.

According to research, treatment for mental health and substance use accounts for less than 2% of overall commercial health spending, but fully 40% of all health care expenditures are tied to patients with behavioral health conditions – an estimated \$752 billion each year. It's estimated that integrating behavioral and medical services for patients with behavioral health conditions could save \$68 billion, annually.

"In my over 30 years of experience in the addiction and mental health field, I have never seen study results that demonstrate such a significant relationship between behavioral health and physical health, or that so clearly show the positive impact behavioral health treatment has on an individual's physical health," said John Rodolico, PhD.

Dr. Rodolico, who serves as Chief Science Officer at Forge Health, as well as Assistant Professor of Psychology in the Department of Psychiatry at Harvard Medical School, continued, "This work changes the conversation about how behavioral health fits into the overall healthcare landscape. As we look toward the future, our goal is to conduct additional, similar studies to further illustrate the positive impact



our unique approach has on the mental and physical health of our patients."

"This is a pivotal time in our industry, and this data is setting a new standard for how key stakeholders in the healthcare industry should be thinking about mental health and substance use in the context of overall health," said Eric Frieman, Co-Founder and CEO of Forge Health. "Historically, mental health and substance use

care has simply attempted to treat the presenting issue, rather than addressing the underlying 'why' behind it. By treating both, our differentiated model is transforming and redefining the industry's traditional approach to mental health and substance use care. The results from this groundbreaking study suggest that addressing underlying mental health and substance use issues through a 'whole person' model is a critical key to improving an individual's overall health."

> Want to learn more? Visit <http://info.forgehealth.com/pa2022>

Forge Health is a mission-driven outpatient mental health and substance use treatment provider dedicated to delivering the highest quality, affordable, and effective "one-stop-shop" care to individuals, families, and communities in need, especially those with moderate to severe conditions. The Forge care model utilizes multidisciplinary clinical teams, data analytics, and streamlined care delivery to provide individualized, whole person care that addresses mental health and substance use issues concurrently, while also driving improved health outcomes. The Company is in-network with over 30 commercial and government health plans, and through new and expanded population health partnerships with leading health plans and health systems, Forge now manages more than 270,000 members under its value-based partnership model.

Forge's Veteran and First Responder services (Forge VFR) has earned a distinct reputation and the trust of providing the highest quality behavioral health care to active-duty servicemembers, veterans, first responders, and their families. This includes making history with a first-of-its-kind partnership with the VA to enhance the access to behavioral health care to reduce suicide. Through this partnership, Forge works with the VA to provide care in underserved areas and ensures veterans and their families get the highest-quality care.

Bone and Joint Guide



Biologics Are the Future for Treatment of Knee Arthritis

By Nancy Kennedy

If you are one of the 60 million American adults who have arthritic knee pain, you may assume that the ordeal of total knee replacement looms in your future.

Maybe, maybe not. The future of arthritic knee treatment now includes innovative alternatives, and that future is happening right now. At Sports Medicine and Joint Replacement Specialists, a promising new treatment called Bone Marrow Aspiration Stem Cells (BMA) is being offered by Derrick J. Fluhme, M.D., a board certified orthopedic surgeon and sports medicine specialist. BMA therapy is available for patients who have joint pain, but are not in need of joint replacement; the treatment uses the body's own natural healing capacity to repair the tissues in knees that are damaged by osteoarthritis.

"I have been treating knee arthritis for nearly 20 years," Dr. Fluhme explains. "I realized years ago that we were simply chasing our patient's symptoms with conservative management such as ice, NSAIDs, bracing, physical therapy, and injections. Injections primarily consisted of corticosteroids which simply masked their discomfort while adding to the deterioration of their cartilage, thus making the arthritis worse. Viscosupplementation was another treatment, a simple lubricant that rarely was effective enough on its own. While total knee replacement remains a very effective way of treating patients with severe bone on bone knee arthritis, nine out of 10 patients that present to me do not yet require surgery. Thus, we were simply chasing symptoms until that patient's knee cartilage was so worn out that they needed a knee replacement."

In 2015 Dr. Fluhme began searching for an alternative for those patients stuck in what he calls the "purgatory" of knee pain: enough arthritis to cause pain and bother them, but not enough to warrant total knee replacement. Instead of administering injections that were ineffective, and potentially adding to their problem, he began using biologic-based injections and has had excellent outcomes.

Bone marrow, the soft spongy tissue which is found in the center of the bones, is the dynamic manufacturing site where the human body produces red blood cells, white blood cells and plasma components. Stem cells, the immature form of these cells, are also found in bone marrow. These have the potential to develop into



"This treatment offers the most prolonged pain relief for those with mild to moderate pain and can delay the need for surgery."

-Derrick J. Fluhme, MD

mature cells that form the muscles, blood vessels, cartilage or bones. Certain stem cells drive tissue regeneration and have the capacity to reduce pain and inflammation and repair damaged cells, naturally and biologically.

According to Dr. Fluhme, the biologic injection process involves a safe, minimally invasive procedure performed in his office. Bone marrow is aspirated from the pelvis, with a local numbing medication, yielding a rich supply of cells. The extraction takes about ten minutes, and the cells are injected into the knee right away. The patient can expect to resume normal activity with minimal discomfort. Results may take four to six weeks to take effect, and at that time a booster injection of platelet rich plasma (PRP) will be given.

Bone marrow aspiration offers many benefits to the patient. It uses natural, organic tissue from your own body; it has fewer side effects than steroid injections; it accelerates healing and there is minimal down time involved in the procedure. BMA treatment is not yet covered by health insurance, but Sports Medicine and Joint

Replacement Specialists keep costs to a minimum and offer payment plans. Dr. Fluhme encourages patients to seek this treatment from orthopedic surgeons. "People with knee pain deserve to be seen by an experienced joint specialist whose treatment includes surgery. Only an orthopedic surgeon who knows the full spectrum of joint disease and treatment can tell you if you need joint surgery."

Treatment with bone marrow stem cells is not an alternative to surgery, but to steroid injections, Dr. Fluhme says. "This treatment offers the most prolonged pain relief for those with mild to moderate pain and can delay the need for surgery. It can reduce pain and improve functioning, helping people achieve a higher quality of life: they will be better able to walk, socialize and enjoy activities, all of which improve general health. There is nothing we can offer that is protective or reparative, other than biologic injections."



To learn more about **stem cell therapy**, visit www.Drfluhme.com.

To learn more about **Dr. Fluhme's** practice, or to make an appointment, visit www.DrDerrickfluhme.com.

To learn more about **Sports Medicine and Joint Replacement Specialists**, visit www.Drgreghabib.com.

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Good News! Coffee is Good for You!

By Lois Thomson

Coffee drinkers of the world, your day has come! After hearing for decades about the detriments of drinking coffee and how you should abstain, there is some good news – news that says coffee may actually be beneficial for you!

Why the 180-degree turnaround? Part of the reason is because people who consumed large quantities of coffee in the past also tended to be overweight, use tobacco, and have sedentary lifestyles – three characteristics that wouldn't be healthy even for non-coffee drinkers. However, as more and more people are paying attention to exercise and their diets, coffee isn't necessarily considered to be harmful any more, and health benefits are in fact being discovered.

For example, a recent study showed that people who drink three to five cups a day were less likely to die from heart disease or stroke, compared with those who drank little or no coffee. Coffee can also give an energy boost, as it can help you feel less tired and increase your get-up-and-go during the day. In addition, it may have intellectual benefits by improving memory and mood.

Along with regular physical activity and watching your diet, one study found a strong connection between coffee consumption and reducing the risk of type 2 diabetes. Coffee may also help protect the liver, as researchers believe the beverage contains an ingredient that could contribute to lowering the risk of cirrhosis, while others found that people who drank two cups per day had a 43 percent lower risk of getting liver cancer.

If you're trying to keep your weigh under control, coffee may give your body a metabolic boost by increasing the rate that fat burns. Finally, coffee can help lower the risk of neurodegenerative diseases, such as Alzheimer's, Parkinson's disease, and spinal muscular atrophy. One study in particular noted that caffeine was associated with a significantly lower risk of getting Alzheimer's.

This is not to say, however, that indulgers shouldn't be cautious, as high caffeine content can create problems in other areas. But overall, those few cups a day may not be as bad as originally believed.



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Patient Stories:

Hear the inspiring stories of real patients at Greater Pittsburgh Vascular Associates

By Nancy Kennedy

Ask Margie and Duane Barnhart about their experiences as patients at Greater Pittsburgh Vascular Associates, and prepare yourself for a double helping of heart-felt gratitude and deep admiration.

To this Adamsburg couple, there is simply no finer healthcare facility and no better healthcare providers than those at GPVA. Both Margie, 71, and Duane, 75, are patients of GPVA, and both have received life-changing care from cardiologist and vascular specialist Gennady Geskin, M.D., his physician associates and the GPVA team.

For Duane, Dr. Geskin is a personal hero. “Dr. Geskin saved my life,” he says. “I had an aortic aneurysm that was discovered by my PCP, Daniel Medic, MD. I was referred to another physician at a hospital in the city, and was scheduled to have open chest surgery to repair the aneurysm. This doctor warned me that because I weighed over 300 pounds, the surgery was risky. He told Margie that I might not make it off the table. We were both scared to death but thought we had no choice but to go ahead with it.”

Fortunately for Duane, his wife Margie is a gregarious woman, and when she went to GPVA for treatment for varicose veins, she chatted with Nicole Bruno, MSN, ACNP, about her husband’s condition and the anxiety she felt about the upcoming surgery. Nicole listened attentively and then told Margie, “We can help you and Duane. Bring your husband in here today and let us check him out.”

Nicole was as good as her word. A few hours later, Dr. Geskin examined Duane and felt that he was a good candidate for an alternative procedure that was far less likely to lead to complications. He scheduled the procedure to be performed at Jefferson Hospital and two days later, Duane underwent a minimally invasive procedure. It was a bit complicated, as the aneurysm involved the left renal artery, but Dr. Geskin was able to both fix the aneurysm and preserve the kidney, using endograft (stent) technology. The procedure went well and Duane was home in 72 hours.

That was four years ago. Today, Duane feels great; he has retired from his work in a glass factory and enjoys life with Margie and their dog Jax. Revitalized by his good outcome, he has managed to lose

They both say that in all their experience with hospitals, doctors and the healthcare system, the best care they have ever received is that of Greater Pittsburgh Vascular Associates.



100 pounds. Margie says the combination of her healthy cooking (she highly recommends the air fryer) plus Duane’s commitment to intermittent fasting has been the ticket to success. “If I hadn’t talked to Nikki that day about Duane, he would probably be dead,” she says. “Nikki was genuinely concerned and made room in the schedule so that he could be seen immediately. Duane wasn’t even their patient! But that’s the kind of people they are – they go out of their way to help their patients. I don’t think this would have happened anywhere else.”

Margie is also a patient of Dr. Geskin, who has treated her for varicose veins. “I had a lot of leg pain and swelling. Dr. Geskin is the only doctor who was able to help me with my legs. My legs are no longer painful and I wear compression socks to prevent swelling.”

Greater Pittsburgh Vascular Associates is a division of Jefferson Cardiology. GPVA provides comprehensive services and the most advanced care in state-of-the-art facilities equipped with the latest medical imaging and surgical technologies to diagnose and effectively treat problems with arteries and veins. According to Gennady Geskin, MD, “We treat patients with peripheral arterial disease, chronic venous insufficiency, varicose veins and deep vein thrombosis. We perform every venous and arterial procedure, including laser atherectomy and stenting as well as aneurysm repair.”

The Barnharts have had more than their fair share of medical problems. Duane has also had cancer and endured multiple surgeries; Margie had open heart surgery and a pacemaker insertion five years ago. They both say that in all their experience with hospitals, doctors and the healthcare system, the best care they have ever received is that of Greater Pittsburgh Vascular Associates. “Dr. Geskin is a wonderful man and the best doctor; Nikki and everyone at GPVA are the best people in the world,” Margie says. “They treated us like family. Everything about GPVA is wonderful. If you have any problems with your arteries, veins or your heart, you should make an appointment with GPVA.”



“We treat patients with peripheral arterial disease, chronic venous insufficiency, varicose veins and deep vein thrombosis.”

-Dr. Gennady Geskin



For more information, visit www.greaterpittsburghvascularassociates.com; to make an appointment call (412) 469-1500.

Myocarditis Following COVID-19 Vaccination: Heart Inflammation is Rare but Affects Young Men Ages 12 to 39

By Nancy Kennedy

Recent media stories have reported concerns about an increasing number of cases of myocarditis, an inflammatory heart condition, following COVID-19 vaccination, but the condition is extremely rare and affects only a very small and specific segment of the population. For the great majority of Americans, it is not a risk at all.

