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- Directory for Adults With Special Needs



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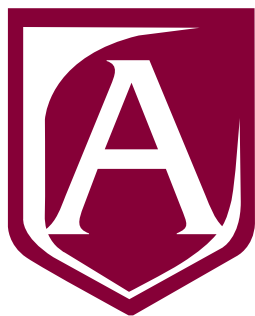


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MARK YOUR CALENDAR

Get “Hip” About Arthritis With What You “Knee’d” to Know – Attend the Bone and Joint Health Series

For the last decade, the Bone and Joint Health Series has provided education on cutting edge topics in bone and joint health, arthritis, treatment options, and more. Through in-person engagement with community members, the series addresses what matters to people with hip and knee pain in an accessible forum by including opportunities to hear from, ask questions, and connect with experts. All Bone and Joint Health Series events are offered free of charge to attendees, and take place multiple times per year.

The series is presented through a collaboration between the Bone and Joint Center at UPMC Magee-Womens Hospital and the AMD3 Foundation, a medical nonprofit based in Pittsburgh, Pennsylvania. Led by a recognized expert in orthopaedic surgery, Dr. Anthony M. DiGioia III, the Bone and Joint Health series aims to improve community health and wellness. Collaborations between Dr. DiGioia and area medical partners have facilitated these educational workshops for both care providers and community members seeking information about common bone and joint ailments such as arthritis, as well as advancements in total joint replacement (TJR) surgeries and treatment options.

During the next Bone and Joint Health series on February 8, 2020, attendees can expect a fresh lineup of exhibitors, speakers, panels, and interactive sessions focused on arthritis prevention and treatment options, including same day and one night stay total joint replacements. The



This event is **FREE** and open to both care providers and anyone with hip and knee arthritis. Seating is limited, and registration for the event is required. To sign up for the Bone and Joint Health series on February 8, 2020 at UPMC Magee-Womens Hospital, visit www.amd3.org to reserve your spot. If you have any questions about the event or would like to register by phone, contact us at (412) 450-6040.

February event will also include a special session on gender differences in the diagnosis and treatment of hip and knee arthritis.

About the AMD3 Foundation:

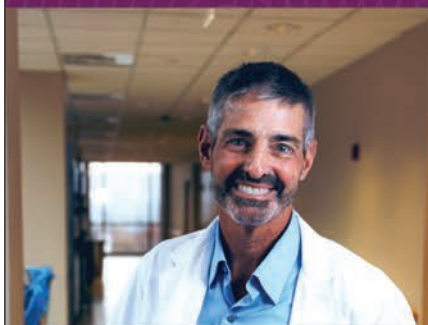
The AMD3 Foundation is committed to delivering excellent care experience to hundreds of individuals each year from around the world while supporting patient and family-led changes to healthcare processes. Through a combination of ongoing education, up-to-date research, and sustainable programs powered by community and industry partnerships, the AMD3 Foundation promotes greater health equity not only in the greater Pittsburgh community and nationwide, but also throughout Central America and around the world.

BONE AND JOINT HEALTH SERIES

Saturday February 8, 2020

10:00am - 1:00pm

UPMC Magee-Womens Hospital Auditorium



Course Director
Dr. Tony DiGioia

Orthopaedic Surgeon
Medical Director,
Magee-Bone and
Joint Center

Get “Hip” About Arthritis and What you “Knee’d” to Know About Same Day or One Night Stay Hip and Knee Replacement

Physician Faculty
Brian Hamlin, MD
Michael O’Malley, MD

This event is **FREE** and open to patients, family members, and providers! For more info visit www.amd3.org

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THE BONE & JOINT CENTER
UPMC MAGEE-WOMENS HOSPITAL

Preparing for Total Knee or Hip Replacement Surgery

By Daniel Casciato

Preparation is the key to a smooth surgical experience when facing total knee or hip replacement surgery. Often these procedures are scheduled in a way that helps you have the lead time you need to learn about the surgical procedure, to prepare for a successful experience, and to be well positioned for a smooth recovery. Let's take a closer look at how physician-owned Advanced Surgical Hospital, the area's only seven-time recipient of the Press Ganey Guardian of Excellence – Patient Experience, prepares its patients for joint replacement surgery.

Preparing for Surgery

Every patient who is having either a total knee or hip replacement will visit the Welcome Center at Advanced Surgical Hospital approximately two weeks before surgery. At that time, they will meet with anesthesia, nursing, physical therapy, and social services, according to Dr. John Evans, DPT, Director of Rehabilitation at Advanced Surgical Hospital.

- The Anesthesia team will screen each patient to assess whether he or she meets criteria to undergo surgery.

- The Nursing team will go over the patient's medical history and medications and will instruct the patient on a "to-do list" before surgery.

- The Physical Therapy and Social Services teams will review the patient's home setup to determine what type of durable medical equipment the patient has or will need as well as educate the patient on transitioning home after surgery and the rehabilitative process.

All four of these disciplines will answer any questions the patient may have. On the day of surgery, patients will meet with registration

staff, nursing staff, anesthesia, and the surgical team.

Dr. Evans recommends each patient have plans in place for discharge from the hospital. "We want you to be able to safely go home with a family member or caregiver because home is generally the best place to recuperate.

"People prepare for all sorts of things in life such as sporting events, vacations, and weddings but most do not prepare for surgery," says Evans. "Surgery is a major event so you should do everything you can to be as thoroughly prepared as possible."

Doing a pre-surgery exercise regimen (Prehabilitation or "prehab") is also very beneficial.

"Ideally, prehab should begin six weeks before surgery to allow enough time to improve mobility, strength, and cardiovascular conditioning," says Evans, who has led Rehabilitation Services at Advanced Surgical Hospital to become the 2019 recipient of the Best of the Best in Business. "The healthier and more functional you are before surgery, the quicker and easier your recovery will be after surgery."

Weight loss and proper nutrition are critical as well. Your body will need the appropriate nutrients after surgery to heal properly. Eating a healthy diet lowers inflammation, speeds up the healing process, and provides energy and strength needed for recovery.

"For every pound of body weight you lose, you reduce the load on your knees by four pounds," says Dr. Tony Wano, D.C., of Wano Chiropractic. "Unhealthy fats found in processed foods can increase inflammation and pain. Excessive weight can put you at risk for certain side effects and complications in surgery."

Since joint replacement surgery is an elective procedure, it is wise to make sure your house is in order

Advanced Surgical Hospital ORTHOPAEDIC Health Series



Dr. John Evans



Dr. Tony Wano



Dr. Joseph Stracci

before surgery day arrives, which includes nutrition, exercise, secure home environment, family and caregiver support.

One thing everyone should avoid before any surgery is alcohol and tobacco, warns Dr. Joseph Stracci, D.O., of Advanced Surgical Hospital.

"Avoid aspirin, over the counter medication, vitamins, and supplements at least one week before surgery," he says. "Some of these can thin your blood."

What to Expect During Recovery

Patients can expect to usually spend two nights in the hospital followed by discharge to home. Once home, patients will usually be seen once by a nurse and several times by a home health physical therapist. At the patient's first office follow-up with his or her orthopedic surgeon, outpatient physical therapy will be ordered. Most patients will attend outpatient physical therapy two to three times a week for six to eight weeks on average.

"Healing time after having a total joint replacement will vary between patients but you can expect at least a three-month timeframe," says Dr. Stracci.

To help prevent and control pain, Iovera can be taken before surgery. Iovera is a non-opioid cryoanalgesia for nerve pain that is usually done at least one week before surgery. Iovera delivers injected doses of cold temperature to targeted sensory nerves that stops the transmission of pain signals for a period of time. Pain relief usually lasts for approximately 90 days.

"Anesthesia is the main concern patients have before surgery," says Dr. Stracci.

Patients think they will have general anesthesia—however, Ad-

vanced Surgical Hospital uses nerve blocks and IV sedation. People also worry about whether or not they will be sick after surgery from the anesthesia and/or pain medication. Lastly, people worry about pain.

On the day of surgery, the anesthesia team at Advanced Surgical Hospital will administer long lasting nerve blocks. Oral pain medication is also used to manage pain during and after your inpatient stay. Physical therapy and early mobility are also methods that help to reduce pain, swelling, and stiffness.

Together, the surgical and anesthesia teams at Advanced Surgical Hospital will evaluate, monitor and supervise your care before, during and after surgery to assist with your safety and a successful outcome.

Dr. Evans points out that Advanced Surgical Hospital has received many recognitions, throughout its 10 year history, for its patient care processes and outcomes which "underscores the value of a joint replacement program that focuses on helping patients be well prepared and highly engaged in their recovery process," he says.

For more information, visit ashospital.net

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"Healing time after having a total joint replacement will vary between patients but you can expect at least a three-month timeframe." -Dr. Joseph Stracci

At St. Clair Hospital, Dr. William DeCarbo Performs Innovative Bunion Surgery that Gets Lasting Results

By Nancy Kennedy

Lapiplasty, an innovative new approach for the treatment of bunions, is transforming lives with excellent, long-lasting outcomes, and is offered at St. Clair Hospital by William T. DeCarbo, DPM, FACFAS, a fellowship trained and board-certified foot and ankle surgeon who practices with St. Clair Orthopedic Associates, part of St. Clair Medical Services.

Lapiplasty is an advanced technology that represents a “radical” departure from traditional bunion surgery by going directly to the root cause of the deformity and correcting it with precision and anatomic alignment. “A bunion is a three-dimensional deformity and lapiplasty allows the surgeon to correct on all three dimensions. It’s fully corrected,” Dr. DeCarbo explains. “Lapiplasty is effective and lasting. It’s a unique approach.”

Bunions are a painful, unsightly and even disabling condition that can significantly impact one’s mobility, comfort and quality of life. A bunion is widely believed to be an overgrowth of bone that protrudes just below the big toe and can be shaved off, but this is a misconception. A bunion is more complex than that: it’s actually a symptom of a deeper problem in the midfoot: a misaligned bone, the first metatarsal, the bone that is directly behind the big toe. Instability in the first metatarsal-cuneiform joint allows the bone to drift away from the second metatarsal. The head of the metatarsal deviates medially, eventually protruding, and the big toe leans toward the other toes, resulting in the deformity. Wearing



Dr. William T. DeCarbo

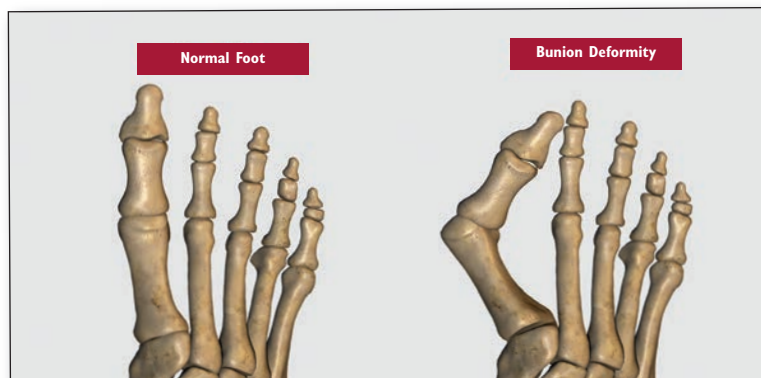
high heels or ill-fitting shoes exacerbates the problem. “Bunions can make you miserable,” Dr. DeCarbo says. “The pain and swelling may interfere with walking, and severe bunions may make it difficult to find shoes that can accommodate the protrusion. In addition, they’re a cosmetic problem – many women want to wear open toe shoes but are self-conscious about

their bunions. Untreated, bunions will get worse over time.”