Myocarditis (inflammation of the heart muscle) and pericarditis (inflammation of the lining around the outside of the heart) are rare complications of COVID-19 vaccination, and occur primarily in young adults and adolescent males, ages 12 to 39. Fortunately, the condition is self-limiting, readily treatable and unlikely to progress to chronic or long term cardiac problems, says Alan Bramowitz, MD, a board-certified cardiologist with Jefferson Cardiology Association who cares



Dr. Alan Bramowitz

for patients with all types of cardiovascular disease.

“A study conducted at Baylor University and reported last summer in the American Heart Association journal *Circulation* revealed that

myocarditis has been found to occur in a small group of young men, mostly after the second dose of the vaccine,” Dr. Bramowitz explains. “It occurs within a few days to a week after vaccination. The symptoms of myocarditis are chest pain, shortness of breath and fatigue, but in general the patients do not become very ill; young men are likely to be in good health to begin with. Myocarditis can be diagnosed with an examination, echocardiogram and/or cardiac MRI, cardiac troponin levels and other bloodwork. It is treated with NSAIDs (non-steroidal anti-inflammatory drugs) and rest. The patients improve quickly - symp-

tombs resolve and the diagnostic markers and imaging studies return to normal. Patients who are recovering can usually resume their physical activities with guidance from their PCP.”

According to the Centers for Disease Control (CDC), the rate of occurrence of myocarditis/pericarditis is 12.6 cases per million doses of second-dose mRNA vaccine. Myocarditis was less commonly seen after the third vaccination.

The reason for the condition's incidence among young males exclusively is unknown at the present time but the CDC is monitoring and reviewing cases. Post-vaccination myocarditis is considered an “adverse event” – a rare complication of vaccination – and is therefore required to be reported to the CDC's Vaccine Adverse Event Reporting System (VAERS). Vaccination for other diseases, including smallpox, flu, and hepatitis B can also cause myocarditis, although this is also rare.

As a potentially lethal virus

that may have long term complications for many organ systems, COVID-19 is a far greater risk than vaccination, Dr. Bramowitz says. “No one should forego receiving the COVID vaccination because of concerns about myocarditis.”

Myocarditis can occur as part of the body's inflammatory response to COVID infection. When the body is exposed to an infection like COVID-19, an inflammatory response is triggered, and this response can sometimes be exaggerated, leading to stress or damage to organs such as the heart and lungs. Pericarditis, which affects the sac that surrounds the heart, can restrict the heart's ability to expand and contract. It is painful with inspiration, and deep breathing makes the chest pain worsen. Positioning matters: the chest pain is worse with lying down, and improves when the patient sits up.

For more information, visit www.jeffersoncardiology.com or call (412) 469-1500.

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By Nancy Kennedy

High blood pressure, or hypertension, means that the force with which your blood flows through your blood vessels is elevated, and stays elevated. Blood pressure normally fluctuates at different times, but when you have sustained high blood pressure, it can wreak havoc with your heart and your overall health. It's important to understand this condition in order to prevent it, or to manage it effectively in order to prevent complications.

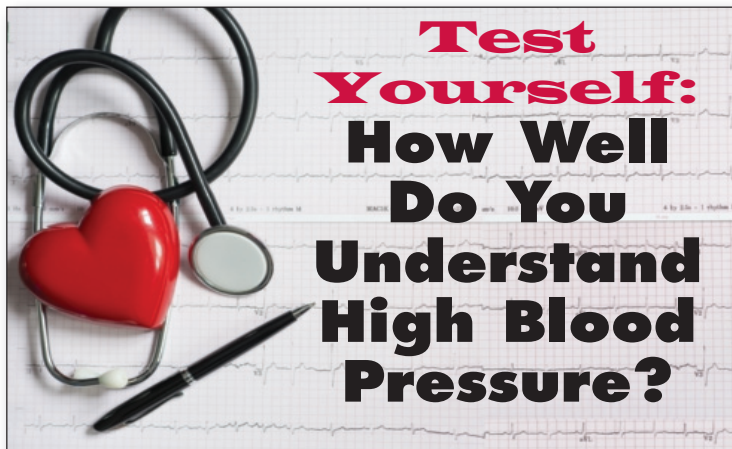
Normal blood pressure: systolic (upper number) = 120 or less; diastolic = 80 or less

Pre-hypertension: systolic = 120-139; diastolic = 80-89

High blood pressure: systolic = 140 or higher; diastolic = 90 or higher

TEST YOUR UNDERSTANDING OF HIGH BLOOD PRESSURE
by answering the **TRUE** or **FALSE** questions below.

1. The symptoms of high blood pressure are fatigue, headache, dizziness and anxiety.
2. Exercise can help lower high blood pressure.
3. High blood pressure is mostly due to aging, obesity and high sodium intake.
4. High sodium foods can be identified by their salty taste.
5. Uncontrolled high blood pressure can lead to heart disease, kidney disease, glaucoma, stroke, heart attack, impotence and dementia.
6. Diuretics are often used to treat high blood pressure.
7. Obesity increases your risk for high blood pressure by eightfold.
8. Alcohol can lower your blood pressure.
9. Cold weather can raise the blood pressure and stress the heart.
10. If you have high blood pressure you should buy a home monitor and check it daily.
11. The worst high sodium culprits are fast food, Chinese food, deli meats, pizza and canned soups.
12. Blood pressure medication should be taken whenever you feel stressed.



ANSWERS

1. FALSE. High blood pressure does not have symptoms; it is known as a silent killer.
2. TRUE. Physical activity can reduce blood pressure.
3. TRUE. Aging, obesity and high sodium are primary causes of high blood pressure, but obesity and sodium intake are factors that can be modified by individuals.
4. FALSE. Many high sodium foods do not taste salty. Bread and cottage cheese are good examples. To know the sodium content of foods, you have to read the label.
5. TRUE. These conditions all can be a consequence of high blood pressure. This is why it is so important to get your blood pressure checked and to get treatment if indicated. These diseases can be prevented.
6. TRUE. Diuretics rid the body of excess fluid which can be due to high sodium.
7. TRUE. Obesity is second to aging as a cause of high blood pressure.
8. FALSE. Heavy and regular use of alcohol can raise blood pressure significantly. Limit yourself to two drinks per day if you're a man, and one drink per day if you are a woman.
9. TRUE. Alan D. Bramowitz, MD, a cardiologist with Jefferson Cardiology Association, says that cold weather places extra demands on the heart and raises blood pressure.
10. TRUE. It's a good idea to have a home monitor to keep track of your blood pressure and determine if your treatment is effective. The American Heart Association (AHA) recommends the upper arm, cuff-style monitor for the most accurate readings. Visit www.heart.org for more information.
11. TRUE. It takes time and effort, but cooking your own food means you can control sodium, fat and calories. You don't have to give up your favorite foods if you learn to make them at home. You can find excellent, heart-healthy recipes at www.millionheartshhs.gov
12. FALSE. Take your medication exactly as your doctor ordered it and don't stop taking it abruptly.

THESE HEALTHY LIFESTYLE CHOICES ARE RECOMMENDED:

- Follow a low sodium diet – an excellent plan is the DASH diet: Dietary Approaches to Stop Hypertension. Learn more at www.mayoclinic.org/healthy-lifestyles
- Exercise – aim for 90-150 minutes of aerobic and resistance exercise per week. (AHA)
- Learn to manage stress.
- If you are obese, lose weight – even 5 to 10 pounds will make a difference.
- Don't smoke!

Keeping Cholesterol in Check

Current nutrition guidelines recommend a diet with 20 to 35 grams of fiber a day, with at least 5 to 10 grams coming from soluble fiber. (Soluble fiber dissolves in water and is found in oats, peas, beans, apples, citrus fruits, carrots, barley and psyllium.)

Here are 11 foods that can help lower LDL (the "bad") cholesterol:

- **Oats** – Having a bowl of oatmeal or cold, oat-based cereal like Cheerios for breakfast is an easy way to lower your cholesterol.
- **Barley and other whole grains** – Along with oats and oat bran, barley and other whole grains can help lower the risk of heart disease, mainly via soluble fiber.
- **Beans** – There are so many choices of beans – kidney, garbanzo, lentils, navy, black, etc. – and they are especially rich in soluble fiber. They also take a while for the body to digest, so you will feel full for longer after a meal.
- **Eggplant and okra** – Not only are these vegetables good sources of soluble fiber, but they are also low in calories.
- **Nuts** – Studies show that eating almonds, walnuts, peanuts, and other nuts is good for the heart, and can slightly lower LDL.

They also have additional nutrients that protect the heart in other ways.

- **Vegetable oils** – Use liquid vegetable oils such as canola, sunflower, safflower, and others in place of butter or shortening when cooking.
 - **Apples, grapes, strawberries, citrus fruits** – These are rich in pectin, a type of soluble fiber.
 - **Foods fortified with sterols and stanols** – Getting 2 grams of plant sterols or stanols a day can lower LDL cholesterol by about 10 percent. Companies are adding them to such foods as margarine and granola bars to orange juice and chocolate. They are also available as supplements.
 - **Soy** – Eating soybeans and foods made from them, such as tofu and soy milk, is not as helpful in lowering cholesterol as once believed, but are still a practical option.
 - **Fatty fish** – Eating fish two or three times a week can lower LDL by replacing meat, and also by providing LDL-lowering omega-3 fats.
 - **Fiber supplements** – Supplements can provide soluble fiber, but there are more appealing ways to get it.
- Adding several foods to lower cholesterol should work better than focusing on just one or two. Equally important, a diet containing a variety of these food products can also help to keep blood pressure in check, and is good for bones and digestive health, and for vision and mental health.
(Harvard Medical School Health Beat)



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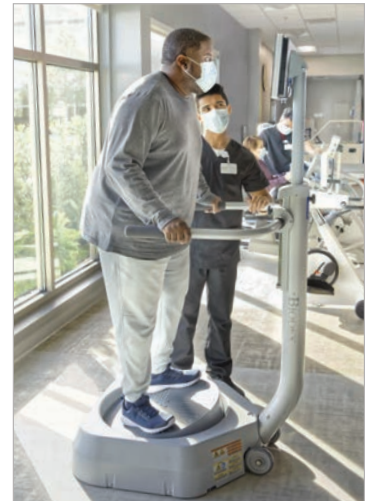
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What Is a Silent Stroke?

A silent stroke or whispering stroke sounds mysterious and in some ways they are. They can sneak up on you, go ignored or be happening without you feeling a thing. The medical community has spent a great deal of time teaching people the warning signs of the 800,000 strokes that occur each year. The most common is the F.A.S.T. acronym as described by the American Heart Association.

F.A.S.T. Warning Signs

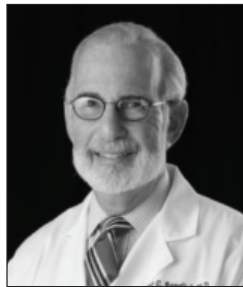
Use the letters in F.A.S.T to spot a Stroke:

- **F = Face Drooping** – Does one side of the face droop or is it numb? Ask the person to smile. Is the person's smile uneven?
- **A = Arm Weakness** – Is one arm weak or numb? Ask the person to raise both arms. Does one arm drift downward?
- **S = Speech Difficulty** – Is speech slurred?
- **T = Time to call 911**

However, with a whispering or silent stroke, we are referring to something much more subtle or even invisible. Silent strokes are common; it is estimated there are 8 to 11 million silent strokes each year and that 50% of people over the age of 85 years have had a silent stroke. They are much more common in high-risk groups with hypertension being the greatest risk factor.

What is a Silent Stroke?

Silent strokes are exactly what they sound like. They are found coincidentally when the person is sent for a brain (CT or MRI) scan for another reason. Their doctor may have ordered a brain scan because of headaches, dizziness, memory problems or Parkinson's



By **Richard C. Senelick, MD**

Disease. The scan reveals that the person, even on careful questioning, never had any symptoms of a stroke. However, their brain scan shows multiple strokes. These are usually small lesions that may be seen on both sides of the brain. Over time and with increasing numbers they can cause cognitive problems and even vascular dementia. The associated danger is that a silent stroke puts you at increased risk for a full-blown stroke. They need our full attention to prevent another stroke.

What are Whispering Strokes?

I like this term which was coined in a recent article. These are the people who have the F.A.S.T. warning or mild symptoms that may only last a few hours or days and are ignored. They do not go to the doctor or even if they do, their symptoms disappeared and are ignored. Just a "whisper." These people need a detailed evaluation because they have had a stroke. A recent editorial suggested that we should eliminate the use of the term, "Transient Ischemic Attack," because if an MRI is performed, these people have had a stroke. The "whisper" needs to become a "shout" and call to action.

What Should You Do?

Whether it is a silent stroke or a whispering stroke, a full stroke workup is in order. Do not delay going to the doctor. First, your doctor needs to review all of your risk factors with you and make sure everything is being done to get them under control.

- Hypertension
- Diabetes Mellitus
- Cholesterol level
- Smoking cessation
- Diet
- Stroke prophylaxis

One of the most important steps is to screen for atrial fibrillation. One third of atrial fibrillation patients reported stroke symptoms without a stroke diagnosis. The most common symptom is sudden numbness or painless weakness, which is easy to ignore. We go to the doctor, and they make certain we have had our pneumonia or flu shot but a short questionnaire would be a welcome addition to screen for symptoms of a stroke. It is an opportunity to prevent a major stroke.

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> **Dr. Richard C. Senelick** is a Neurologist. He has served as the Medical Director of **Encompass Rehabilitation Hospital** in San Antonio for 30 years. For more information about **Encompass Health Harmarville**, visit www.encompasshealth.com/harmarvillerehab. For information about **Encompass Health Sewickley**, visit www.encompasshealth.com/sewickleyrehab.

By Kayla Phillips
at blog.encompasshealth.com
(article adapted)

It didn't take long for Francine Johnson to catch Joe Pender's eye 30 years ago. The pair worked in different departments of the same company when Pender asked Johnson if she wanted to join him to get fried shrimp for lunch—her favorite. They hit it off and soon began dating.

In the early days of their relationship, the two would lie in the floor of Pender's apartment listening to music. "Slow Jam" by Midnight Star became the song that defined their relationship—they danced to it for the first time in Pender's apartment and continued to dance to it throughout their 32 years of marriage.

"That song was our first dance. It said how we felt, and how we still feel today," Pender said. "That song was special to both of us. She'll hear it in her sleep and wake up with a smile."

After Johnson suffered a stroke that left her unable to walk or speak, Pender chose Encompass Health for his wife's rehabilitation. While there, the couple learned that rehabilitation, like dancing, works best when you choose the right partner.

Surviving a stroke

On a Tuesday morning, Johnson complained of sinus issues, but nothing severe. Pender went outside to pressure wash the driveway, and when he came inside, he found Johnson in deep prayer.

"When I walked back in the room, she was pacing and kept saying, 'Jesus help me,'" Pender said. "I told her, 'Say my name,' and she couldn't. She just kept looking at me with those eyes. I can still see those eyes right now."

Pender recognized that Johnson was having a stroke—she'd had a previous stroke many years ago—and called 911. Paramedics rushed her to a local hospital, but due to COVID-19 visitor restrictions, Pender wasn't able to go inside.

"I sat in the parking lot and just boohoo cried," he said. "I talked

to God and said, 'You've got to do something.'"

Johnson was transferred to another hospital for further treatment. Doctors told Pender that the stroke was causing a midline shift in her brain, and she likely had only a 1 percent chance of survival. They could give her medication, but it was a waiting game, and Johnson was unlikely to survive more than 24 hours.

A day later, Johnson was still stable. The following day, doctors told Pender that the bleeding had subsided and Johnson exceeded their expectations, but she was still in critical condition and facing severe deficits.

"The doctor called me and said, 'I don't know what God you prayed to, but I'm going to start praying too, because this is truly a miracle,'" Pender said. "She is the woman that has prayed for everybody, except for herself. I know that she's God's angel. She didn't ask for a blessing for herself, but I did."

Choosing the right rehabilitation partner for stroke recovery

Although Johnson had beaten the odds and survived her stroke, doctors told Pender that she still faced a long, difficult road to regaining her independence that would possibly not be successful.

Pender knew that he would do what it took for his wife to have the best chance at recovery, whatever that might look like. Doctors gave Pender a list of rehabilitation providers in the area, but he was unfamiliar with the options.

"I told the doctor, 'Let me ask you a question. If it was your husband, son, daughter, mother, father, where would you send them?'" She said Encompass Health," Pender said.

Pender asked other trusted friends for their thoughts, and even received a recommendation from a stranger in line at the Walmart checkout when the topic somehow came up. It was a consensus—Johnson's best chance for recovery was at Encompass Health.



Francine's Stroke Recovery Story: Dancing Once Again

Beginning with the basics

Johnson arrived at Encompass Health unable to speak, swallow or sit up on the edge of the bed unattended as her brain continued to heal following the stroke.

"I remember going into the room and she was laying in the bed, and she was hard to rouse," said Van, therapy manager. "She was unable to speak and was moaning. I tried to use a communication board to communicate with her, but she couldn't even point to it. I knew she had significant impairments and it was going to be a long road to recovery."

Therapists started slowly, meeting Francine where she was in her recovery.

"We started with bed mobility," said Bridget, physical therapist. "We needed to work on sitting balance and just staying upright. That big aspect affects a lot of other mobility. You have to have balance to move into the chair, to stand and to walk, so we started with the basics."

In addition to her physical impairments, Johnson was also struggling to speak and swallow. Speech-language pathologists worked with her on the basics of language, starting with vowel formation. As she progressed, they implemented singing and other familiar actions. Electrical stimulation helped her improve her ability to swallow.

Dancing together again

Throughout her rehab stay, Johnson was very emotional—a common side effect of a stroke. Fortunately, Pender was able to be by her side as visitation rules allowed one family member to be

present for caregiver education.

When Johnson seemed particularly upset during therapy one day, Pender knew exactly what to do. He grabbed his phone and asked his bride to dance to their song.

Using a bodyweight support system, Van helped Johnson stand. Together, Johnson and Pender danced to their song and cried while those in the therapy gym cheered them on.

"I knew that that song would do something to her and kick start her psyche," Pender said. "I wanted her to remember my love for her. I wanted her to know that she was safe with me and that I was there."

That moment was a turning point of sorts for Johnson, who continued to make small but substantial strides in her rehabilitation.

"They saw that there were glimmers here and there, and they went after the little glimmers—the little lights—that she responded to and focused on those," Pender said. "The little things they were doing were changing her. She wanted to get better. She wanted to be my Francine again."

At the time of her discharge, Johnson still struggled to walk on her own and communicate, but the glimmers that sparked at Encompass Health continued to burn brighter.

Now, Johnson is completely independent. While she cannot read as she once did and still faces some lingering effects of aphasia, she is able to communicate her wants and needs. Most importantly, she and her husband are dancing to "Slow Jam" once again.

"I can see into our future, and it's fabulous," Johnson said. "It's good. It's all good."



For more information about **Encompass Health Harmarville**, call (877) 937-7342 or visit www.encompasshealth.com/harmarville rehab
For more information about **Encompass Health Sewickley**, call (412) 749-2396 or visit www.encompasshealth.com/sewickley rehab

Addiction

Substance Abuse from a Religious Perspective

By Fr. Michael W. Decewicz

“My God, my God, why have you forsaken me, far from my prayers, from the words of my cry? O my God, I cry out by day and you answer not by night, and there is no relief for me.”

These sentiments expressed in Psalm 22:1-3 have been on the lips and in the hearts of everyone who has or is suffering from a substance abuse disorder.

“My God, my God, why have you forsaken me,” spoken by Jesus on the cross, expresses the anguish of addiction.

We have come to realize that a substance abuse disorder is a disease; a progressive, fatal disease that can be treated but not cured. However, even though intellectually we believe this, we still emotionally treat the sufferer as culpable for the disease. We still apply a moral judgment to the addict/alcoholic, which only nurtures and nourishes that sense of shame and inhibits the sufferer from seeking treatment because they are locked in a moral abyss of self-loathing. All of this diminishes a person’s sense of self-worth that can lead to despair. This is the tragedy of moralizing substance abuse disorders.

Knowing that addiction is a disease and is and can be treated

on physical, mental, and emotional dimensions, it is imperative to understand that a substance abuse disorder is also a spiritual disease. The spiritual aspect of addiction must be treated to lead to remission.

I believe that shame is the manifestation of the spiritual wound that infects the person of the sufferer.

Shame shackles the sufferer in self-pity and victimhood, causing him or her to relive the past, destroying any sense of self-worth, and continuing to feed into the narcissism of the sufferer.

Shame tells the sufferer, “You are not worthy to be loved or healed; you are evil, worthless. Look at what you have done in your using life; look at the people you have hurt. You are simply worthless.” All of this noise allows addicts to maintain their position as the center of their universe, feeding their narcissism and building walls of isolation. This is the spiritual cancer that destroys the spirit.

I believe it is the obligation of religion, spirituality, and faith to combat the demon of shame that only speaks words of hate and death to the sufferer. It is



“We still apply a moral judgment to the addict/alcoholic, which only nurtures and nourishes that sense of shame and inhibits the sufferer from seeking treatment because they are locked in a moral abyss of self-loathing.”

-Fr. Michael W. Decewicz

faith’s job to exorcise the demon of shame so that the sufferer can live and love.

Our job as people of faith is to be an ambassador of love, not an arbiter of judgment. We are commissioned to carry the message of love to all God’s people, especially the hurting and broken. “Our Higher Power” is the essence or origin of life and love, calling us always to participate in the wonder and mystery of God’s abundant, extravagant, and unconditional love.

So to answer the theme posed for this article, “Substance Abuse from a Religious Perspective,” I would say that the cry, “My God, my God, why have you forsaken me?” is the universal prayer that comes from the very depths of the one who suffers from a substance abuse disorder and this prayer of

anguish leads the sufferer who embraces recovery to also say from the depths of his or her being, “All the ends of the earth shall remember and turn to the Lord.” (Psalm 22:28)

So religion, faith, and spirituality have a responsibility to embrace the sufferers, reminding them that they are sons and daughters of God, created in the Divine Image and entitled to a life that is joyful, happy, and free.

Fr. Michael W. Decewicz is Director of the **Addiction Recovery Ministry**. The Addiction Recovery Ministry provides support throughout the area, including the Bill Dixon Memorial Hope Fund benefiting patients of Gateway Rehabilitation Center and a brown bag lunch program for Light of Life Rescue Mission.



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Commonwealth Prevention Alliance Launches 2022 Prevention Happens Here Campaign

The Commonwealth Prevention Alliance (CPA), a private non-profit whose mission is to support prevention professionals in PA in eliminating substance misuse and risk-related behaviors, recently launched its 2022 Prevention Happens Here campaign to coincide with National Prevention Week May 8-14.

Created during Pennsylvania's Prevention Week 2022 celebration to raise awareness about the importance of substance use prevention and positive mental health, CPA is encouraging the use of the Prevention Happens Here campaign with organizations, coalitions, and communities across Pennsylvania to highlight the effectiveness of preventing substance use and mental health issues.

"Our hope with this campaign was to rally everyone to the cause to promote prevention efforts year-round by offering support and recognition to community prevention partners who work tirelessly toward building healthier kids, families and adults all across the commonwealth," says Jeff Hanley, CPA Executive Director. "Prevention efforts happen in many settings, and now, more than ever, we want to support our partners in their efforts to raise awareness for prevention and early intervention strategies that can reduce the impact of substance use and mental health issues."

The campaign was designed to aid prevention professionals in their efforts to reach parents, educators, doctors, law enforcement, faith-based and policy-makers, and raise awareness of the resources that are available to help them understand the role they can play in amplifying prevention efforts.

Prevention Happens Here campaign goals aim to:

1. Promote and highlight local prevention programming and initiatives

2. Support and recognize local, county, or state prevention partners

3. Involve communities and schools to raise awareness of effective programs that prevent substance use disorder and mental health issues

"We hope prevention partners across Pennsylvania will utilize the ideas, capacity building, tools, and resources to help individuals and

communities make substance use prevention happen every day," says Hanley. "Nurturing public awareness of ways to avoid problems with alcohol, tobacco, marijuana and other drugs, racism, LGBTQ+ prejudices, and mental health is a constant challenge. We need all the help we can get."



Mark Your Calendar -
Commonwealth of Pennsylvania
Annual Prevention Conference
June 21-24, 2022

The Commonwealth Prevention Alliance's Annual Prevention Conference will take place June 21-24, 2022, hosting both in person and virtual sessions at the Penn Stater Hotel in State College.

For more information, visit the website:
<https://commonwealthpreventionalliance.org/aboutconference/>

Materials for prevention professionals to raise awareness about substance use prevention and positive mental health available at PASTART.org

Addiction

By Nancy Kennedy

In the United States, the number one cause of death for young adults aged 18 to 45 is drug overdose, surpassing suicide, vehicle accidents, and gun violence, according to the Centers for Disease Control. The drug in the center of this tragic epidemic is Fentanyl, a highly addictive, synthetic opioid prescription medication that was initially developed as an analgesic (painkiller) for surgeons to use during and after surgery to treat or prevent extreme pain. Fentanyl is a very effective analgesic and it can create feelings of euphoria; in fact, Fentanyl is so potent that it is said to be 100 times more potent than morphine. These qualities mean that the drug's potential for addiction, abuse and overdose are very high: Fentanyl has become the drug at the center of the illicit drug market and the tragic, soaring number of opioid overdose deaths across the U.S. and in Westmoreland County.