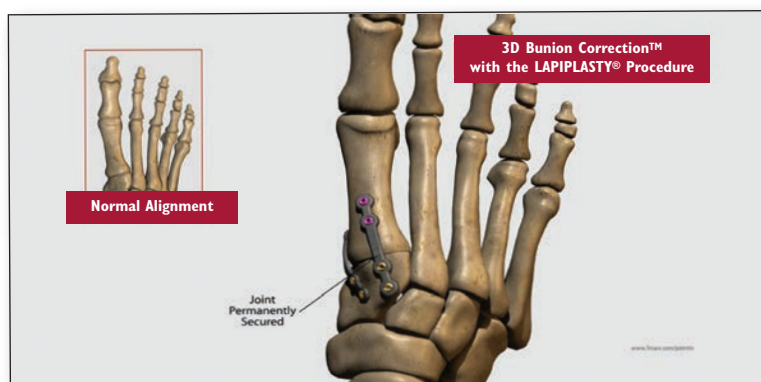
Traditional treatment for bunions has consisted of conservative measures including orthotics, shoes with a wide toe box and cushioning bunion pads, or a surgical intervention called osteotomy. Unfortunately, says Dr. DeCarbo, this procedure only gives the appearance of correction and does not completely solve the problem: it is reported that 30% to 70% of people who undergo osteotomy will experience a recurrence of bunions.

“To correct the bunion, and have that correction last, the bones have to be re-aligned,” Dr. DeCarbo explains. “Lapiplasty repositions and stabilizes the misaligned bone, securing and fixating it with implants. It’s tremendously effective.”

Dr. DeCarbo, a native of New Castle, PA, had a delayed start on his career in medicine. He thought he would follow in the family business, DeCarbo Funeral Home, but after a few years, Dr. DeCarbo recognized that he wanted to be a physician. He attended medical school at the Ohio College of Podiatric Medicine, now Kent State University School of Podiatric Medicine, and following graduation completed a three-year residency



Normal foot and foot with bunion



Bunion deformity corrected with lapiplasty

and a twelve month orthopedic foot and ankle fellowship in Columbus, Ohio as well as an international fellowship. Dr. DeCarbo performs every type of foot and ankle surgery including total ankle replacement and is especially experienced in advanced reconstructive foot surgery. Dr. DeCarbo was one of the first foot and ankle surgeons from around the U.S. who were selected by Treace Medical to help develop the lapiplasty technology and procedure. He performs lapiplasty weekly, as an outpatient procedure at St. Clair.

Post-operatively, patients who undergo lapiplasty can expect immediate protected weight bearing – a far cry from the six to eight

weeks of non-weight bearing it used to take. Total recovery takes 12 months, but patients can return to normal daily activity within a few weeks and return to impact sports or activity within three or four months.

“Lapiplasty is a game-changer for forefoot surgery, and I’m excited to be able to offer it to the region,” says Dr. DeCarbo. “You don’t have to live with pain and loss of function due to bunions. We can correct the condition; anatomically realigning the foot decreases the risk of recurrence.”

> To make an appointment, call (412) 942-7262.

St. Clair Hospital Recognized as a UPMC Health Plan Hip and Knee Joint Replacement Surgery Center of Excellence

UPMC Health Plan announced that it has designated St. Clair Hospital as a UPMC Health Plan Hip and Knee Joint Replacement Surgery Center of Excellence.

This UPMC Health Plan program recognizes surgical facilities and orthopedic surgeons who demonstrate high quality outcomes, low complication rates, and the best patient experience for UPMC Health Plan members in need of joint replacement surgery. Board-certified orthopedic surgeon Brett C. Perricelli, M.D., who performs hip and knee joint replacement surgery exclusively at St. Clair Hospital, was cited for demonstrating rigorous quality measures with excellent outcomes and exceptional patient experiences. Dr. Perricelli practices with South Hills Orthopaedic Surgery Associates.

Is Your Life Balanced?

By **Laura Crooks, RN**

The beginning of the year, and decade, is when most of us take time to make goals. Before setting yours take a step back and decide whether you are satisfied with the direction your life is going. Does the balance in your life work for you? Your sense of control and well-being can soar when you devote time to things that are meaningful.

The mythical image of a balanced life is a scale in perfect equilibrium. Life balance is closer to managing multiple spinning plates and less about equality. Balance can be integration, stability or design. Life balance is not about devoting identical amounts of time and energy to the various aspects of your life but enjoying life overall.

There is no ideal balance that works for everyone. Life is fluid, flowing in cycles or seasons that change over time (often with periods devoted primarily to career, children, family, self-improvement, retirement...). Thinking of life balance as juggling many pieces of 1 big pie, as opposed to 2 or 3 separate pies, highlights the fluidity of life without it seeming like parts of life are stealing from other areas.

An unbalanced life feels overwhelming, demanding and unfulfilling. When you have a balanced life, you will feel satisfied and enthusiastic with a sense of stability.

Reflect on how you feel during various parts of your day and week.

- What parts do you enjoy?
- When do you have the most physical energy, the most mental energy, the most patience?
- What parts of life are most satisfying?
- What brings you joy?



- What gives you a sense of accomplishment?
- What do you need more of?
- What parts of your day frustrate you?
- What activities leave you feeling inadequate?
- What activities can you let go of?
- What beliefs or thoughts might be holding you back from making changes?

Start by shifting your mindset to noticing and appreciating the moments that bring you joy, purpose and accomplishment. Learn to savor small victories.

You can't rebalance life in one neat swoop. Look at your life from both the distance perspective (what you desire) and the up-close view (your daily realities) as you decide on one small change to start with. Remember that quality can be more rewarding than quantity and balance doesn't mean equal time or energy gets devoted to each segment of life.

Make incremental changes to create a life balance that serves you. It's good for your health!

Laura Crooks, RN, is an author, speaker and certified wellness coach ready to help you eliminate burnout, manage stress and create life balance. You can contact her at Laura@YouBloomWellness.com.



By **Julia Putnam, MA, LMFT**

As parents, it can feel as if we're constantly stuck between recommendations and reality. We want to do the best for our kids, but we also need to be realistic about our time, energy, and demands that fall on us each day.

In starting the conversation on parenting in the age of technology, it's important to first lay out the current recommendations by The American Academy of Pediatrics (AAP):



- **Under 18 months:** avoid screen time outside of video-chatting
- **18-24 months:** if screens are introduced, limit to high-quality programming that is watched with an adult who is actively engaging in the viewing by explaining what is happening
- **2-5 years:** limit screens to 1 hour per day of high-quality programming that is watched with an adult who is actively engaging in the viewing by explaining what is happening
- **6 and older:** screen use should have consistent limits based on time and types of media, and should not replace sleep, physical activity, or other activities of daily healthy living

Alongside the guidelines listed above, the AAP also recommends that families designate "media-free" times together as well as "media-free" areas of the home, such as bedrooms. It is also recommended that parents have ongoing conversations about digital media safety with their children of all ages.

While the recommendations are ideal, it is ultimately important that we are proactive in monitoring our children's screen use to ensure that problems do not start to present themselves as a result of too much or inappropriate screen use. These problems can come in the form of disrupted sleep, symptoms of anxiety and/or depression, academic struggles, or face-to-face social impacts. When these aspects of daily life are starting to be replaced by screen use, it is time to reflect on changes that can be put in place.

Julia Putnam is a Licensed Marriage and Family Therapist who has extensive training in technology addiction and sees clients at the **Counseling and Wellness Center of Pittsburgh**. For more information, contact Julia at juliaputnamcounseling@gmail.com or call (412) 322-2129 or visit counselingwellnesspgh.com.



HEALTHY BEGINNINGS



Plan to Eat Healthy

By Kate Safin,
East End Food Co-op

If you have goals around weight loss, nutrition, or just feeling better in the New Year, it is likely food is central to your plan. But are you planning to eat healthy or making a plan to eat healthy? The difference is the time and intention you put into your goal. Creating a weekly food plan and preparing food ahead will help you avoid the pitfall of convenience foods that tend to be loaded with sugar, salt, and fat (three things that are unlikely part of your healthy eating playbook).

HERE ARE A FEW WAYS YOU CAN PLAN TO ENSURE HEALTHY FOOD IS ALSO THE MOST CONVENIENT FOOD:

- **Always have cut veggies on hand.** Carrot sticks, celery, and bell peppers are great for snacks and will stay fresh for several days even after they've been chopped. Wash a whole bunch at once and store them in a container in the fridge. Add a low-fat dip made with plain Greek yogurt and your favorite seasoning or some hummus for an easy and satisfying snack.
- **Plan a weekly menu.** Choose themes for each day of the week (Meatless Monday, Taco Tuesday, Pasta Wednesday, etc.) so you always know what's for dinner. Create a day for leftovers (or for an occasional night out) so you don't over prep food that will go to waste.
- **Make a large pot of soup.** Eat some fresh and portion out the rest in 1-2 cup servings and freeze them. You can use glass jars (leave room at the top for expansion) or silicone bags to store your frozen single-serve soups.
- **Pack your lunch.** Mason jar salads, veggie wraps, that pre-portioned soup you made, are all things you can make ahead and store in the fridge. Stainless steel bento boxes are excellent at keeping lunches fresh. If you prefer hot soup, stews, or pasta, heat them in the morning and pack them in a thermos.

> For recipes and meal ideas, visit us online at www.eastendfood.coop/recipes. Our staff is always happy to make suggestions in-person too! And for delicious vegetarian inspiration, visit our hot bar open daily from 11 am to 7 pm.

Muscle Building Foods to Always Keep on Hand

- **Hard boiled eggs** – 6 grams of protein per egg
- **Avocado** – 2 grams of protein per half + monounsaturated fats
- **Blueberries** – Loaded with fiber and anti-oxidants, they can ease sore muscles
- **Spinach** – The highest protein content of all the leafy greens – 5 grams per cup, cooked
- **Chickpeas** – ½ cup provides 7.5 grams of protein



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Have you Resolved to Quit Tobacco? Here's Help!