In the period from May 2020 to May 2021, over 100,000 Americans died from drug overdoses, and in 64% of those deaths, the cause of death was Fentanyl or a Fentanyl analog, typically manufactured in Mexico. Making matters worse, Covid-19 has worsened the incidence of substance abuse disorder, including opioid misuse, as people experience the isolation, anxiety and despair brought by the pandemic.

Breane Minardi, MSW, Director of Clinical and Case Management Services for Westmoreland



Fentanyl Remains a Leading Cause of Death: Help is Available through Westmoreland County Drug and Alcohol Commission

County Drug and Alcohol Commission (WEDAC), states that Fentanyl overdose deaths increased 26% from 2020 to the present in Westmoreland County. In 2021, there was a total of 168 overdose deaths in the County, and Fentanyl was responsible for 137 of them. Males have a higher rate of overdose, with the greatest number of deaths occurring in the 31-40 age group; for women, the highest rate of overdose is in the 51-60 age group.

Much of the misuse of Fentanyl is unintentional. People may purchase drugs on the street, or in questionable non-medical settings, unaware that the drugs they buy contain Fentanyl in an amount that can be deadly. Fentanyl may be mixed into, or "laced" into, counterfeit narcotic pills that resemble common pain medications or into marijuana. Even the tiniest amount of Fentanyl can be deadly, so this "lacing" has been a major factor in the rising number of overdose

deaths. "Any use of street drugs includes a risk of death," Minardi says.

Director Minardi wants the community to know that despite widespread substance abuse and the alarming number of opioid overdose deaths, there is help available through her agency and a comprehensive network of services. WEDAC is a resource for individuals, families, professionals and organizations; it funds and contracts treatment programs and case management services at the local level, using state and federal funds. The agency offers in-house community prevention programs and an innovative Narcan Mail-In Request program. "We are here to help anyone who is struggling with addiction," Minardi says. "If you are uninsured, or underinsured, we can provide access to addiction treatment. We break all

the barriers. We provide Narcan to anyone who needs it."

Every home should have Narcan, Minardi believes. "An opioid overdose can happen in any home. An older adult on pain medication may accidentally take a double dose of her pain medication. An unattended child may get into the medication. A teenager visiting for a holiday could go into the bathroom and overdose. Narcan is free, easy to use and life-saving. If you have Narcan and know how to use it, you can prevent an overdose death."



The **Mail-In Narcan** program provides kits to anyone who wants one.


It can be reached by visiting www.wedacinc.org or calling 724-243-2220 extension 4450. The web site includes an instructional video.



Westmoreland
Drug & Alcohol Commission, Inc.

To decrease overdose deaths and support individuals with substance use disorder, Westmoreland Drug and Alcohol Commission, Inc. is offering Mail-In Narcan to Westmoreland County residents, professionals, and organizations throughout the county.

You can access mail-in Narcan by visiting: www.wedacinc.org or calling 724-243-2220 ext: 4450




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Addiction

Recognizing and Responding to Opioid Overdose: Gateway Experts Help You Prepare

By Nancy Kennedy

If you encounter or witness a loved one, friend, co-worker or even a stranger having a substance use emergency such as opioid overdose, will you recognize what is happening? Will you know what to do? Do you have the essential knowledge, skills, and tools to save that person's life? Do you have naloxone, otherwise known as Narcan, the opioid overdose reversal medicine, and do you know how to use it?

The expert professionals at Gateway Rehabilitation Center encourage everyone to learn how to prevent, recognize and manage a substance use disorder emergency, including opioid overdose. "Be prepared. Everyone should know how to help a person who has overdosed," says Julia D'Alo, MD, a board-certified Addiction Medicine and Emergency Medicine specialist and Chief Medical Officer at Gateway. Substance use disorders (SUD) occur when the recurrent use of alcohol and/or drugs causes clinically significant impairment, including health problems, disability, and failure to meet major responsibilities at work, school, or home.

SUD is so widespread across all levels of the US population that it is the leading cause of death and affects nearly every

American family in some way. Over 500,000 Americans have died of opioid overdose since the opioid epidemic began during the 90's, and it continues to be a major public health crisis.

"If you know a person who is struggling with opioids, or is taking a prescription opioid for pain management, or if you are a user and use with others – you may need to intervene one day to keep someone alive," Dr. D'Alo says. "You never know who may need help; you can come across an unresponsive person anywhere, at home, at work or in public.

"Opioids include heroin and prescription medications such as Fentanyl, Vicodin, OxyContin, Percocet, Morphine, Dilaudid and Tramadol to name a few. If you are using an opioid or have a loved one who is, you need to obtain Narcan and know the signs of overdose. Narcan is easy to get, easy to use and it works quickly. It's a nasal spray that reverses the effect of opioids within minutes."

Laura Bisbey, CAADC, LPC, Regional Director of Inpatient Services at Gateway, describes both early and later signs of overdose: "Early symptoms of overdose include falling asleep, coming in and out of consciousness, and becoming limp. The breathing may be slow and shallow, and eventually absent. There may be gurgling noises or choking. The

pupils may be pinpoint. The skin and nails develop a bluish discoloration. The person does not respond to their name or to pain."

Bisbey says that if Narcan is available, give it immediately and call 911. "It's easy to give – put it in the nostril and push the button. Wait two to three minutes and if there's no response, give it again. Sometimes a person needs multiple doses until they respond. If it does not work, it's not an opioid overdose. However, there is no risk to giving Narcan if it is not an opioid overdose. If you do not have naloxone and the person does not have a pulse, start CPR, if you are qualified, until the EMS arrives."

D'Alo says that persons with SUD are frequent visitors to the Emergency Department. "We see many patients with SUD. It may be that they are experiencing a medical problem that the SUD is the cause of or contributing to. While opioid overdose is the most common SUD emergency, there are additional critical substance-related situations that require immediate emergency care. These include complications of withdrawal or detoxification, suicide threat or attempt, alcohol poisoning or medical problems due to substance use, such as infections and injuries."

Narcan is not a substitute for the ER, says Laura Bisbey. "You



Dr. Julia D'Alo and Laura Bisbey

still have to receive medical care. After Narcan, your system has been cleared of the opioid; you go into immediate withdrawal and will need to be connected to recovery resources. Gateway provides a Certified Recovery Specialist, available 24/7, in St. Clair Health's ER to discuss options with the person. They are peers who have lived experience in recovery themselves."

Beyond the immediate medical treatment, the ER is a window of opportunity, uniquely positioned to help a person with SUD, adds Dr. D'Alo. "There is a period of vulnerability following overdose, and you will be treated with care, dignity and respect. Recovery is always possible and emergency care can be a very effective pathway to recovery."

To learn more, visit www.gatewayrehab.org

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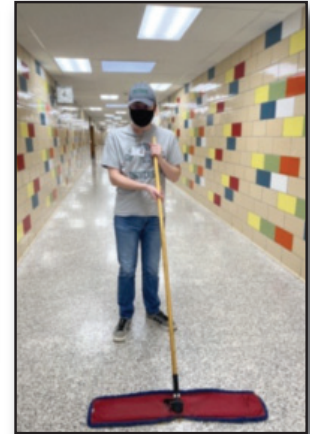
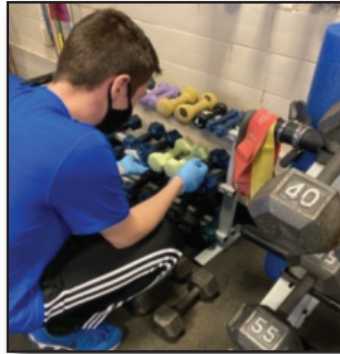
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Transition Services at Highlands Hospital Regional Center for Autism Offers Employment and Life Skills

Mason is a 21 year old student who began attending Highlands Hospital Regional Center for Autism in 2014, and he will be graduating from HHRCA in August 2022. Mason is currently a student as well as a staff member at Highlands. First thing in the morning, Mason (and a staff member) goes to the Wellness Center at the hospital to clean the wellness area and the equipment. After returning from the Wellness Center, Mason works on his programming and IEP goals (which are mostly transitional based) until lunch, and in the afternoon he works as a janitorial staff at the school. Mason has his own badge, clocks in/ out, and cleans the school thoroughly



and independently. Mason's responsibilities include, but are not limited to: sweeping/ vacuuming/ mopping the classrooms/ hallways, cleaning all bathrooms, emptying all garbage cans, sanitizing surfaces, cleaning windows, and replenishing soap/ toilet paper/ paper towels in the bathrooms/ classrooms as needed.

Mason is the first student at HHRCA to be employed through the school, and we are excited to continue to offer these types of opportunities for our students in the future. Upon graduation, Mason plans to continue his employment at Highlands as part of the janitorial staff.

Life Skills and Transition Services at HHRCA

Upon turning 14, our student's IEP goals and programming begin to gear more towards life skills/ transition goals. Before assigning/ implementing transition goals, the student's strengths, interests, and preferences are always considered first. Transition planning is used to identify and develop goals which need to be accomplished during the school year to assist the student in meeting their post-high school goals in the areas of post-secondary education, independent living, and employment. We have a variety of life skills goals that are worked on in the classrooms, such as writing a check, using a cash register, and

self-care. In addition, we also have a life skills classroom, where students can work on goals such as vacuuming, making the bed, washing dishes, and hanging clothes. We are always brainstorming new and improved transition goals that individually meet our student's post-high school needs to help them transition to being as independent as possible.

For more information on the **Highlands Hospital Regional Center for Autism**, call (724) 603-3360 or visit highlandshospital.org



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Can Autism be Detected at an Earlier Age?

Despite the fact that many children with autism are not diagnosed until after age 3, the Autism Foundation indicates that a number of symptoms may be detected by 6 months, or even earlier. Some behavior to look for in children newborn to age 1 would be smiling, looking at people or sounds, babbling or making sounds, responding to their name, crawling, or using their hands and passing things between them.

Between 12 and 18 months, children can be diagnosed more reliably as their behavior has been monitored for a longer period of time. Toddlers in this group should be able to say up to 20 words, know the names of objects like foods or colors, walk upstairs with support, and understand simple requests.

By the time children are 2 years old, they should be able to climb, play games with other children, speak in short sentences, remember the names of objects and point them out, and follow requests such as "Pick that up and give it to me." By age 3, they should express more emotions, show affection for others, be able to dress and undress themselves, speak in short sentences, and be able to turn door handles.

One of the most important things to keep in mind, however, is that all children develop differently, and the ability to not perform all of these functions by a certain age does not necessarily mean a problem exists. Any questions you have should be discussed with the child's doctor. (autismdfw.org/how-early-can-an-autism-diagnosis-be-made)

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If you are interested in supporting Highlands Hospital Regional Center for Autism, please visit our website at www.highlandshospital.org or contact Vicki Meier, Executive Director, Highlands Hospital Foundation at (724) 626-2440.

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Adjusting plans is nothing new for many of us. Celebrations like birthdays, family parties, and holidays bring the need for modifications to a whole new level. While we're excited to see family and friends at these times, the gatherings are often overwhelming and stressful for families and people with disabilities. Here are some tips we hope are helpful for you.



Autism and Special Occasions

Make a Sensory Kit

It seems like we all have extra tote or drawstring bags around the house. Grab one and put some of your or your loved one's favorite comfort items inside. Do they or you need noise cancelling headphones if conversations/music/singing get to be a little too boisterous?

Is there a certain sensory item that always seems to calm? Grab those items, along with favorite sensory toys, throw them in your bag, and you have a sensory kit. You can keep this kit in the car and have it for any situation that may not be totally sensory friendly.

Try Hosting at Your Home

Yes, hosting a party or meal, no matter the size, can be a monumental task, with a lot of expense and planning. It can be the best option for your family to keep you or your loved one with autism comfortable. The advantage of hosting is staying in a familiar environment and controlling the menu. Let people bring food or drinks, or if you would rather not do that, trade this idea to let them set up or help do the dishes. Some people prefer that over cooking - just ask!

If you are not hosting, try some or all of these to help make the day enjoyable.

Check Out the Menu

We know that autism can mean special diets and sensitive eaters. Hopefully you're going to a home with an understanding host. Talk to them beforehand. Explain your or your child's dietary restrictions, and see if there is something that is already within that diet. If not, ask to bring some favorite foods to share, or that you or your loved one can eat during mealtime.

Ask About a Safe Space

When talking to the host about the menu, also ask about a possible quiet spot. Hopefully there is a guest bedroom, home office, or quiet corner to set up with the sensory kit you have, just in case things get overly celebratory.

Practice Flexibility

Often people are able to engage comfortably in excitement for a shorter time than those without disabilities. It is okay to leave early or show up late, just for dessert, for instance, if you talk this over with the people you are visiting. If you have the luxury of two caregivers, one could arrive late or leave early, allowing some family members different schedules on that day.

It's OK to Say No

Sometimes simplifying can be fun and easier. If invited somewhere, and you just don't think you or your family has it in you to pregame with all of the necessary sensory things, it's ok to say "no thanks" and have quiet fun at home. Take some time to enjoy the calm and a break from the usual hustle and bustle.

> If you have questions, contact **The Autism Connection of PA** at (412) 995-5000 x 406, email help@autismofpa.org, or via our website at www.autismofpa.org. We are here for you for all of your needs in all ages, all stages!

AUTISM QUESTIONS?

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A Message from Rachel Conner, Director of Autism Services

Highlands Hospital Regional Center for Autism



In affiliation with



Cleveland Clinic Children's
Center for Autism

It was in January that I was honored to be appointed as the new Director for ***Highlands Hospital Regional Center for Autism***. I began working at the center in 2017 as a classroom teacher. It has been wonderful being a part of this life changing program and helping it develop into what it is now. ***Our affiliation with Cleveland Clinic Children's has also allowed us the unique opportunity to partner with one of the most prestigious Autism programs in the world.***

We currently have 44 students, from nine school districts, across three counties. Our youngest student is six and our oldest students are 22. We had our first student graduate in 2021 and we have two more students graduating this year. Thanks to our dedicated staff, our students continue to make monumental progress in their academics, functional living skills, communication, socialization and behavior.

We are looking forward to our summer outreach programs made possible by Evan's Destination Day Camps. Our summer themes include Water and Outdoor Week, Animal Week, Carnival Week, and Sports Week. Our teachers and staff do a wonderful job planning fun activities to encompass the themes. I look forward to helping the school continue to grow and expand in the years to come. All of us at the center are committed to staying the course for the beautiful students and families affected by Autism, all across the Laurel Highlands region and all across Southwestern Pennsylvania.

If you would like more information regarding the center, **please contact us at (724) 603-3360**. If you are interested in a career in special education and working with children with Autism, please contact us to discuss a rewarding job at our school. If you would like to donate to special projects within our Regional Center for Autism School, such as a new adaptive playground, contact Vicki Meier, at 724-626-2440 or visit our website at highlandshospital.org and click on the support link. We appreciate the continued support that helps to make a positive difference in the lives of our students and their families.

Sincerely,

Rachel Conner, Director of Autism Services
Highlands Hospital Regional Center for Autism





Helping to Reduce the Risk of Childhood Problems

By Lois Thomson

The birth of a baby is a joyous occasion, and in some cases mothers can take precautions to help make sure their child is as healthy as possible, both before and after the baby is born.

SIDS AWARENESS

The good news is that the rate of SIDS (Sudden Infant Death Syndrome) and other sleep-related deaths has decreased over the years. However, there is still work to do.

More than 1 out of 3 of sudden and unexpected infant deaths that occur in the United States each year are from SIDS. While research shows that unsafe bedding, such as loose blankets in a baby's sleep area, is a leading cause of infant death, there is currently no known way to prevent SIDS. However, following these recommendations reduces the risk of death or injury from suffocation or strangulation:

- The back sleep position is the safest position for all babies, until they are 1 year old. Babies who are accustomed to sleeping on their backs, but who are then placed on their stomachs – such as for a nap – are at very high risk for SIDS.

- Never place a baby to sleep on a soft surface, such as on a couch, sofa, pillow, quilt, sheepskin, or blanket, as these can be very dangerous. Do not use a car seat, stroller, swing, infant carrier, infant sling or similar products as a baby's regular sleep area.

- As there are no known ways to prevent SIDS, avoid products that make claims to help reduce the risk. There is no evidence to show that wedges or other products that claim to keep infants in a specific position are effective. In fact, many of these are associated with injury and death, especially when used in baby's sleep area.

- Breastfeeding has many health benefits for mother and baby. Babies who breastfeed are at lower risk for SIDS than are babies who were never fed breastmilk. Additionally, a longer duration of breastfeeding leads to lower risk.

- Give your baby a pacifier for naps and nighttime sleeping. Pacifiers reduce the risk of SIDS for all babies, including breastfed babies.

In addition, mothers themselves can help lower the risk by getting regular prenatal care during pregnancy, and by avoiding smoking, drinking alcohol, and using marijuana or illegal drugs during pregnancy or after the baby is born. (www.webmd.com/parenting/sids-prevention#1)

TRYING TO PREVENT PREMATURE BIRTHS

According to the CDC, approximately 1 in 10 – or nearly 400,000 – babies are born preterm each year, or before completing the normal 37 to 40 weeks of pregnancy. These babies miss out on a vital period of growth and development; for example, the brain, lungs, and liver need the final weeks of pregnancy to fully develop.

Premature birth rates did decrease between 2007 and 2014, and this was partly the result of the decline in the number of teens and young mothers giving birth; however, the preterm rate rose each of the next five years. Early birth is a leading cause of infant mortality, and babies who do survive can have short- and long-term health issues, including breathing problems, feeding difficulties, developmental delay, cerebral palsy, or vision or hearing problems.

Preventing early births is a challenge because there can be a number of causes, and those causes may be complex. However, some factors known to increase the risk of preterm birth are: young or advanced age of the mother, cigarette or substance abuse, stress, depression, and carrying more than one baby. The CDC has also identified five important strategies women can employ to help reduce their risk of preterm birth and improve their general health:

- Aim for an ideal length of time – at least 18 months – between pregnancies

- If you are between 18 – 44, seek access to health care, before and between pregnancies to help manage chronic conditions and modify other risk behaviors, such as smoking

- Identify women at risk for giving birth too early and offer effective treatments to prevent preterm birth

- Discourage deliveries before 39 weeks without a medical need

- When in vitro fertilization is used, elect to transfer just one embryo, as appropriate, to reduce multiple births

(www.cdc.gov/reproductivehealth/maternalinfanthealth/pretermbirth)

CHILDREN'S HEALTH

SPINA BIFIDA

Spina bifida is a type of birth defect in the neural tube that occurs when the spine and spinal cord don't form properly. Normally, the neural tube forms early in pregnancy and closes by the 28th day after conception. In babies with spina bifida, a portion of the neural tube doesn't close or develop properly, causing defects in the spinal cord and in the bones of the spine.

The two most common types are spina bifida occulta, which is the mildest and most common, and myelomeningocele, which is the most severe. Occulta results in a small separation or gap in one or more of the bones of the spine (vertebrae), and many who have it don't even realize it. Children with spina bifida occulta typically don't have any symptoms or complications, so routine pediatric care is usually all that is needed.

In myelomeningocele, the spinal canal is open along several vertebrae in the lower or middle back. The membranes and spinal nerves push through this opening at birth, forming a sac on the baby's back, often exposing tissues and nerves. This makes the baby prone to life-threatening infections and may also cause paralysis and bladder and bowel dysfunction.

Myelomeningocele is usually diagnosed before or right after birth, and these children should be seen by doctors throughout their lives, and families should be educated on the different complications to watch for. Spina bifida may cause either minor or more significant physical disabilities. The more significant ones include walking and mobility problems; orthopedic complications, such as scoliosis, abnormal growth, dislocation of the hip, bone and joint deformities, and muscle contractures; bowel and bladder problems; and accumulation of fluid in the brain.

While doctors aren't certain what causes spina bifida, some of the risk factors they have identified are a family history of neural tube defects, unchecked diabetes, and obesity. Additionally, one of the main problems is folate deficiency. Folate is the natural form of vitamin B-9, and is important to the development of a healthy baby. For that reason, having enough folic acid in your system by the early weeks of pregnancy is critical; however, because many women don't learn they are pregnant during this time, experts recommend that all adult women of childbearing age take a daily supplement of folic acid. Several foods are also fortified with folic acid, including enriched bread, pasta, rice, and some breakfast cereals.

(www.mayoclinic.org/diseases-conditions/spina-bifida)

New TEMP Program at The Children's Home Gives Parents Peace of Mind

Caring for Children With Complex Medical Needs In An Emergency

By Lois Thomson

The Children's Home of Pittsburgh and Lemieux Family Center is home to the Pediatric Specialty Hospital, which is a 30-bed acute care hospital and can care for children from birth to the age of 21. The Children's Home is different from other facilities because the staff here are focused on what the patients need and what the families need, says Lisa Houlihan, Director of Nursing. To further meet those needs, The Children's Home has added a new program – TEMP (Temporary Emergent Medical Pediatric) – to help ensure the safety of children.

As Houlihan explained, when an unexpected issue arises and no one is available to care for a child with medical complexities, TEMP can help the family to make certain the child receives the proper medical care for a temporary period of time. She gave examples of a caregiver becoming ill and having to go to the hospital; a funeral being set in another state and the family not being able to take care of the child. Even something as unforeseen as a loss of electricity that could interrupt the child's care until it can be restored is a circumstance that would qualify for a TEMP stay.

The TEMP program was designed to care for children with complex medical needs when there is a disruption in their everyday routine. Houlihan explained that a TEMP stay could be anywhere from one to two days or a few weeks. "We've always been open to helping families in any way we can, and there's such a need when a child is at home and the family needs some help. Our team identified the need for a program like this to support families so that they can continue to be successful in the home."

The program involves working closely with the insurance companies, and Houlihan said, "We let them know what's going on and they determine how long the stay will be, and then we work to obtain an authorization for the stay." In this way, TEMP is good for both the families and the insurance companies. "It's enabled us to work closely

with each insurance company, to prevent an unnecessary Emergency Department visit or an inpatient hospital stay; they can come to The Children's Home instead."

When families need it most, The Children's Home provides an option for their child's care through the TEMP program. "We can give them peace of mind that the child can come here, we'll take care of them, and when they're ready, the child will go back home and they're not going to get a bill in the mail."

Those seeking help can call the admissions case manager, who would determine if the child would be an appropriate admission to the facility. "We've done a lot through direct parent referrals. We also take admissions from physician office referrals, and outside hospitals. We realize that to parents, there is nothing more important than caring for their child. We hope that the TEMP program can serve as a resource to families when unforeseen circumstances arise. "It's such a great opportunity for families."



"We realize that to parents, there is nothing more important than caring for their child. We hope that the TEMP program can serve as a resource to families when unforeseen circumstances arise."

*Lisa Houlihan,
Director of Nursing*



For more information, call the admissions case manager at (412) 345-7983, email admit@chomepgh.org, or visit www.childrenshomepgh.org.

The Life and Times of Baby Boomers

The Ninth of Numerous Fears – Arthritis

By Jan Ricks Jennings

Baby Boomers harbor several legitimate, concerns about their future. Near the top of the list are arthritic related issues.

Baby boomers everywhere are now experiencing what they thought they never would: old age. Lots of the people born between 1946 and 1964 (the usual definition of a boomer) are now eligible for senior citizen discounts at restaurants. Many have grandchildren. And many have sore, creaky joints, the ultimate badge of aging.

Arthritis is very common but not well understood. Actually, "arthritis" is not a single disease; it is an informal way of referring to joint pain or joint disease. There are more than 100 types of arthritis and related conditions. More than 50 million adults and 300,000 children have some type of arthritis. It is most common among women and occurs more frequently as people get older.

Common arthritis joint symptoms include swelling, pain, stiffness, and decreased range of motion. Symptoms may come and go. They can be mild, moderate, or severe. They may stay about the same for years but can progress or get worse over time. Severe arthritis can result in chronic pain, inability to do daily activities and make it difficult to walk or climb stairs.

Arthritis can cause permanent joint changes. These changes may be visible, such as knobby

finger joints, but often the damage can only be seen on X-ray. Some types of arthritis also affect the heart, eyes, lungs, kidneys, and skin as well as the joints.

Types of arthritis include:

- Degenerative Arthritis
- Inflammatory Arthritis
- Infectious Arthritis
- Metabolic Arthritis

What You Can Do

The most important first step is to get an accurate diagnosis of what's causing your joint pain. Talk to your primary care doctor. You may be referred to a rheumatologist or orthopedist, doctors who specialize in arthritis and related conditions. There are many things that can be done to preserve joint function, mobility, and quality of life. Learning about the disease and treatment options, making time for physical activity, and maintaining a healthy weight are essential. The Arthritis Foundation has many resources for learning about arthritis, connecting with other people, and helping to raise funds for a cure.

Get Expert Advice

According to the Centers for Disease Control and Prevention, 54 million Americans have arthritis –and by 2030 that number is expected to jump to 67 million. Arthritis or no, now is the time to start taking care of their joints. Most of all, keep moving - without overdoing it.

Whether it's a long walk with the dog or a bike ride, regular exercise will keep joints flexible. As muscles become stronger and tendons more limber, the pain and stiffness start to fade.