By Tiffany A. Babinsack, MPA, CTTS | Tobacco Free Allegheny



Nicotine is a powerful and addictive drug. Some people can quit cold turkey, but most people benefit from some type of support in their quit efforts. Studies show that only 3-5 percent of smokers are able to quit without any assistance. Quitline counseling combined with medication (such as nicotine replacement therapy) can more than triple the chances of quitting.

WHAT IS A QUITLINE?

The Pennsylvania Free Quitline is not just a hotline! The Quitline is a telephone-based tobacco cessation counseling service offering free coaching, with no judgment. The Quitline offers up to five proactive coaching sessions, unlimited inbound calls, and customized quit plans to each participant. Coaches are available 7 days a week and coaching sessions can be scheduled for when it is most convenient for you.

WHAT SHOULD I EXPECT WHEN CALLING A QUITLINE?

When you call 1-800-QUIT-NOW, you will be paired with a Quit Coach. They understand what you are going through because many are former smokers themselves. They are trained to be good listeners and to give callers encouragement, support, and helpful tips. Your Quit Coach may also be able to provide you with free quit-smoking medications, such as the nicotine patch or gum.

Your Quit Coach is specially trained to help you plan how, and when, it will be best for you to quit smoking. They will help you to:

- Set a quit date
- Discuss strategies for handling cravings and triggers
- Prepare for difficult or stressful situations
- Limit weight gain while quitting
- Learn about quit smoking medications and how to properly use them

Your Quit Coach is there to provide you with support and encouragement and to help guide you back on track in the event of a slip or relapse.

WHAT IF I HAVE TRIED TO QUIT BEFORE?

Most people try to quit several times before staying smoke-free. Your Quit Coach will ask you questions about previous quit attempts and work with you to create a plan based on what worked, and what didn't work, in the past.

DO I NEED INSURANCE?

Your Quit Coach will ask about your insurance coverage so that they may pair you with the best resources; however, Quitline services are free for callers. You do not need insurance to take advantage of this service.

WHO CAN CALL THE QUITLINE?

The Quitline is available for anyone aged 14 and older. Women who are pregnant can receive up to eight calls; with five calls before delivery and three calls post-partum. The Quitline can also help people who are using chewing tobacco, cigars, e-cigarettes, and other forms of tobacco. The Quitline also offers a youth tobacco and vaping cessation program: My Life, My Quit!

HOW DO I CALL?

The Quitline is available 7 days a week, from 7AM-1AM at 1-800-QUIT-NOW (1-800-784-8669).

To access My Life, My Quit (the youth cessation program) text "Start my quit" to 855-891-9989.

TobaccoFreeAllegheny

ABOUT TOBACCO FREE ALLEGHENY

Tobacco Free Allegheny's mission is to change the community norms surrounding tobacco, making it uncommon to see, use, or be negatively affected by tobacco or tobacco smoke pollution (secondhand and third-hand smoke).

> Learn more at www.TobaccoFreeAllegheny.org.

Winter is a Time of Wonder

Winter has a bad reputation, as it brings cold weather, icy sidewalks, high utility bills and colds and flu. No wonder so many people dread it. But winter, like all seasons of the year, has its own unique beauty and benefits. Winter can be a time to launch a new beginning, so why not "re-boot" your life: take advantage of the time you spend indoors to get things done, work on projects, clean and re-organize your environment to support your goals. Then, when spring finally arrives, you will be all set to enjoy it.

If you are ready to
quit, we can help.

TobaccoFreeAllegheny

1-800-QUIT-NOW

www.TobaccoFreeAllegheny.org



Demystifying the Uncertainties of Acupuncture

What is acupuncture?

There are many of misconceptions about acupuncture, but the truth is that this practice has been around for more than 3,500 years and provides relief to people around the world. Acupuncture is an ancient Chinese medicine-based approach by a minimally invasive method to stimulate nerve-rich areas of the skin surface in order to influence tissues, glands, organs, and various functions of the body. Each needle produces a tiny “injury” at the insertion site, and although it’s slight enough to cause little to no discomfort, it’s enough of a signal to let the body know it needs to respond. This response encompasses stimulation of the immune system, promoting circulation to the area, wound healing, and pain modulation.

FACT vs MYTH

MYTH: Acupuncture hurts

FACT: Although needles are used, they are very slender and fine. You may or may not feel an initial prick. Any discomfort will either fade on its own or ease up as the acupuncturist adjusts the needles. You should experience a Qi, pronounced “chee” sensation, often described as heaviness, throbbing or an electrical sensation. That’s your body’s healing energy doing its work!

MYTH: Acupuncture is ancient folk medicine; no legitimate healthcare professional would recommend it!

Fact: Acupuncture is a treatment option that many medical institutions endorse. The National Institute of Health funds many clinical research trials on acupuncture. Both the NIH and the World Health Organization identify acupuncture as an effective treatment for a wide range of conditions.



MYTH: Acupuncture is only useful in treating pain

FACT: It’s true that acupuncture helps relieve joint pain, including knee pain, back pain, headaches, stomach pain and menstrual cramps.

However, acupuncture is also used to treat chemotherapy side effects, morning sickness, high blood pressure, allergies, depression, infertility and many other conditions

MYTH: Acupuncture is psychological, what can it really do?

FACT: Acupuncture and its effects are far from psychological. Studies show that during acupuncture, our brains begin to release chemicals such as endorphins a natural painkiller.

MYTH: Once you start acupuncture, you’ll always need acupuncture

FACT: For most conditions, acupuncturists strive to improve your main problem so you do not have to return for more treatment. There are some people who stay on a maintenance schedule, however, because acupuncture continues to help with chronic conditions just as exercise, massage or healthy nutrition.

READY TO TRY SOME ACUPUNCTURE? Come visit us at the **Spa Harmony (Wilfred R. Cameron Wellness Center)** at 240 Wellness Way, Washington, PA 15301 or give us a call at **(724) 250-5238** to schedule your initial consultation.

A large advertisement for Spa Harmony. The background is a soft-focus image of a person's hands being held by another person's hands. The text is overlaid on this image. At the top center, there is a small leaf-like logo above the text "spa harmony" in a lowercase, sans-serif font, with "BODY | MIND | SPIRIT" underneath it. Below this, the main headline reads "Come escape" in a large, white, serif font, followed by "to a holistic world of healing" in a smaller, white, sans-serif font. At the bottom of the advertisement, there is a black bar containing the phone number "724.250.5238" and the address "240 WELLNESS WAY WASHINGTON, PA 15301" in white, uppercase, sans-serif font.

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St. Clair Family Practice Physician Emily Gleason, MD, Believes In The Power of Preventive Care

By Nancy Kennedy

Emily E. Gleason, M.D., wants to help you get healthy and keep you healthy, throughout your lifetime. As a physician with St. Clair Family Practice Associates, part of St. Clair Medical Services, she cares for people of all ages, with all types of illnesses and conditions, across the continuum from pediatrics to geriatrics.

Dr. Gleason chose to specialize in family practice for multiple reasons: “I like the variety and seeing the whole family. Family practice is an intersection of many specialties – women’s health, pediatrics, internal medicine and much more. It’s challenging because we have to do a lot of reading to keep up with so many fields, but it’s very rewarding.”

Dr. Gleason speaks with conviction and passion about the power of preventive medicine, a major component of family practice. “I have a deep interest in preventive medicine; it’s frustrating to be providing care for diseases that are largely preventable. Diabetes, heart disease, cancer and arthritis are not inevitable; although family history and environment play a role, the choices that we make, like smoking and overeating, and the kind of lifestyle we adopt, have a very significant impact on health and longevity. In the U.S., our healthcare system emphasizes the treatment of disease over the prevention of disease – it’s a reactionary approach. Doctors don’t learn much about preventive care in medical school, and we don’t teach it to our patients nearly enough.”

In her practice, Dr. Gleason offers preventive care in the form of nutrition counseling, age-appropriate health screenings, patient education, regular physical exams, stress management and immunizations. She stresses the need for getting the flu shot every year, and reminds people that it is not too late to get one in January or even later. “The flu season peaks from December to February and lasts until May. It’s never too late. People don’t take the flu seriously enough; it’s a respiratory virus and unless you are young and healthy, it can be deadly. Older people, infants, pregnant women, and people with compromised immunity are vulnerable and we all need to get flu shots to protect them as well as ourselves. The flu itself isn’t necessarily deadly but the complications of flu, like pneumonia, can be.”

Dr. Gleason sees many patients who are pre-diabetic, she says, and often refers them to a nutritionist for expert help. “I try to learn what their daily routine is, and work with them to identify what they can modify, realistically. Little changes can have a big impact. At times, I do recommend bariatric surgery.

“Losing weight and maintaining a healthy weight is tough, and our food environment is



“It’s hard for people to actually know what normal eating looks like, when all you see are huge portions of high fat, high salt, high calorie food. I find that people know very little about nutrition, and it’s so important.”

—Emily E. Gleason, M.D.

unhealthy: there is too much processed food, fast food, and enormous portions sizes. It’s hard for people to actually know what normal eating looks like, when all you see are huge portions of high fat, high salt, high calorie food. I find that people know very little about nutrition, and it’s so important.

Healthy eating is even a problem for children; in many schools, the lunches that are provided have few healthy options. Obesity starts at a young age now, so we have to start teaching healthy eating in the elementary schools. I’d like to see the school systems offer more nutrition education and focus more on weight management.”

Dr. Gleason believes that a comprehensive approach to weight management is best. “Have a team: your PCP, maybe a trainer, the nutritionist – so that you are seeing the big picture and not viewing weight management as just a diet. St. Clair Hospital’s Diabetes Center is excellent and has nutritionists who will see any patient. They will work with you and your lifestyle.”

Following in the footsteps of her father, Wayne A. Evron, M.D., St. Clair Hospital endocrinologist, Dr. Gleason decided to become a physician – as did her brother, Josh – and attended medical school at Sidney Kimmel Medical College at Thomas Jefferson University. Dr. Gleason joined St. Clair Family Practice in September 2019, following completion of a residency at UPMC St. Margaret. She is married and lives in the South Hills with her husband Colin and daughter Reese, 1 ½. “Although I went to school in Philly, I always planned to come home to Pittsburgh to practice. My husband is also from here. I volunteered at St. Clair as a teenager, and the Hospital was my first choice. I’m happy to be here, caring for the people of my own community.”



To contact **Dr. Emily Gleason** or to make an appointment, call **(412) 942-8570**.



It’s Not Too Late Get Your Flu Shot!

The flu can kill you, or make you very sick, but you can dramatically reduce your chances of getting it by simply getting the flu vaccine. And it’s never too late to get it: the flu season can last until May.

Every year, approximately 36,000 people die from the flu, and over 200,000 are hospitalized, according to the Centers for Disease Control. It’s a common disease, but it’s one to take seriously. Infection with the flu virus can give you a fever, severe cough, congestion, headache, sore throat and generalized body aching. The flu is highly contagious and can result in complications such as pneumonia, dehydration and bacterial infections; it is especially dangerous for infants and young children, pregnant women, the elderly, people with weakened immune systems due to illness or immunosuppressive medication, and people with existing conditions such as diabetes or heart disease.

Everyone should get the flu vaccine, beginning at six months of age. The vaccine is safe and has few side effects; the most common is a sore arm. It’s widely available at physician offices, clinics, senior centers, and pharmacies.

Despite the safety and effectiveness of flu vaccine, many people misunderstand it and are afraid it will make them sick or even give them the flu. “There’s a lot of fear associated with the flu vaccine,” says Emily Gleason, MD, a family practice physician with St. Clair Family Practice Associates. “It isn’t possible for the flu vaccine to give you the flu; it’s made from inactivated virus and it triggers your immune system to make antibodies against the flu, in case you are exposed to it. If you don’t believe that you need a flu shot for yourself, then get one for the people you love. Getting the flu vaccine is something you do for others, for your family and your community.”

Get your flu shot!

WHS PULMONARY REHABILITATION

Improve the Quality of Your Life by Taking Advantage of a Pulmonary Rehab Program

By Kevin Brown

Millions of Americans suffer from lung disease and many of them find their daily activities limited by shortness of breath.

The Washington Health System (WHS) Pulmonary Rehabilitation Program offers help to those with lung disease improve their quality of life. One-hour exercise and educational classes are held at WHS Washington Hospital on Tuesdays and Thursdays. The classes are tailored to patients' individual medical status and needs. The multidisciplinary staff includes respiratory therapists, nurses and exercise physiologists.

Mark Sperry, M.D., a member of the WHS medical staff and board-certified in pulmonary medicine, explains that, "The most common lung disease we see in pulmonary rehab is Chronic Obstructive Pulmonary Disease or COPD, but rehab is open to patients with any lung condition including what we call interstitial lung disease, which is inflammation of the lung, such as pulmonary fibrosis, pulmonary hypertension, and any manner of lung disease that causes shortness of breath and a need for improvement in physical exercise."

According to Frank Gladysz, RRT, CPFT, manager of respiratory care at WHS, their typical rehabilitation patient is someone whose lung disease limits his or her ability to participate in normal activities. "If your disease state is making you so short of breath that you can't go to work, you can't go to the mall, you can't go grocery shopping, then you could benefit from pulmonary rehabilitation," he says.

Pulmonary rehabilitation consists of mild aerobic exercise and light weight training. During the classes, rehabilitation staff measure patients' oxygen levels, heart rates and shortness of breath to make sure they are working within safe limits.

"The idea is to improve your exercise tolerance like any athlete," Frank says. "The fact that this group of professionals is here to help you, to watch you, and to monitor you, makes rehab patients more comfortable."

Dr. Sperry agrees that pulmonary rehab helps build confidence in patients with lung disease. "I've seen patients who were terrified to do the things they would want to do because they were so

worried they would get short of breath and have a major health episode. Going through the pulmonary rehab program showed them that, in a supervised setting, they were able to push themselves to do more and they wouldn't have a major medical problem as a result of the exercise," he says.

If you have lung disease and believe you could benefit from pulmonary rehabilitation, Frank recommends talking with your primary care physician or pulmonologist. "Your physician will send an order to the hospital and then we'll contact you to set up an interview," Frank explains. "During that interview, we'll do a couple quick tests of your lung function and exercise tolerance. We'll talk to you about your lifestyle, diet, medications, and give you a tour of the pulmonary rehabilitation facility. We'll also review your insurance coverage to make sure you know what you're getting into cost-wise. The first visit takes about 45 minutes to an hour."

The WHS Pulmonary Rehabilitation Program staff use the information from the testing and interview to develop a treatment plan that is tailored to help the patient overcome limitations caused by lung disease and shortness of breath.

Patients are recommended to complete an initial 18 pulmonary rehab classes. After that, patients can decide to continue with another 18 classes if their health insurance approves it.

"We try to get patients to transition into some type of exercise program such as joining the WHS Wilfred R. Cameron Wellness Center or maybe find a Silver Sneakers program in their area. Another option is to encourage them to exercise at home," he says. "The WHS Wilfred R. Cameron Wellness Center offers a supervised exercise program in addition to general membership. This program includes an intake by the clinical coordinator who writes a specific program geared to the needs of the client. They then work that program in a small group, with like members. It includes pre and post blood pressure and other necessary



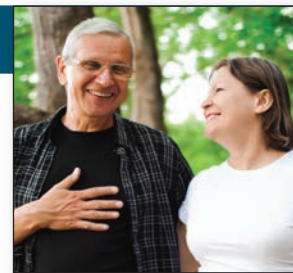
Dr. Mark Sperry

individualized testing."

"From a doctor's standpoint, I'm looking to see if there's improvement in the patient's quality of life, in their shortness of breath and in their lung function," Dr. Sperry says. "The benefits are really outstanding and have been shown by a lot of

medical studies that it's one of the best things we can do. Patients who perform pulmonary rehab also are less likely to be admitted or readmitted to the hospital and that's something we think is really important."

"Improved quality of life is really the big thing. Through exercise, you're going to be able to do things you weren't able to do before," Frank says. "You're not going to go out and play soccer, but you might be able to go to your grandchild's soccer game where you couldn't do that before."



"The benefits (of pulmonary rehab) are really outstanding and have been shown by a lot of medical studies that it's one of the best things we can do."

-Dr. Mark Sperry

For more information about the WHS Pulmonary Rehabilitation Program, call (724) 223-3285 or visit www.whs.org. Information on pulmonary rehabilitation is also offered by the American Thoracic Institute at www.thoracic.org/patients/patient-resources/resources/pulmonary-rehab.pdf.

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6 Things to Expect *During a Heart Screening*

Heart disease is a leading cause of death in the United States for both men and women.

Thankfully your doctor can identify risk factors such as high blood pressure or being overweight. But what other tests are involved during a heart disease screening?

Many heart screening procedures like body weight, blood pressure, and body mass index are done by the doctor during your annual checkup. Others, like checking your cholesterol and glucose levels, require a simple blood test. Your health care provider will do the following six things during a heart screening:

1. Take Your Blood Pressure

You can't tell you have high blood pressure without checking it because there are usually no physical symptoms. And because high blood pressure is a major indicator of heart disease, it's important to have it checked regularly. If yours is on the higher side (over 120/80 mmHg), your doctor will recommend diet and lifestyle changes or medicine to lower it.

2. Ask About Your Family History

If several people in your immediate family have early heart disease, there's a greater chance you'll have it too. Your doctor will ask detailed questions about your family history. The more you know about your immediate family's heart health, the better equipped you'll be to manage your own.

3. Check Your Cholesterol

Cholesterol is a waxy substance that builds up in your blood and comes from the foods you eat. You should have a blood test every four to five years, starting at age 20, to measure both "good" and "bad" cholesterol. The ideal total cholesterol is 200 mg/dL or lower. Your doctor may recommend lifestyle changes or medicine if your cholesterol levels are too high.

4. Check Your Blood Sugar Levels

Risk factors for diabetes and heart disease go hand in hand, so your doctor may order a blood glucose test — especially if you have other risk factors for heart disease. People with diabetes have a higher blood sugar level than normal. Left untreated, diabetes can increase your chances of developing heart disease.



5. Weigh You

Being overweight raises your risk of developing heart disease. Using your weight, height, and waist circumference measurements, your doctor can calculate your body mass index, which helps indicate whether you're within a healthy weight range.

6. Ask About Your Lifestyle

To evaluate your risk of heart disease, your doctor will ask about your health habits. A lifestyle that includes regular exercise, good sleep habits, and a healthy diet decreases your risk of heart disease. Smoking, a sedentary lifestyle, and a diet high in fat, sugar, and salt can contribute to your risk of heart disease.

The results of a heart disease screening will help your doctor determine if you should make lifestyle changes to lower your risk for developing a heart disease.



Regardless of your doctor's findings, the good news is that you can lower your risk for heart disease. Learn more about free cardiovascular screening services at the **UPMC Heart and Vascular Institute** by visiting www.upmc.com/services/heart-vascular.

Monongahela Valley Hospital Receives PCI Program Reaccreditation

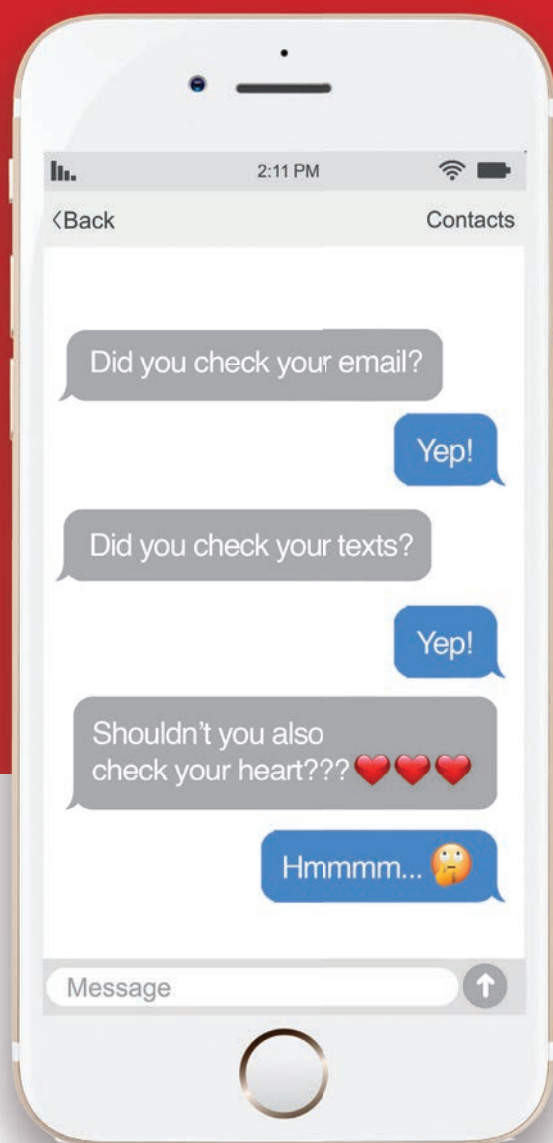
When a person is having chest pains, it is very important to go to the nearest Emergency Room as soon as possible. Residents of Washington, Westmoreland and Fayette counties can feel secure in the knowledge that they will receive the highest level of coronary care at Monongahela Valley Hospital (MVH). MVH recently received reaccreditation to the Percutaneous Coronary Intervention (PCI) Program from Corazon, Inc., a national leader in services for the cardiovascular specialty. Formerly known as angioplasty with stent, PCI is a non-surgical procedure that uses a catheter to place a small stent to open blood vessels in the heart that have been narrowed by plaque buildup. The accreditation proves that the program at MVH has once again met or exceeded the requirements established by the Pennsylvania Department of Health (PA DOH), in accordance with the procedures finalized in September of 2015, such as providing 24-hour coverage for PCI emergencies, undergoing detailed quarterly quality reviews to ensure outcomes and practices meet or exceed national standards and other such factors.