For patients with osteoarthritis, there's another important benefit of exercise. Regular activity provides lifeblood to the cartilage that cushions joints. Unlike most tissues in the body, cartilage doesn't receive nutrients from the bloodstream. Instead, it gets nourishment from fluid (called synovial fluid) in the joints. When a joint moves, the fluid sloshes around, giving the cartilage a healthy dose of oxygen and other vital substances. As an added bonus, regular exercise encourages the body to make more synovial fluid.

According to a recent report from the American Academy of Orthopedic Surgeons, today's boomers are much more active than previous generations. And that's part of the problem.

While a sensible amount exercise offers powerful protection against arthritis, many baby boomers are getting too much of a good thing. Nicholas DiNubile, M.D., an orthopedic surgeon, and best-selling author, summed up the situation at a conference of the American Academy of Orthopedic Surgeons. "Stiff joints, aching muscles - many of these 'aging pains' are actually due to overuse. Quite often we find that baby boomers have participated in a sports activity years ago as young adults and think they can resume the same activity in the 40s or 50s without any modifications."

Even if you aren't an athlete, your joints may suffer from normal wear and tear. According to the American Academy of Orthopedic Surgeons, doctors perform more than 800,000 knee and hip replacements every year, and that number is expected to grow. Some of the new materials for artificial knees and hips can last longer than the old ones – about 25 to 30 years. The good news is that with joint replace-

ment surgery, many people with severe arthritis can resume a full and active life.

Playing it safe

The American Academy of Orthopedic Surgeons offers the following tips to help baby boomers avoid injuries:

• **Before engaging in vigorous exercise, take the time to stretch your muscles.**

• **Avoid the "weekend warrior" syndrome.** Instead of pushing yourself to the limit two days a week, try to get at least 30 minutes every day.

• **Use the 10 percent rule.** If you normally jog one mile a day, next try going 1.1 miles, not four.

• **Invest in good equipment – and yourself.** Good shoes and other gear often make the difference between a healthy workout and an injury.

• **Remember, variety is a virtue.** A fitness program that combines several different kinds of exercises – including aerobic activity and strength training – will help you keep your joints strong and flexible.

• **Listen to your body.** Your joints will let you know when you've gone too far.

• **Keep your weight down.** A study published in the Annals of Internal Medicine found that women who lost an average of 11 pounds over 10 years cut their risk of osteoarthritis by half.

Albert Einstein is quoted as saying that "all people are different." So, it is with our life's journey with arthritis. Each of us have a different journey with arthritis and it is important to see competent medical advice to make our journey less painful.

Jan Ricks Jennings is a Senior Executive with Senior Management Resources, LLC. He owned American Healthcare Consulting, LLC, a national healthcare consulting firm based in Pittsburgh and has served eight hospitals and healthcare systems as CEO. He can be reached at Jan.Jennings@EagleTalons.net.

East Suburban Citizen Advocacy (ESCA) presents the 2nd Annual



Super Fun Run for Everyone 5K

June 5, 2022

8:00 am check in time
9:00 am race starts

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ESCA 2022

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...or use QR code

Living With A Disability

East Suburban Citizen Advocacy: Enhancing the Lives of Individuals With Developmental Disabilities



East Suburban Citizen Advocacy (ESCA) has been a small Non-Profit Organization since 1988 in the Westmoreland and eastern Allegheny County areas and has been dedicated to enhancing the lives of people with developmental disabilities. ESCA networks to identify and support advocates who give a voice to the most vulnerable people with disabilities.

We focus on serving the unique needs of each individual. After spending time with a person and getting to know their needs, we look for individuals or groups in the community with the appropriate skills, interests, and qualities to be advocates. We introduce people to each

other and provide ongoing support to the relationships. Our advocates represent the best interests of the person with the disability with as much vigor and concern as he or she would act on their own behalf. Some examples of advocacy situations we have experience in are the Individual Education Plan (IEP) process, Intellectual Disability Disorder/Autism Waiver (IDD/A) system process, Early Intervention, Abusive situations, Legal Guardian, Rep-payees, and Transitional age resources. Our advocacy efforts remain FREE to those who need them.

> Visit www.eastsuburbancitizenadvocacy.org for more information.



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CANNABIS HEALTH

By Daniel Casciato

Anxiety is something that affects millions of people around the world. Many people struggle with anxiety every day.

Medical marijuana has been proven to reduce anxiety and stress. In fact, there are studies showing that medical marijuana reduces anxiety better than anti-anxiety drugs. It works naturally without any side effects and relieves your body from tension and anxiety, according to Shelly Hutchison, also known as Nurse Shelly in the medical marijuana community. Nurse Shelly is the founder of Medical Marijuana Specialists.

Anxiety was only added to the list of qualifying conditions in 2019.

What is anxiety?

Anxiety can be described as a feeling of worry or fear about future events. It's not uncommon for someone who suffers from anxiety to feel anxious all the time.

There are many different types of anxiety. Some common forms include: social anxiety, panic attacks, generalized anxiety disorder, obsessive compulsive disorder (OCD), post-traumatic stress disorder (PTSD) and more.

People often experience a wide range of symptoms when suffering from anxiety, including:

- Difficulty concentrating
- Feeling restless or fidgety
- Having trouble sleeping at night
- Trouble falling asleep during the day
- Being easily startled by loud noises
- Fear of being in new situations
- Avoiding certain places or things
- Not wanting to do anything

How does cannabis affect your body?

Cannabis contains over 100 cannabinoids, which are responsible for its medicinal properties. The two most well-known cannabinoids are THC and CBD. Both compounds work together synergistically to create an effect on the human body.

THC is the psychoactive compound found in cannabis. This compound interacts with receptors throughout the brain and central nervous system. When THC binds to these receptors it triggers changes in behavior and perception.

Unlike THC, CBD does not produce euphoric effects. Instead, CBD works to



balance out the effects of THC.

"In the right combination, they can be the perfect remedy for tons of different ailments, such as anxiety," says Nurse Shelly.

Does marijuana help anxiety or make it worse?

Medical marijuana is one of the safest substances available. There are no known long term health risks associated with using marijuana. However, medical marijuana may still affect the way the brain processes information.

"High levels of THC have been associated with elevated heart rates and racing thoughts," Nurse Shelly says. "So, if you aren't a seasoned consumer, even a small dose can cause this. It is best to choose a strain with CBD levels to offset the THC. A professional at a legal dispensary will help you choose the right strain for your condition and tolerance."

A good rule of thumb is to always start low, she notes.

"You can always take more if you need to. You want to start with a low dosage and reach your sweet spot," she adds. "This is the point where you're finding relief from your anxiety but not going overboard where you don't like how you're feeling."

Is marijuana safer in treating anxiety than Xanax?

Yes, according to Nurse Shelly. The United States safety index classifies Xanax as a Schedule 4 and marijuana a Schedule 1, meaning Xanax should be safer than marijuana. In fact, benzodiazepines have been



Shelly Hutchison

Effects of Medical Marijuana on Anxiety

linked to a large amount of lethal overdose-related deaths.

Recent studies report decreased benzodiazepine use among patients who started medical cannabis therapy. Results show more than 45% of patients stopped using benzodiazepines completely within six months.

It was reported that marijuana therapy for anxiety provided a better overall sense of being.

"The majority of our patients are using medical marijuana for anxiety and chronic pain, but it can also be used to relieve symptoms of autism, cancer, Parkinson's and other chronic illnesses," says Nurse Shelly.

While Medical Marijuana Specialists does not dispense medical marijuana, they have a comprehensive list of resource dispensaries on their website.

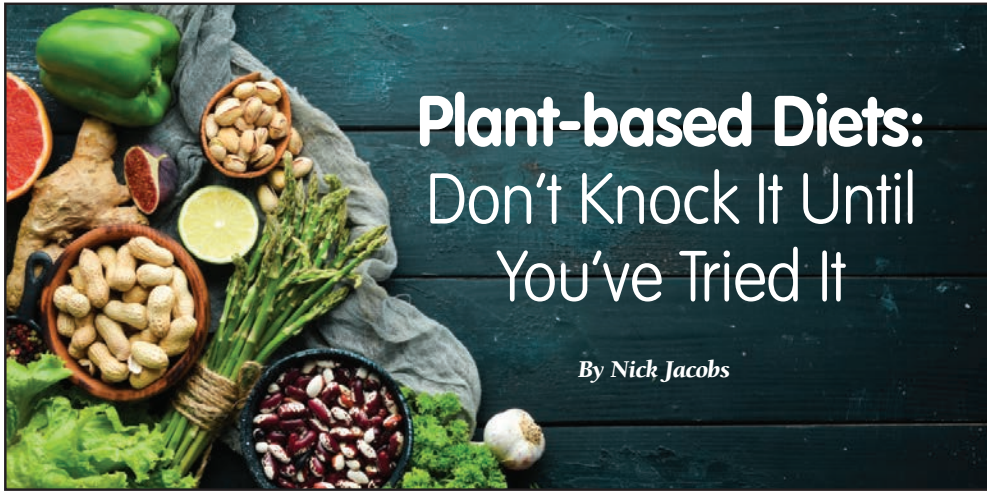
"I highly recommended that each patient sit and have a pharmacist consult when it's their first time visiting a dispensary," says Nurse Shelly. "Speak with the pharmacist about your diagnosis and symptoms, and let that pharmacist recommend a strain and a product that they believe will help you with your conditions."

Currently, there are 23 conditions that can qualify you for your medical marijuana card, the entire list can be found on their website: www.getyourIDcard.com

"The process to obtaining your medical marijuana card is extremely easy," adds Nurse Shelly. "We will walk you through the entire process – you can have your card in as little as a week!"



For more information, visit www.getyouridcard.com.



Plant-based Diets: Don't Knock It Until You've Tried It

By Nick Jacobs

One of my granddaughters recently decided to become a vegetarian. Maybe she was influenced by her friend who, at age 11, declared herself a vegetarian, but no matter: she has been sometimes endlessly questioned by relatives as to how she will be able to physically sustain herself as a person surviving on a plant-based diet.

After being a vegan myself for the past 12 years, let me assure you this article is not about converting anyone to a lifestyle they don't choose. God tried that in the Garden of Eden with the apple—and look how that worked out!

In a recent newsletter from the Academy of Integrative Health and Medicine promoting a presentation by Dr. Deanna Minnich, a summary of her topic was provided in which she elaborates on her presentation entitled “Eating the Rainbow.” In it, she references scientific information regarding the benefits of eating fruits and vegetables - all types, colors, shapes, and sizes of both: a virtual rainbow of healthy eating.

In her presentation, Dr. Minnich elaborates on both the psychological and the physiological benefits of following this type of diet, ranging from the myriad vitamins and minerals contained therein to the phytonutrients that can lead to improved cell structure and function—ultimately resulting in significantly improved health outcomes.

So, let's take a deeper dive into this concept through the works of Dr. Dean Ornish, author Dan Buettner, and Dr. Mimi Guarneri, who are acknowledged experts on this topic. First, it's not just about food. I've had numerous physicians claim that diet may represent only about 10 percent of potential ammunition needed to meet the challenges presented to us by our genetics.

As Drs. Ornish and Guarneri have taught us, it is a combination of diet, exercise, stress management and social support that ultimately provides us with the right tools needed collectively to live a long, healthy, and hopefully, happy life. But even with that magic mix of ingredients, when genetics or genetic alterations created by exposure to toxins take over, even those efforts can prove

to be moot.

We know that controlling one's weight, reducing consumption of sugar and other inflammatory disease contributors, getting minimal exercise even a few days a week, and working to reduce stress can reverse Type-2 diabetes, and in some cases, as proven by Drs. Ornish and Guarneri, can even reverse the ill-effects of heart disease.

In the international geographic areas researched by Dan Buettner for his books and articles on the Blue Zones—locations where he says, “people forget to die”—he found that plant-based diets are often the core of their daily food intake. Think about it: How many highly successful animals eat only plants, fruits and vegetables?

Enough protein can be garnered from legumes, wheat, barley, soy, and other plants to not only sustain human beings but also to allow them to physically thrive.

Remember, we are living in a country that is built on capitalism, and we are inundated daily with the messages of those corporations and industries that profit from creating more and more consumers of their goods. When you stop to read a label on any of our processed foods, it should make you take at least a few steps backwards to examine the benefits or lack thereof from filling our bodies with often untested, combinations of chemicals, dyes and additives that may make the food look better, crunch louder, or grab onto those pleasure zones in our brains that love sweet or salty flavors. As the computer scientists say, “Garbage in, garbage out.”

Simply stated, it cannot hurt you to eat more vegetables and fruits. Scouts honor. But we all must choose for ourselves. As the author, Sam Walter Foss, in his poem “The Calf Path,” says, “Ah, many things this tale might teach—But I am not ordained to preach.”