In reaccrediting MVH, Corazon wrote, "Monongahela Valley Hospital has demonstrated through their accreditation survey that they are committed to providing the highest quality level of care to their patient community. Their dedication, hard work and exceptional leadership have afforded this opportunity in engaging their entire hospital team, enhancing their cardiac service line, thus allowing them to excel through achieving this accreditation."

The reaccreditation to the PCI Program is the latest distinction for MVH's coronary capabilities. Earlier this year, the Hospital was named "One of America's 100 Best Hospitals for Coronary Intervention" by Healthgrades® and a "Best Hospital in Heart Failure" by U.S. News & World Report. MVH also earned the American Heart Association's (AHA) Get With the Guidelines® Heart Failure Silver Quality Achievement Award and its Mission: Lifeline Silver Receiving Quality Achievement Award.

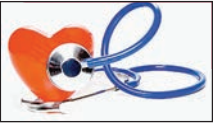
Heart screenings save lives.

UPMC and the American Heart Association have teamed up to help raise awareness about heart disease and screenings.



Visit UPMC.com/CheckYourHeart to find a list of free screening events.





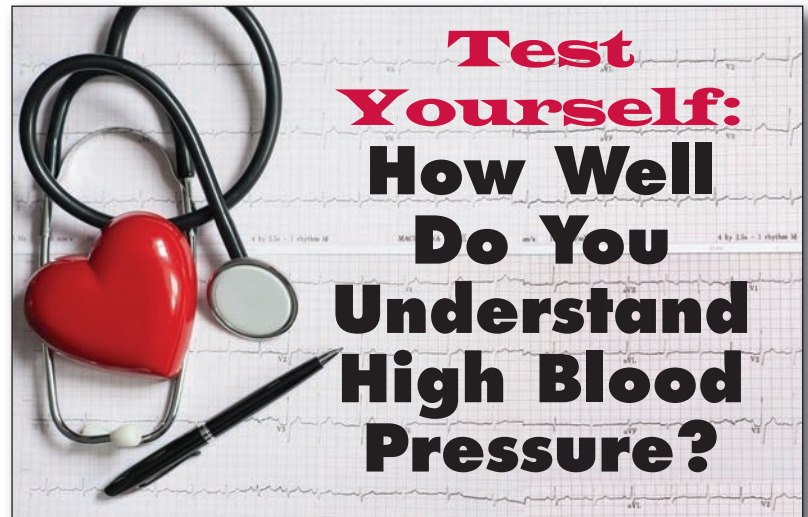
By Nancy Kennedy

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



ANSWERS

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.

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.

Half of American adults have high blood pressure. Good self-care, along with compliance with your doctor's care, can be very effective in managing high blood pressure.

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!

By the time he was 88 years of age, Robert Babcock had lived a good, full life and was certainly not expecting to get a new lease on life. But that was exactly what he did get, when he was diagnosed in 2015 by Alan D. Bramowitz, M.D., FACC, at Jefferson Cardiology Association, with aortic valve stenosis and treated with an innovative new procedure that gave him a prosthetic valve. With his new replacement valve in place for the past four years, Robert has had renewed energy that has enabled him to stay active, drive, and pursue his many interests and travel.

Robert Babcock is an exceptional man who has led a very active and fulfilling life, of achievements, adventures and many satisfactions. A 1950 graduate of the Naval Academy, he spent twenty years in the U.S. Navy as a lieutenant commander and pilot, serving on a destroyer in Greece, Italy and the Mediterranean. Upon retirement from the Navy, he earned a master's degree in engineering from Penn State and went on to teach there until 1992. He's a husband, father, grandfather, engineer, pilot, flight instructor, educator, patriot, ham radio expert and world traveler with an intrepid spirit and a deep love of life. His curiosity about the world has led him to travel exten-



Patricia and Robert Babcock

sively, and at the age of 92, he has barely slowed down.

Just four years ago, Robert began experiencing shortness of breath and saw his primary care physician, Robert Waligura, D.O., who referred him to Dr. Bramowitz at Jefferson Cardiology. Dr. Bramowitz ordered a cardiac catheterization which revealed aortic valve stenosis – a narrowing of the passage through the heart valve that forces the heart to pump harder, eventually leading to fatigue and shortness of breath. Aortic stenosis is a common condition in older adults and can lead to heart failure. Dr. Bramowitz referred Robert to Robert J. Moraca, M.D., a cardiothoracic surgeon at Allegheny Health Network who explained that a replacement valve was needed. Because of Robert's advanced age, however, open heart valve replacement surgery was deemed

Patient Stories:

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

too risky.

Fortunately, Dr. Moraca had a new option to offer: a minimally invasive procedure in which a replacement heart valve is placed in the heart via a catheter – a long thin, pliable tube – that is inserted in the femoral artery through a small incision. This procedure, known as the TAVR (transcatheter aortic valve replacement) procedure, does not require a large chest incision to access the heart, and the recovery period is faster and easier.

Robert had the procedure done in September 2015 at Jefferson Hospital and the procedure went perfectly. His new valve continues to work perfectly, and he is regularly monitored by Dr. Bramowitz. "I feel like I was given a new start," he says. "I'm otherwise healthy, able to travel and enjoy life. All my symptoms disappeared and I feel great."

He highly recommends Dr. Bramowitz and Jefferson Cardiology. "Dr. Bramowitz is an extraordinary doctor. He's warm and

friendly, and takes a personal interest in you. He listens to anything you have to say and answers every question. He's extremely patient, and very good at explaining things. He explained the problem, the options for treatment, and what to expect in the recovery and was very clear about all the pros and cons.

"I feel completely confident in their care at Jefferson Cardiology. Every experience I had with Jefferson was positive – all the doctors, nurses, and staff treated me very well. My wife, Patricia, is also a patient there and we are both extremely satisfied with the care we have received."

Robert lives in White Oak, where he enjoys working with ham radio and computers and spending time with his children and grandchildren.

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

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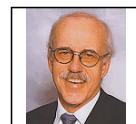
Gennady Geskin, M.D.



Michael D. Mulock, M.D.



Nicole Bruno, CRNP



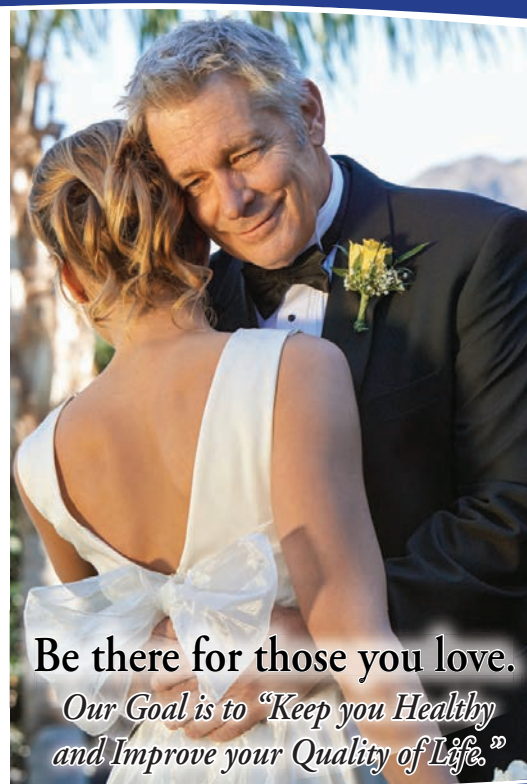
Alan D. Bramowitz, M.D.



Michael S. Nathanson, M.D.



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Brittany Micholas - Hope Found After Stroke

Brittany Micholas had recently graduated college and was working at a theme park for the summer, when she got sick with a sinus infection that led to meningitis. The added pressure in her head resulted in five cerebral infarctions, or obstructions to her blood supply in her brain, and a stroke. At the young age of 25, she was left feeling like there was no hope for getting better.

But there was. Her local rehabilitation hospital, Encompass Health Rehabilitation Hospital of Harmarville in Pittsburgh, Pennsylvania, gave her the hope she needed through an individualized care plan coupled with intensive rehabilitation services. When she arrived to the hospital, she was unable to sit up in her wheelchair. In just the first week, she progressed to standing and walking with assistance thanks to the encouragement of her therapy team.

"It's like starting a game and going directly to the hard level," said Brittany. "When you are in this situation and realize there is no hope, you think you're doomed. But when you're set up with the technologies and the right people, you realize there's a way to do it."

Brittany was inquisitive about the technologies and equipment that surrounded her in the therapy gym. Believing she was not quite ready to use them, her therapists kept her motivated

to try new things so she could prove to herself she was getting better.

During her stay, she recalls seeing another patient doing sidesteps and it piqued her interest. Her physical therapist helped her to be able to accomplish the task. "I didn't think I would be able to [do them]... and I could," stated Brittany. "That was kind of cool. That was one of my moments in physical therapy."

By incorporating functional therapy like cooking and baking, the occupational therapists tapped into Brittany's "inner baker," an activity she now practices at home. Her love of music as a drummer was incorporated into therapy through use of technologies that allowed her to practice beat and rhythm.

"The rehab therapists are very good at motivating you, encouraging you. I just wanted to sit and do nothing. They get you going. They are good at tapping into things you might have been interested in before," said Brittany.

Brittany is getting stronger each day. She has her mind set on driving again once her vision improves and wants to achieve full range of motion in her affected arm and has faith it will happen. "There's always hope. A tiny little seed is enough to grow a field," she said.



Brittany shares her story as part of a series on stroke rehabilitation to highlight the American Stroke Association's new Life After Stroke Guide, part of the Together to End Stroke initiative, sponsored nationally by Encompass Health.

For more information, visit www.encompasshealth.com/harmavillerehab.

Article first featured on <https://supportnetwork.heart.org/blog-news/brittany-micholas-hope-found-after-stroke/>.



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Endoscopic Ultrasounds Enables More Accurate Diagnosis of GI Cancers at Washington Hospital

By Nancy Kennedy

At Washington Health System, a new diagnostic imaging technology is making it possible for residents of the community to receive state-of-the-art diagnostic cancer care, close to home.

The technology, endoscopic ultrasound or EUS, provides a far more informative image of internal organs than standard ultrasound, facilitating earlier detection and more accurate diagnosis of colorectal, gastric, esophageal and pancreatic cancer and other gastrointestinal diseases.

“Until now, people who needed to have this procedure had to travel into the city to one of the big medical centers,” says Manhal M. Tannous, MD, a gastroenterologist on the medical staff of Washington Hospital. “It’s very helpful for the patient to be able to remain in their own community to receive care. It reduces stress and costs and makes the entire experience easier.”

Conventional ultrasound uses sound waves and their echoes to produce pictures of organs, using a wand-like probe called a transducer that a technician passes over the skin. An endoscopic ultrasound probe differs in that the transducer is in the tip of the endoscope, allowing it to be placed internally. A computer converts the echoes from the sound waves into images for physicians to view. While conventional endoscopy only provides a view of the innermost lining of the digestive tract or its wall, the addition of ultrasound allows the physician to see beyond that wall to visualize all five layers of the GI tract as well as surrounding tissue and organs. From a clinical perspective, this means that an abnormality below the surface of the digestive tract wall can be further evaluated under EUS, helping doctors better understand its nature.

EUS provides detailed visualization and precise information that guides treatment decisions, and is very useful in the diagnosis and staging of gastrointestinal cancer. (Staging refers to the identification of how far the cancer has progressed, from Stage 1 through Stage 4). “With EUS, we are able to reach hard-to-reach organs such as the pancreas which is tucked in behind other structures,” Dr. Tannous explains. “The EUS probe gives us ultrasound inside the body instead of outside. Plus, we are able to take biopsies with it. By improving the detection of cancer, the EUS is leading to better outcomes.” Dr. Tannous and his colleagues have been using EUS for a year now and are pleased with its capacities.

The EUS procedure involves mild sedation and is performed as an outpatient procedure. There is no incision, no pain and minimal risk of complications. “With any procedure, there is risk. But with EUS that risk is low,” Dr. Tannous says. EUS is also useful in locating common bile duct stones and evaluating masses in the lining of the GI tract or in the stomach folds. EUS can also be used for therapeutic applications, such as tissue sample collection, cyst drainage or biopsy of lymph nodes, making it an ideal minimally invasive alternative to exploratory surgery.

Dr. Tannous joined Washington Health System in August 2017. He is board-certified in both Internal Medicine and Gastroenterology; he completed a residency in Internal Medicine at Cleveland Clinic Health System and a fellowship in diagnostic endoscopic and ultrasound procedures at the Virginia Commonwealth University. He spent several years in Iowa before coming to the Pittsburgh region. He lives in Peters Township with his wife and three children. Dr. Tannous practices with Southwest Gastroenterology Associates.

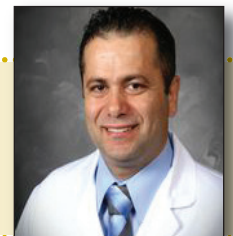
According to the American Cancer Society, for 2019 the estimated number of newly diagnosed cases of GI cancer in the United States was more than 328,000. “EUS technology enables earlier detection of GI cancers and other diseases, without surgery, leading to better outcomes for patients,” says Dr. Tannous. “It is less invasive and improves diagnostic accuracy. At Washington Health System, we are pleased to be able to offer the EUS system to our patients, right here, in their own community hospital.”

“The EUS probe gives us ultrasound inside the body instead of outside. Plus, we are able to take biopsies with it. By improving the detection of cancer, the EUS is leading to better outcomes.”

-Manhal M. Tannous, MD



To contact Dr. Tannous, call 724-941-3020 or visit www.swgastro.net/education.html. To learn more about Washington Health System’s cancer care program, visit www.whs.org/care-treatment



According to the American Cancer Society, for 2019 the estimated number of newly diagnosed cases of GI cancer in the United States was more than 328,000.



Favorite HEALTHY Family RECIPES

Email your recipe to goodhealthmag@aol.com

Delicious, Light, Easy and Healthy Dessert: Angel Food Cake with Berry Compote

Ingredients:

- 1 1-pound bag of frozen mixed berries, unthawed
- 2-3 tablespoons of sugar
- 1 teaspoon of grated lemon zest
- 1 store-bought angel food cake
- Cool-Whip (optional)

Combine the berries, sugar and lemon zest in a medium saucepan. Cook on medium heat, stirring occasionally, until berries have softened and released their juices, about 10 minutes. Let it cool slightly.

Slice the cake into 8 wedges. Spoon the compote over the cake slices and serve. A dollop of Cool Whip on top won't hurt.

Healthy, Cancer-Fighting Corn Muffins

Adding spinach to corn muffins gives them an anti-oxidant boost! Take a 10-ounce package of frozen chopped spinach, cook it according to package directions, drain VERY well and squeeze excess moisture out with a paper towel. Prepare two boxes of corn muffin mix and add the spinach to the batter. Stir well.

Spray a 12-cup muffin tin with cooking spray and pour the batter into the tins. Bake according to the muffin mix directions, until a toothpick comes out clean.

Per muffin: 184 calories, 5 grams fat, 350 mg. sodium

New Medical Imaging Tool



Thermography is a radiation-free, painless medical imaging tool that requires no contact with the body.

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MEDICAL TESTING

What Is Your Body Telling You?

By *Bethany Narey, CCT*

Do you ever wonder what your body is trying to tell you? Whether you have medical concerns or just want to be proactive about your health, your body is always trying to tell you something. But what is it?

Thermography offers a unique look at how your body is functioning with NO adverse effects. Thermography is a pain-free medical imaging tool that can be used to help diagnose many diseases and dysfunctions. Sports medicine and women's breast health are two main areas where thermography is best utilized.

As with anything, sports can open up a doorway for injuries throughout the season. Digital infrared thermal imaging also known as thermography plays a huge role in sports medicine.

Because thermography is risk-free, portable and, radiation-free, it is an ideal tool for assessing injury and helping aid clinical decisions.

Thermography is able to 'see things' outside of other diagnostic tools. Meaning, instead of looking for a break or a structure like other medical imaging tools, thermography looks for cellular and vascular dysfunction through temperature patterns.

This is ideal for injuries such as ankle injuries, stress fractures, myofascial pain syndromes, spinal pain syndromes, shoulder injuries, foot pain syndromes, and vascular disorders, just to name a few that are not visible through other standard tools. Thermography offers an invaluable window into the sympathetic response to pain and injury.

Often younger children struggle with telling you where their pain is coming from leaving it difficult for

Because thermography is risk-free, portable and, radiation-free, it is an ideal tool for assessing injury and helping aid clinical decisions.

parents and medical professionals to know where and how to treat the patient.

Because thermography is the only medical imaging tool that can visualize pain through temperature dysfunction, it is ideal for children who have difficulty accurately expressing their pain and discomfort.

Aside from sports injuries, there has been a large emphasis on women between the ages of 25-39 that are being diagnosed with invasive breast disease.

Experts are struggling to conclude why these numbers are slowly rising but women are struggling with where to go from here. Mammograms are still not recommended for women under the age of 40 and in some cases for women under the age of 50.

This is for various reasons but mainly, radiation exposure and dense breast tissue. Thermography is ideal for women under the age of 40 because it offers a safe option in your breast health screening. Researchers have concluded that with the utilization of self-breast examination, mammography, and thermography, one has a 98% detection rate.

Find out what your body is trying to tell you through thermography.



If you have any questions about how thermal imaging could benefit you, call (855) 254-4328 to speak with one of our technicians or to make an appointment. Health Enhancing Thermography is located at 1900 Sleepy Hollow Road, South Park, PA 15129. Visit www.heat-images.com for more information.

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Children With Special Needs

Family Emergencies With A Medically-Complex Child: How The Children's Home Can Help

Life happens: family emergencies, planned medical procedures, last minute out-of-town obligations. And that means readily-available child care is a top priority. But for family caregivers with a medically fragile child, not just anyone is qualified to follow a medical care plan with specifics on medication administration, technology use, medical monitoring and more.

Pamela Keen, CEO, of The Children's Home & Lemieux Family Center, took note of this gap in the continuum of care for family caregivers.

"Family caregivers can't always turn to relatives and friends to care for their medically fragile child," says Keen. "And in-home care, in a pinch, is sometimes an unrealistic option. The Children's Home offers Continued Care at the Pediatric Specialty Hospital so families can take care of business knowing their child will be comfortable, healthy and safe with our in-house physicians and nurses."

With Continued Care, children may be admitted to the Pediatric Specialty Hospital for round-the-clock care and monitoring from doctors, mid-level providers and pediatric nurses. Homelike and comfortable, this low-stress environment features large, private rooms and bathrooms, televisions, Xbox consoles, WIFI and more. A commercial kitchen and dietary service prepares all meals according to each child's unique needs and requirements.

Families may also visit 24/7 throughout a child's stay, with availability to "room-in" bedside with the child in designated family living spaces. With a physician's recommendation for continued care, most insurances cover the cost of the stay at The Children's Home.

Caring for a medically complex child can be tricky — The Children's Home is here to help. Admittance to Continued Care is dependent on the circumstance.



Call to learn more about **Continued Care at the Pediatric Specialty Hospital** or arrange a tour to learn more about services first hand: **412-345-7983**.



Save the Date UPCOMING WORKSHOPS

Introduction to Autism

February 12 @ 6:30 pm - 8:30 pm

Autism Connection of PA,
35 Wilson Street #101
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For Parents and Caregivers of Children

Presented by Autism Connection of PA Staff
Getting any new diagnosis comes with the need to understand it. Learn the basics about autism, and get some take-home tips, from people who understand and have worked in this field for 20+ years. We will explain the details about autism and how brain differences help shape personality, likes, dislikes, fears, eating, sleeping, the senses, and communication. Please come and ask your questions.

April 30

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To register or for more information,
visit www.autismofpa.org.

CHILDREN WITH SPECIAL NEEDS

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A Long History of Amazing Care

Since 1902, The Children's Institute of Pittsburgh has taken great pride in being a place where children and families with special needs are welcome, accepted, and included. With more than a century's history of providing expert care to children that need it most, one thing is evident – amazing things happen when the passionate team at The Children's Institute comes together to focus on outcomes and fulfill their mission: To Heal. To Teach. To Empower. To Amaze. Just as every winter snowflake is unique and different, so is every child they help through their services:

- Outpatient Physical Health Services
- Outpatient Behavioral Health Services
- Educational Services
- Family Services

“At The Children's Institute, we consider the whole child - their individual needs, presenting diagnoses, behavioral health, and educational requirements,” says Dr. Wendy Pardee, President and CEO. “We help children of all ages - and their families - navigate the world.”