Nick Jacobs is a partner with SMR, LLC and founder of the Academy of Integrative Health and Medicine, former board member of the American Board of Integrative Holistic Medicine, Jacobs maintains a website, Healinghospitals.com.

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Senior Guide

• Senior Living Options • Senior Resources • Home Care
• Hospice • Services that Support Independent Living

WCHA Makes Way for Grand View Senior Residences



Westmoreland County Housing Authority (WCHA) is preparing the groundwork for construction later this year of its newest apartment building for low-income seniors in Irwin Borough – Grand View Senior Residences.

With completion expected in September 2023, the building will feature fifty (50) apartments, forty-six (46) one-bedroom and four two-bedroom units, for residents aged 62 and older, including eight set aside preference for veterans; six fully accessible, and one for the hearing-vision impaired.

It will be the authority's third new construction project in the last decade, joining South Greengate Commons in Hempfield Township, which opened in 2013, and its adjoining sister facility, Odin View Apartments, which was completed 2020. Both facilities represent 92 units of affordable senior 62+ housing.

"Our senior population continues to grow and we as an authority have made it a priority to build new facilities. These projects are critical to provide expanded opportunities for seniors to have quality places to live within Westmoreland County," Washowich said.

All of the units will be visitable with an "age-in-place philosophy" – allowing seniors to continue to lead productive independent lives.

In addition to the spacious apartments, the building's amenities will include a first floor Community Room with an additional kitchen area, a connecting porch of similar scale, centrally located common space screened-in porches on two to four floors, four laundry rooms, individual resident storage units on each floor and a dog washroom.

The ground-floor amenities offer engaging community space that connects to the exterior through patios and outdoor program areas promoting a healthy active lifestyle including a concrete walking trail, community gardening space, and a fenced play area for dogs.

Located off Laurel Avenue, directly behind Norwin Public Library,

Grand View has received wide support from state, county and local government officials.

"Grand View Senior Residences will serve as the home for county seniors for years to come," said Washowich.

Grand View Senior Residence' location offers convenient access to community amenities as it is near the Route 30 corridor. The Grand View site will include public transportation, easy access to health and retail stores, home health agencies and medical facilities.

A partnership with the Westmoreland County Veterans Association (WVA), as the lead agency, has the collaborative capacity to serve the targeted Supportive Housing Veteran population.

Veteran-specific services will be provided by the WVA, such as applying for entitlements, referrals for benefits, providing grave markers, housebound aid and attendance, disability/widows pension guidance, outreach and identification of service-connected disability.

For services that require transportation, the WVA administers the DAV shuttle which provides free transport to both Pittsburgh VA hospitals. The nearest Veterans of Foreign Wars is located less than two miles west.

The Supportive Services Program, available to all residents, will provide a variety of outreach to address educational and financial limitations, maintain health and independence, promote access to services and socialization while promoting the ability to maintain the highest possible levels of function, participation and dignity in the community.

Yet another partnership with the Westmoreland Diversity Coalition will provide support and opportunities to residents and staff: guidance to prepare a survey; participation in speaker series and workshops; informational pamphlets and newsletters; and workshops to learn together regarding all aspects of diversity, equity and inclusion.



For more information, visit www.wchaonline.com.

SENIOR GUIDE

Westmoreland Transit Will Get You Where You Need to GO

By Stefanie Grimm

The Westmoreland County Transit Authority will get you where you need to go! Our mission is to serve the residents of Westmoreland County by providing safe and reliable transportation options designed to meet your needs and improve your quality of life.

Westmoreland Transit is now providing service to the Casino at Westmoreland Mall, the Allegheny Health Network Hempfield Neighborhood Hospital, more frequent service in the Scottdale area, and access to the Odin View Apartments in Greensburg, just to name a few! Looking for a fun time outside of Westmoreland County? Take a ride to Bakery Square in Pittsburgh – restaurants, entertainment, shopping, the arts – need we say more? Did we mention that you can buy your tickets right from your phone using our WestmoreTix app? For more information, please check us



out at gowcta.com or call (724) 834-9282 to speak to a customer service representative.

Don't forget about our Shared-Ride, door-to-door service. Here at GO Westmoreland, some of the services available to the residence of Westmoreland County include Senior Shared-Ride, Medical Assistance Transportation (MATP), Americans with Disabilities (ADA), and Persons with Disabilities (PwD) Programs. Shared-Ride requires riders to share a vehicle with other riders that live in the same area and are traveling to the same location or area. Shared-Ride transportation operates with limited hours, has a set service area, and a reservation is

needed to take a trip. To utilize these programs, riders need to apply for services.



For more information, please check us out at gowcta.com or call (724) 832-2706 to speak with a Reservationist.

An advertisement for Westmoreland County Transit Authority. It features a photograph of a white bus with the GO logo and 'Westmoreland Transit' text. The bus is parked in front of a large, ornate building. In the top right corner, there are two logos: the GO logo and the WT logo. At the bottom, the text reads 'WESTMORELAND COUNTY TRANSIT AUTHORITY', '41 Bell Way, Greensburg, PA 15601', and 'gowcta.com'.

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- Local bus service throughout Westmoreland County
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GO Westmoreland

724-832-2706

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Senior Guide

PACE Preserves Independence at Home

By Randy Hebert, MD

The Program of All-Inclusive Care for the Elderly (PACE) is a model of care focused on maintaining the ability of our most vulnerable citizens to live in the community. The model is founded on the belief that the well-being and dignity of seniors with chronic illness is maximized by preserving independence in their homes for as long as possible.

To qualify for PACE, a person must be age 55 or over and be certified by the state as needing nursing home level of care. The typical participant is 80 years old, has eight chronic medical conditions, and limitations in three activities of daily living. In addition, most are low income and enrolled in both Medicare and Medicaid (i.e. dual eligible). Nearly half have been diagnosed with dementia. Nonetheless, despite these high care needs, 90 percent of participants are able to live in the community.

PACE can successfully provide care because the care team focuses on a small number of people (e.g. a national average of approximately 110 participants per medical provider) while using the expertise of a multidisciplinary team to anticipate and address the continuum of participants physical, psychosocial, spiritual, and practical needs.

Services include:

Health and Wellness Center: PACE programs are often centralized in a center that houses a medical suite, pharmacy, day center, a dining area, showers for participants, and laundry facilities.

Medical Care: is coordinated by a primary care provider with expertise in the care of the frail elderly, with the support of nursing, physical and occupational therapy, home health care, hospice, audiology, dentistry,

optometry, podiatry, and specialist services as needed.

Social services: key members of the interdisciplinary team include social workers, transportation staff who drive participants to the center and medical appointments, day center staff, clergy, recreational therapists, and music therapists.

These services come together in a "typical day" for a participant who will be picked up at home by a PACE van and driven to the day center. When at the center, the participant will have meals and laundry provided as needed. They will spend some time socializing with other participants, may see physical and occupational therapy who will assess and develop a plan to maximize their ability to live safely in the community, and see the medical providers and other team members as needed and on a scheduled basis. When not in the center, participants will be called and/or seen at home by staff. This model of care is associated with fewer hospitalizations, readmissions, and nursing home placements at lower costs than seen in comparable patient populations. Finally, the PACE model has certainly not been immune from the effects of COVID-19. Our day centers, therapy gyms, and dining areas are operating at much less than full capacity. As a result, all team members are doing more home visits and are newly using telehealth technology to care for participants. However, our mission is unchanged—to provide the full continuum of care necessary to allow participants to enjoy their lives to the fullest.



> **Dr. Randy Hebert** is Medical Director at **Community Life**. For more information, call (866) 419-1693 or visit commlife.org.

Before You Retire, Explore Health Insurance Options

By Crystal Manning



Crystal Manning

Finding affordable medical insurance is a critical part of your retirement planning.

Once you're eligible for Medicare at age 65, insurance becomes more affordable, and you cannot be denied coverage for pre-existing conditions. Despite these benefits, managing your insurance can still be complicated, and you'll need to plan carefully to make every dollar count.

In some cases, you may save money by delaying your enrollment in Medicare Part B. For example, if you currently have employer-sponsored group coverage - either through your or your spouse's employment - you may delay enrollment in Part B and sign up later during the Special Enrollment Period (SEP) when you stop working or that health coverage ends (whichever happens first). This would allow you to save money on Part B monthly premiums. However, special rules may apply. For example, employer coverage for retirees or through COBRA doesn't count as current employment, so these individuals do not qualify for a SEP to enroll in Medicare later; you may incur the 10% penalty each year. A different set of rules apply if the person has Medicare based on disability or ESRD. If

you're becoming eligible for Medicare but you already have insurance, learn whether/how your current plan coordinates with Medicare and whether/how you can delay Medicare enrollment. There are several different kinds of health insurance.

1. Job-based insurance: Insurance offered by an employer or union for current employees. If you are covered by your or your spouse's insurance, it may work with Medicare to cover your health care costs and may also allow you to delay Medicare enrollment.

2. Retiree insurance: Insurance plans that employers may provide to former employees who have retired. Retiree insurance always pays secondary to Medicare.

3. Federal Employee Health Benefits (FEHB): Insurance for current and former government employees and their family members. FEHB is either primary or secondary, depending on whether you are enrolled in Part B.

4. TRICARE: Insurance provided by the federal government to active duty and retired military personnel and their family members. There are many TRICARE programs.

5. Veterans Affairs (VA) benefits: Insurance provided by the federal government to veterans. Benefits include pensions, educa-

tional stipends, and health care, among others. VA benefits do not coordinate with Medicare

Important note: if you enroll in Medicare Part A and/or B, you can no longer contribute pre-tax dollars to your HSA. To contribute pre-tax dollars to an HSA you cannot have any health insurance other than a High Deductible Health Plan (HDHP). However, you may continue to withdraw money from your HSA after you enroll in Medicare to help pay for medical expenses, such as deductibles, premiums, copayments, and coinsurances. If you use the account for qualified medical expenses, its funds will continue to be tax-free. Finally, if you decide to delay enrolling in Medicare, make sure to stop contributing to your HSA at least six months before you do plan to enroll in Medicare. If you do not stop HSA contributions at least six months before Medicare enrollment, you may incur a tax penalty.

It is essential to enroll in Medicare at the right time. Sometimes it's easiest to talk with an expert. As an independent Licensed Medicare Advisor, I work to help you and not an insurance company and I am happy to address any specific questions or concerns.

Contact **Crystal Manning**,
Licensed Medicare Advisor at
(412) 716-4942 or email
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Emerald Home Health Care Offers Steps to Explore When Elderly May Need More Care

By Andrew Wilson

For many people, sometimes the anticipation of a joyful celebration turns instead to concerns about the well-being of elderly relatives or friends.

“Our elderly are precious and proud people from generations that were very strong and independent,” said Dana Derosky, R.N., the clinical director of Emerald Home Health Care. “They just don't like to ask for help because they don't want to inconvenience anyone.”

The difference can be particularly noticeable if it has been some time since the last visit with that person. While it may seem easy to dismiss those concerns as “just my imagination” or maybe not wanting to cause a fuss, it may be worth asking some additional questions.

Derosky says that there are subtle things that can alert you that there may be an issue like wearing the same clothes for several days, weight loss, and sudden confusion.

“With early onset of dementia, the obvious signs like forgetfulness are helpful, but sometimes they just don't connect body cues like hunger and thirst as a trigger to eat and drink,” Derosky explains.



So what should you do if you find yourself believing that a loved one needs additional help to be healthy and safe? Dana Derosky recommends starting with the primary care physician (PCP).

“This will often manifest in unexplained weight loss, even though they say they eat when they are hungry. They will not remember to keep water handy to sip on and will end up dehydrated, which can lead to physical problems with blood pressure and urination, but also confusion. Confusion is sometimes also an indicator of an infection.”

So what should you do if you find yourself believing that a loved one needs additional help to be healthy and safe? She recommends starting with the primary care physician (PCP). Most doctors have agencies that they have worked with and trust to do a thorough, comprehensive evaluation.

“It is a fine line to walk because you want them to have that right to self-determination, but you also want them safe and protected,” said Derosky. “Involve them in the decisions as early as you can even before they show any signs of needed help.”

She added that while home health agencies cannot self-refer, most are willing to answer your questions when you call and can point you in the right direction. All counties also have Area on Aging contacts that provide resources for our aging population such as transportation, in-home direct care workers through waiver services, and lists of Meals on Wheels providers, to name just a few of the available services.

Emerald Home Health Care, a small family-owned home health and home care company founded in 1996 by Bill and Margaret Erb, began business as a franchise of Nursefinders, a large, national company. The Erbs wanted a company with that family feel, and renamed it as Emerald Home Health, a nod toward the “Wizard of Oz” phrase that “there's no place like home.” In addition to the standard home health care, which is short-term nursing, physical therapy, occupational therapy, speech therapy, social work and home health aides, Emerald has private duty nursing services and home care direct care workers for longer term care and treatment.