Think about the nonverbal student in a wheelchair who used his eyegaze augmentative and alternative communication (AAC) device to give a phenomenal graduation speech; or the child with autism who was able to give his mom a hug for the first time; or the little girl with Down syndrome who made tremendous strides towards independence thanks to occupational and aquatic therapy; or the older youth who was adopted at



age 15, finding the support he always wanted and needed in his new forever family.

Fulfilling their mission is hard work, but these stories bring a motivation that persists on as The Children's Institute helps to strengthen families and ensure that individuals with special needs reach their full potential.

New Year's Resolutions for Caregivers of Children with Special Needs

For many parents and caregivers, a New Year comes with already busy calendars, appointments, and a maintained focus on putting our children first. This is especially true for individuals caring for children with special needs. Enter 2020 with positivity and a renewed focus on all that can be accomplished in the days ahead with these resolutions in mind:

- Believe in amazing possibilities
- Don't set limits on abilities – focus on the potential
- Celebrate every milestone – big or small
- Make time for playtime and fun

An Amazing Resource for Your Family



Learn more about **The Children's Institute** at amazingkids.org or call (412) 420-2362 to schedule an evaluation or appointment.

Directory of Services for Children with Disabilities and Special Needs

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Children's Home and Lemieux Family Center 412-441-4884
www.childrenshomepgh.org

Every Child, Inc. 412-665-0600
www.everychildinc.org

Jewish Family and Children's Service of Pittsburgh
412-422-7200
www.jfcsppgh.org

Three Rivers Adoption Council
412-471-8722
www.3riversadopt.org

AUTISM

Autism Connection of Pennsylvania 412-781-4116
800-827-938 www.autismofpa.org

Every Child, Inc. 412-665-0600
www.everychild.org

Watson Institute
412-914-8800
www.thewatsoninstitute.org

Highlands Hospital Regional Center for Autism 724-603-3360
www.highlandhospital.org/services/autism

The Children's Institute
412-420-2362 www.amazingkids.org

The Early Learning Institute
412-922-8322 www.telipa.org

Wesley Spectrum Services
724-443-4888
www.wesleyspectrum.org

HEARING LOSS

WESTERN PA School for the Deaf 412-244-4269 www.wpsd.org

HOME HEALTH CARE

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DEVELOPMENT AND EARLY INTERVENTION

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www.achievaearlyintervention.org

Children's Therapy Center of Washington Health System
www.whs.org/ctc

TEIS Early Intervention Provider
412-271-8347 - www.teisinc.com

Alliance for Infants
412-885-6000

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412-822-8322 www.telipa.org

BLINDNESS / VISION LOSS

Western PA School for Blind Children 1-800-444-1897
www.wpsbc.org

BEHAVIOR

PACE School 412-244-1900
www.paceschool.org

SPECIAL NEEDS DAY CARE
Childs Way 412-441-4884

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Learn more at amazingkids.org.

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Taking the Mystery Out of Early Intervention

What exactly is Early Intervention?

Early Intervention is a routine based system of coordinated services including Physical, Speech and/or Occupational therapies as well as nutrition, vision, hearing and developmental services that promote a child's age-appropriate growth and development, supporting families during the critical years between birth and three years of age.

What happens during Early Intervention?

Initially an assessment of your child will take place by an independent evaluator to determine if services are recommended. Dependent on your child's needs, one or more therapies or services will be coordinated and provided in your home or at another convenient setting such as daycare or grandma's house. These therapies may include:

- Physical therapy if there are concerns in the areas of gross or fine motor skills or movement
- Speech therapy if sound and or language formation is of concern.
- Occupational therapy to help with feeding as well as sensory issues.
- Development instruction to help with behavioral concerns
- Social Service to support the family
- Hearing, Vision and Nutrition Services to address associated issues

These professionals have had extensive experience in helping children through the use of various activities that may look like "playing" with your child. In fact, they are! A child's work is play. Therapists work with you and your child to provide activities and suggestions that you can repeat between therapy sessions to help your child address development challenges. The frequency and length of therapy session will vary based on the needs of your child.

Early Intervention helps your child make the most of learning through play. Purposeful play is essential to brain development, particularly during the first three years of life. If your child appears not to be meeting devel-



opmental milestones, getting support early is essential. Opportunities for play with a caregiver and an Early Intervention specialist can facilitate the development of the skills needed for problem-solving, self-control, socialization and communication. Building the foundation for these skills is necessary as a child enters school and adulthood.

How long will it take for Early Intervention to make a difference?

The length of time a child receives Early Intervention Service is very individualized, but accessing Early Intervention services early may help your child catch up more quickly. Some children reach their unique goals sooner than others. Your patience as well as perseverance with your child's Early Intervention activities as guided by your therapist is vital. Our experience at teli indicates that with encouragement and practice, each child can reach their true potential.

Early Intervention Services can help your child achieve the developmental milestones to enable them to reach their full potential. If you have questions, call **teli** at (412) 922-8322.

Resources for Early Intervention

Early Intervention is a federal program, publicly funded and available in every state. A developmental assessment determines eligibility for EI and is free of charge to the family. EI is usually provided in the home but may sometimes take place at an out-patient center or other setting.

In Pennsylvania, every county has its own 0-3 Early Intervention program.

The first step to Early Intervention is service coordination. The parent should call the EI hotline, called **CONNECT, at 800-692-7288**. They'll send a professional to the home to collect information about the baby that will determine the composition of the team who

will conduct the developmental assessment. Once the child is deemed eligible for EI services, the next step is to choose an Early Intervention provider and develop an Individualized Family Service Plan.

In Allegheny County, Alliance for Infants is the service coordination provider: 412-885-6000.

In Washington County, call 724-228-6834

Babies who were born prematurely, are multiples, had complications at birth or other complications are connected to the EI system before they leave the hospital.

Any child age 0-3 in Pennsylvania is eligible for a developmental assessment through the Early Intervention program.

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"Family caregivers can't always turn to relatives and friends to care for their medically fragile child. And in-home care, in a pinch, is sometimes an unrealistic option. The Children's Home offers Continued Care at the Pediatric Specialty Hospital so families can take care of business knowing their child will be comfortable, healthy and safe with our in-house physicians and nurses." - Pamela Keen, CEO

CALL TO LEARN MORE ABOUT CONTINUING CARE AT THE PEDIATRIC SPECIALTY HOSPITAL
OR ARRANGE A TOUR TO LEARN MORE ABOUT SERVICES FIRST HAND: 412-345-7981



What Is a Developmental Assessment and Does My Baby Need One?

By Nancy Kennedy

“Is my baby okay?”

It’s the first question that a new mother asks. And sometimes, a mother has a gut feeling that her baby is not developing as he or she should. Maybe she’s making silent comparisons between her baby and the other babies in their play group, and her baby seems a bit behind the others. She tells her pediatrician, who may respond to her questions with reassurance and encouragement to “to give it more time.”

During infancy, time is a precious commodity, because the first three years of life are critically important to a child’s development and progression toward independence and fully realized potential. The foundation of the child’s life is being laid in these years, say several of the region’s infant development experts, as the child acquires the skills of walking, speech, learning, and others. According to Sharon Richards, M.Ed., CIMI, vice-president of Early Intervention at Achieva, these skills emerge gradually, on a general schedule, and are known as developmental milestones. When an infant does not reach a milestone at the expected time, it is considered a developmental delay.

“A parent should insist on a developmental assessment if they believe it is needed,” states Richards. “Delays can be in motor skills, speech, feeding behaviors and cognitive development, and can have many causes. I tell moth-

ers, ‘Trust yourself – your doubts are reason enough to have an assessment.’ New parents think they need permission from the pediatrician but that’s not true. If your baby is behind on any milestone, an assessment is important, and you can initiate it on your own.”

The developmental assessment evaluates the baby’s physical, cognitive, communication and social/emotional development and determines the need for Early Intervention (EI), a system of services and supports for children from 0 - 3 that promotes development through various types of therapy. Providers of these therapies are experienced pediatric professionals who provide therapy in the home and teach the family to utilize the interventions themselves. EI therapy looks like play and builds on the baby’s strengths.

A developmental assessment can give a parent peace of mind, Richards says. “The assessment will

either indicate that there is no reason for concern, or it will validate your concerns and lead to the next step of getting your baby the services he needs in order to gain skills and reach their milestones. You’ll be validated as a mother, too, because you sensed a problem and advocated for your child. Mothers need to trust themselves and ask for what they need. Early Intervention is a great resource and the impact is lifelong.”

In Washington County, the Children’s Therapy Center (CTC) of Washington Health Systems is a provider of out-patient services, and children can qualify for both in-home and out-patient services. “There are lots of red flags that indicate that a baby may need a developmental assessment and EI,” says Debra Lawson, PT, DPT, coordinator of physical therapy at CTC. “Asymmetries are an example: hand preference doesn’t happen until age two so if your baby is only using one hand, it may be due to a birth injury or torticollis, in which the baby tilts the head to one side. If the baby is standing and walking but falling a lot, isn’t feeding well, or seems to have sensory aversions, then an assessment will help determine the source of the problem. It is important for the child to be assessed as early as there is a concern.”

One of the advantages of an assessment, Lawson says, is that the baby will be seen by a child development expert: “A pediatrician is a generalist; therapists are specialists.

We provide an expert opinion and that gets the ball rolling for services. A child with a mild developmental delay should still get services: EI means that a small delay doesn’t become a big problem. It’s important to remember that other children of the same age are continuing to move forward; a baby with a delay can fall further behind if there is no intervention. EI helps prepare the child for the education system.”

Lawson adds that developmental delays can happen when an infant is spending too much time in a container, such as a swing or car seat. This can lead to decreased strength and coordination, facial asymmetry, flattening of the skull in spots and torticollis. Containers, she explains, confine an infant, decreasing sensory experiences and preventing the baby from moving all parts of the body. Physical therapy can reverse this by improving muscle strength and motor skills.

With referral for developmental assessment and individualized Early Intervention, babies with developmental delays get the help they need to reach age-appropriate milestones and get the best possible start in life. Both Debra Lawson of CTC and Sharon Richards of Achieva Early Intervention encourage mothers who have concerns about their infant’s development to trust themselves. “Mothers know their kids, and doctors need to listen to mothers,” Lawson says. “In my experience, mothers – even new mothers – are usually right.”





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If you would like to learn more about WHS Children’s Therapy Center, visit whs.org/ctc or call (724) 942-6100.

Deliver inside our new WHS CARE Center for Family Birth and Women's Health

We are excited to announce the first phase of the new **CARE Center for Family Birth and Women's Health**, inside WHS Washington Hospital, is complete. The first phase of construction included centralized nursing stations, a new family lounge, an updated nursery including a level 2 special care nursery, a new lobby and 13 spacious postpartum and recovery rooms that will be utilized by obstetrics patients as well as patients having gynecological surgeries.