If some sort of short-term or longer-term care is needed, Derosky recommends asking for recommendations from the PCP as well as friends and family who have been in a similar situation.

“The best thing to do first is the PCP as well as to ask friends and neighbors about their experiences with home health care, and home care,” she said. “A good clinician who gave exceptional care will be remembered.”

Emerald also encourages people to use “Home Health Compare” (www.medicare.gov), a website provided by Medicare, where you can compare agencies side by side for their scores in various categories, such as how well they heal wounds, how well they manage pain, how well they did at getting patients mobile again and other typical issues that may require special attention.

Because it can be tough to think of all the questions that one might want to ask when looking for a home health agency, Derosky recommends starting with the following:

- Are you well staffed where I live?

Continued on following page

There is no place like home.

Health Care AT HOME

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Seniors, Beware of Scams!

By Nancy Kennedy

Anyone can be a victim of a scam, but older adults are increasingly targeted. Scammers often believe that seniors have substantial amounts of money, and seniors tend to be trusting with strangers. Internet scams are especially common, as many Internet scammers see seniors as “easy prey” who are not proficient with technology, and therefore more easily fooled. This vulnerability to fraud means that seniors need to educate themselves about the common types of scams, and practice behaviors that will keep them and their savings accounts safe.

There are many variations of scams, but some of the more common ones directed at seniors are based on healthcare and Medicare. A scammer may call or email the senior and inform them that they have qualified for free medical equipment such as a back brace. In order to receive their free brace, they are told to provide their Medicare ID number, essentially your Social Security number. Once they have that, the scammers can wreak havoc on your finances, even stealing your identity. Prescription drug prices are a common concern for seniors, and many scams exploit this – they may offer their victim a reduced cost for medications, as a ploy to obtain personal information. Seniors should never give per-

sonal information over the phone especially if you did not make the call. Be aware that the Social Security Administration as well as the IRS communicate with citizens by mail.

Some scammers will come to the person’s home, claiming to be a representative of a utility or security system company. They may try to enter the home. Technical support scams are common and dangerous. These scammers send a false notice about a virus or computer problem and tell you that you must respond immediately by clicking on a link; or, they claim to be “tech support” calling to help you.

Other scams take advantage of relationships. The “grandchild emergency” scam is one in which a young person calls and claims to be the senior’s grandchild, who has suddenly run into a crisis such as being stranded in a foreign country, and needs to have large amounts of money wired to them. Unfortunately, scammers can be smart and creative in their efforts to defraud vulnerable people.

Generally speaking, if something seems too good to be true, it probably is. If you believe that you have been a victim of a scam, notify the police – scamming is a serious crime and can have severe consequences. Americans lose \$36 billion every year to these fraudulent schemes, and it is often difficult to find and prosecute the perpetrators.



Ways to Protect Yourself From a Scam

- Never provide personal information, account numbers or Your Social Security number to anyone over the phone;
- Do not answer the door if you don’t know who is knocking;
- Teach your family and friends to call you before coming over;
- If a utility company representative comes to your home, ask for ID and look for their marked vehicle; if you are still not confident, call the utility company for confirmation;
- Never accept any “free” gifts, whether its equipment or a cruise that you’ve supposedly won;
- If you have an older adult in your home, consider having a video doorbell system to improve your home security

> In Pennsylvania, residents should report scams to the Office of the Attorney General at (800) 441-2555, email at scams@attorneygeneral.gov or file a consumer complaint online. Reporting scams can also be done through the Office of the Inspector General at (800) 269-0271.

Emerald Home Care, *Continued from previous page*

- What services do you offer?
- Do you accept my insurance, and will there be a copay?
- What do I do if I need help after business hours?

“The really great home health, and home care companies don’t set out to be the leader, they set out to make a difference,” Derosky says. “It’s never about the agency, it is about the patient. We want to be that kind of agency, patient first always. We listen to our patients’ and clients’ needs and adjust accordingly, we want them to be a part of their plan to get well and we want to make a difference in their lives.”

> **Emerald Home Health** provides in-home personal care. Let us help you take care of the people you love. Emerald Home Health services Allegheny, Beaver, Butler, Washington, and Westmoreland counties. For more information, visit www.emeraldhomehealthofficial.com, email info@emeraldhomehealthcare.com, or call (412) 429-5880.

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Clearing Up Confusion About Vitamin D3

You may have heard talk about Vitamin D3 and wondered how it differs from Vitamin D. The answer is, it doesn't. There are two types of vitamin D in the human body: D2 and D3. Both are simply called "vitamin D," so there is no real difference, just that vitamin D2 is found in plants and yeast, while D3 comes from animal sources.

Vitamin D is essential for growth and development of bones and teeth, as well as increased resistance to certain diseases. While a blood test is the best way to determine if you have a vitamin D deficiency, initial signs include:

- Fatigue
- Bone pain
- Muscle weakness, muscle aches, or muscle cramps
- Mood changes, like depression
- Poor quality sleep
- Hair loss
- Dizziness
- Increased dementia

Health Benefits of Garlic

Many people consider garlic to be a staple in their diets, but did you know it also has health benefits? Consider these:

- Dating back to ancient history, the main use of garlic was for its health and medicinal properties. Sulfur compounds from garlic travel all over your body, exerting strong biological effects.
- Not only is garlic low in calories, but it is also rich in vitamin C, vitamin B6, and manganese.
- Garlic supplements may help prevent or reduce the severity of illnesses like the flu and common cold.
- The active compounds in garlic can help reduce blood pressure.
- Garlic may reduce both total and LDL (bad) cholesterol levels, which in turn can lower the risk of heart disease.
- Garlic contains antioxidants that may help prevent Alzheimer's disease and dementia.
- Because garlic has known beneficial effects on common causes of chronic disease, it may therefore help you live longer.
- Garlic is easy to include in your diet and adds flavor in savory dishes, soups, sauces, dressings, and more.

Garlic does have some downsides, such as bad breath. More importantly, if you have a bleeding disorder or are taking blood-thinning medications, talk with your doctor before increasing your garlic intake.

Tips to Prevent Orthopaedic Health Issues

Are you one of the millions of people in the United States who suffers from orthopaedic issues – those associated with joints, bones, ligaments, muscles, etc.? Such problems are one of the leading causes of long-term pain and disability in the world, and while surgery may be necessary in some cases, medications, injections, and physical therapy might take care of the problem. However, prevention would be a better approach.

Here are some tips to follow:

- **Stay Active** – Perhaps the best way to maintain and improve your overall health is simply to keep an active lifestyle
- **Maintain a Healthy Diet** – Include nutritional foods into your everyday eating, and remember that calcium and vitamin D are critical to maintaining orthopaedic health
- **Practice Healthy Living Habits** – Maintain proper posture, avoid carrying overly heavy loads, and make sure your mattress and pillow support healthy spinal alignment
- **Wear Proper Shoes** – Make sure your shoes fit well, and rather than high heels, wear ones that support your feet
- **Start Slowly** – If you are learning a new sport or considering a new exercise program, ease into the routine, including stretching muscles before you begin
- **Sit Less** – If your job has you sitting in front of a computer or behind a desk all day, take short walks or try to change positions to incorporate movement
- **Watch for Stress** – Be aware of repeated movements that can cause stress on joints, such as kneeling or lifting your arms over your head



Did you know there are more than 100 types of arthritis? Here are the five most common:

1. Osteoarthritis – the most common form – is the "wear and tear" that happens when your joints are overused. It usually comes with age, but it can also come from joint injuries or obesity, which puts extra stress on your joints. This occurs when cartilage gradually breaks down, making movement painful.

2. Rheumatoid Arthritis is an autoimmune disease, which means the immune system attacks parts of the body, especially the joints. That leads to inflammation, which can cause severe joint damage if you don't treat it. Symptoms may include fatigue and loss of appetite.

3. Psoriatic Arthritis – people who have this condition have inflammation of the skin (psoriasis) and joints (arthritis). Psoriasis causes patchy, raised, red and white areas of inflamed skin with scales. As many as 30 percent of people with psoriasis will also get psoriatic arthritis.

4. Gout is a buildup of uric acid crystals in a joint, usually in the foot. This happens when your kidneys can't process the uric

5 Most Common Types of Arthritis



acid your body makes, or you're eating too many foods that raise uric acid levels. If attacks are left untreated, your joints and kidneys can be affected. Items to avoid if your uric acid is high include alcohol; red meat; lamb; pork; organ meats, such as liver or kidneys; and seafood, especially shellfish, such as shrimp and lobster.

5. Lupus is an autoimmune disease that can affect joints and numerous organs in your body. Doctors aren't sure what causes lupus, but something triggers your immune system to become distorted. Instead of attacking viruses and other invaders, it begins to cause inflammation and pain throughout your body – from joints, to organs, and even to the brain.

Health & Wellness

URINARY TRACT INFECTIONS

A urinary tract infection (UTI) is an infection that occurs in any part of your urinary system – the kidneys, ureters, bladder, or urethra. Symptoms of such an infection include:

- Persistent urge to urinate
- Burning feeling when urinating
- Passing frequent, small amounts of urine
- Urine that appears cloudy or is red-, bright pink-, or cola-colored, which is a sign of blood in the urine
- Strong-smelling urine

The most common cause of a UTI is bacteria, and women are more susceptible because the female anatomy contributes to the increased likelihood.

Antibiotics are the most common treatment for UTIs, and drinking lots of water can help flush the bacteria from your body. The infections may go away on their own, but the main danger of leaving them untreated is that they may spread from the bladder to the kidneys. If that happens, it can cause damage that will permanently decrease kidney function.

Rising Hepatitis Numbers Among Children

The CDC is concerned about more than 100 unexplained recent cases of hepatitis that have struck children across at least half of the 50 states. Most of the children have been hospitalized and five have died, but CDC investigations haven't produced an answer as to the cause. Hepatitis is an inflammation of the liver that can damage and destroy liver cells, and in children, it is generally the result of a virus.

Adults can also contract the infection from a virus, but heavy use of alcohol, drug overdoses, certain health conditions, and some types of medication can produce liver inflammation as well, as can eating or drinking contaminated food or water, or close contact with a contaminated person.

Signs of hepatitis include nausea, vomiting, fever, loss of appetite, and vomiting. As the disease worsens, other symptoms could be dark urine and light-colored stool, and jaundice, which is the yellowing of the skin and the whites of the eyes.

No specific treatment exists. Hepatitis usually goes away on its own, but medications are available that can help. Treatment of alcoholic hepatitis involves hydration, nutritional care, and eliminating alcohol use.

Dietary Changes Every Cancer Patient Should Make

According to an Epoch Times story, cancer patients might be surprised to learn that nutrition can play an important role in their healing process, and that by making certain dietary changes, they could drastically increase their chances of improvement. Here are important dietary changes to consider:

- Eat an alkaline diet, which primarily comprises vegetables and fruit – especially raw – along with beans, nuts, non-gluten grains, small amounts of clean fish, organic poultry, or grass-fed meat.
- Eliminate as much sugar as possible, as cancer cells use more glucose per unit of time than other cells. Sugar metabolism creates acid, which also supports cancer progression.
- Eliminate gluten, because glutinous grains cause inflammation, and inflammation promotes cancer progression.
- Eliminate dairy products. Dairy from cows has been identified in a large study as one of the most cancer-promoting foods. They can create inflammation, cause bone deterioration, and promote cancer progression.
- Be mindful of the oils used to prepare food. Ones that should be eliminated include corn, soy, canola, safflower or sunflower. Instead, focus on olive oil, coconut oil, or avocado oil – organic when possible.

Simply put, concentrate on eating fresh food that's in season, and simply prepared.

DIRECTORY

In order to choose a health professional who is right for you, you need information. The following guide is a good place to start.



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Greensburg PA

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PAStart.org

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www.wedacinc.org
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724-628-1500

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crystalmanning33@gmail.com

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www.commlife.org

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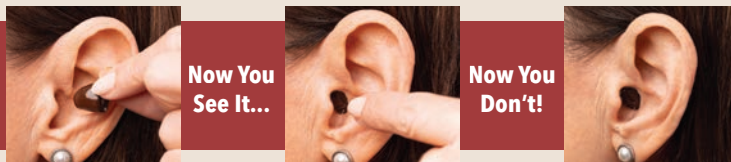
To a Special Hearing Evaluation we're conducting in **the Pittsburgh area**. While in our office, you will receive a **FREE** hearing evaluation and we'll explain the many options currently available to you.

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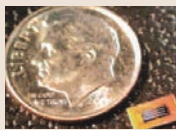
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- Frequently ask people to repeat themselves.
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Greensburg
Noble Square
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