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We'd like to thank our donors, staff and our community for the generous support during this upgrade.



Questions? Call us at (724) 223-3220

To see more photos and to monitor the progress of phase 2 construction, visit whs.org/updates



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Living Well With A Disability



Living Well with a Disability Means Good Healthcare, Social Support and Activity

By Nancy Kennedy

Having a disability, of any kind, does not mean that a person is not healthy. It is possible, and in fact essential, to live the healthiest life you can, and to get the healthcare that you need. That means healthcare that provides for you in a holistic way, including, but not limited to, any health problems related to the disability. In this space, the **Western Pennsylvania Guide to Good Health** offers some helpful tips on living your best life.

GETTING GOOD HEALTHCARE

- It is ideal to have a consistent, comfortable relationship with a PCP who knows you well, is familiar with your individual needs and is easy for you to talk to. You have a right to this and if you do not feel at ease, talk to him about this, or find a new doctor.

- Be your own advocate: you know your body best.
- If you are going to see a new physician, call first to find out about access to the facility – are there ramps and elevators? What is the parking situation – do they have valets? Let the office know ahead of time if you have special needs.

- Does the office have the right equipment for you, such as an accessible exam table?

- Prepare for your visit by making a list of questions and concerns. Make a copy for the doctor.

- Sometimes, even with preparation, it is difficult to recall everything that the doctor tells you. If you can, take a friend or relative to be a second set of ears. Write down the doctor's answers.

- Persons with disabilities often have difficulty accessing specialty services including gynecologists and dentists. The challenges associated with these services can be daunting, but you should not neglect your health because of them. Again, be your own advocate and insist that you are accommodated in whatever way is necessary.

MAINTAINING MENTAL AND EMOTIONAL WELL-BEING

- A person with a disability may find that it is difficult to participate in social events, and as a result, may become socially isolated. Stay in touch with family and friends and let them know if you are feeling lonely, sad,

anxious or unusually tired. Learn to ask for what you need.

- Having a regular routine gives order to the days and reduces stress.
- Your environment has a significant impact on your emotions. Keep up the care of your home so that you can feel relaxed and comfortable; a messy environment is a source of added stress.

- Depression is a common illness, and a very treatable one. Tell a friend and your physician if you are feeling hopeless or having thoughts of self-harm. There is help available. If these thoughts are urgent, call 911 or go to the nearest ER.

People with disabilities sometimes have a harder time getting and staying healthy than people without disabilities, but it is essential to make good decisions for yourself regarding your health and well-being. Anyone can improve their health, stay healthy and lead a fulfilling life.

STAYING PHYSICALLY FIT

- Everybody needs exercise. Physical activity has countless benefits for people of all ages, sizes and abilities. Being inactive is a risk factor for heart disease and other medical conditions.

- If you are not certain about the type or amount of physical activity that is right for you, consult your PCP or a physical therapist.

- If you are starting a new fitness program, start slowly and don't overdo it.

- Aerobic activity helps your heart, lungs and mental health and improves energy, while muscle strengthening makes you stronger and more able to perform activities and avoid injuries.

People with disabilities sometimes have a harder time getting and staying healthy than people without disabilities, but it is essential to make good decisions for yourself regarding your health and well-being. Anyone can improve their health, stay healthy and lead a fulfilling life.

Protecting and Supporting Adults With Disabilities IS EVERYONE'S JOB

By *Luciana Randall*



Our organization, Autism Connection of Pennsylvania, was founded by parents of children with autism in 1996, and as the world has changed, so has our focus. No longer simply a parent support and information organization, we remain an independent (not funded by government nor a national charity) nonprofit who has expanded our mission to be a lifeline for families and autistic adults, providing support, information, and advocacy.

We now take help requests via email, messenger, and mail, in addition to traditional phone calls, providing more accessibility for disabled people in need of help, who cannot easily talk on the phone. They often contact us for assistance figuring out problems in their lives, and often they are being abused or exploited - sometimes without even being aware of it.

How could we be a lifeline of support, our mission, and continue to listen to awful stories of abuse, neglect, or sexual assault, without helping develop better disability victims' responses in programs and policies statewide? This question kept eating away at me.

Existing resources can be very good, but some seemed uneven, inadequate, or at times, not very disability-informed. So I was pleased in 2018 to be appointed to the Victims Services Advisory Council for the PA Commission on Crime and Delinquency, and then the Adult Protective Services (in the Department of Health) advisory board in 2019. One big issue these places have in common is that few in the disability world, while being most at risk of being harmed, are even aware they exist.

HAVE YOU EVER HAD OR NOTICED THE FOLLOWING SIGNS OF ABUSE?

- Bruises or broken bones
- Weight loss
- People touching you or putting things inside your body without permission
- Memory loss
- Bed wetting
- Personality changes
- Being forced to do things you do not want to do
- People ripping you off, or taking your money
- Social isolation or fears of specific people
- Changes in banking habits
- Giving away assets such as money, property, etc.

HERE ARE TWO PLACES TO TURN:

In case of suspected or known abuse, call **1-800-490-8505**. Talk over your concerns with the intake worker (who is from the Area Agency on Aging), and get his or her name. If they feel that protection is necessary, they will contact the Adult Protective Services provider (currently Liberty Healthcare) and an investigator will contact you to go over things in more detail. You can remain anonymous through this process and you do not have to witness abuse or neglect firsthand in order to make a report.

And in the very sad, not uncommon event that you or anyone you know (disabled or not) has been the victim of a crime, all are entitled to free counseling and other victims services, no matter when or where the victimization occurred. **You can call 1-800-233-2339.**

The link to a statewide map of victims service providers is https://pcv.pccd.pa.gov/available-services/Pages/Interactive-Map.aspx#.VBB2X_ldVyx



Luciana Randall is Executive Director, Autism Connection of PA. For more information, visit www.autismofpa.org.

Adult Protective Services

Do you suspect elder abuse or abuse of an adult with a disability? Call 1-800-490-8505

In 2010, the Adult Protective Services (APS) Law (Act 70 of 2010) was enacted to protect adults between the ages of 18 and 59 with a physical or mental disability that limits one or more major life activities. The APS Law establishes a program of protective services in order to detect, prevent, reduce and eliminate abuse, neglect, exploitation and abandonment of these adults in need.

A report can be made on behalf of the adult, whether they live in their home or in a care facility such as a nursing facility, group home, hospital, etc. Reporters can remain anonymous and have legal protection from retaliation, discrimination, and civil and criminal prosecution. The statewide Protective Services hotline is available 24 hours a day.



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LIVING WITH A DISABILITY

A Resolution for Inclusion

The New Year is upon us, and for many it is a time of change, renewal, and the setting of resolutions, which we often define as goals for the year ahead. Setting goals is a healthy activity and leads more readily toward success because it is easier to forge a path when you know the destination. Studies have shown that clearly defined and realistic goals are best, and those who write everything down are 33% more likely to achieve their goals than those who simply keep things in mind. In addition, many of us build a support network along the way, whether it is asking a friend to keep us accountable in avoiding sweets or joining a book group to motivate more reading.

This goal-setting process also holds true for individuals living with a disability. They have hopes, dreams, and plans for their life, and mapping out a specific path is an excellent way to achieve them. For

some, their journey might require additional or specialized supports or possibly environmental modifications, and their support network goes beyond friends and family to include behavioral specialists, wrap-around services, or other expert advisors.

This clinical support team will assess the individual's status and help write objectives to reach long-term and short-term goals.

For instance, the individual may wish to live independently—a long-term goal. A few of the objectives to reach the short-term goals along that path may include learning to heat dinner, use public transportation, and go to the bank. The clinical support team will help craft these objectives, but the key is ensuring that the individual is central to the entire process of setting goals for their own life.

At Arc Human Services, we work with individuals who have a range



Finding the right support network makes all the difference when setting goals.

of differing abilities—including intellectual disabilities, autism, and mental health challenges—to help them find success as they have defined it. It could mean living an everyday life that is safe, happy, and healthy; being involved in their community; trying new things; or visiting new places.

But the organization's heart and soul is making sure that these individuals are included and involved in mapping out their own future.

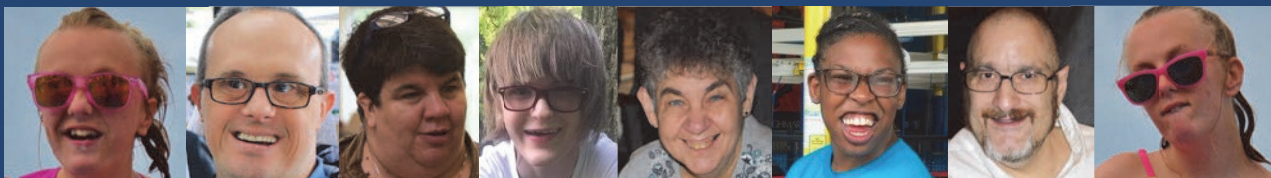
This goal-setting process also holds true for individuals living with a disability. They have hopes, dreams, and plans for their life, and mapping out a specific path is an excellent way to achieve them.



For more information on **Arc Human Services' Clinical Program** and other resources and services in Southwestern PA, contact Karen Gleason gleason.karen@archumanservices.org or Grishma Solanki at solankig@archumanservices.org or (724) 745-3010 ext. 118.



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www.ArcHumanServices.org

LIVING WITH A DISABILITY

Aetna in Pennsylvania: Bob O'Connor and Denise King on PACE (Pharmaceutical Assistance Contract for the Elderly)



ABOUT THE EXPERTS: Bob O'Connor is the vice president of Medicare for Aetna in Pennsylvania. Denise King is the director of Medicare for Aetna in Pennsylvania.

What is PACE?

PACE stands for Pharmaceutical Assistance Contract for the Elderly. PACE is a program, funded by the Pennsylvania lottery, that provides residents of the Commonwealth of Pennsylvania, age 65 or older, some of the care and services they need that are not covered by Medicare and Medicaid. For example, PACE may help pay a portion of your prescription drug plan cost, except for the monthly co-payments of \$6 for generic drugs and \$9 for brand name drugs. It's designed for people with limited resources whose incomes are not low enough to qualify for Medicaid.

Are there any requirements for PACE?

You have to be a Pennsylvania resident for a minimum of 90 days. There are also income guidelines. Currently, the annual income limit is \$14,500 for a single person and \$17,700 for a married couple.

Is there a difference between PACE and PACENET?

PACENET has similar benefits, but has co-payments of \$8 for generics and \$15 for brand name drugs. In addition, the income limits are slightly higher than those for PACE. The total income for a single person is between \$14,500 and \$27,500; and total combined income for a married couple ranges from \$17,700 to \$35,500. Income guidelines for PACE and PACENET change annually, so it's important to review them each year.

What is D-SNP?

D-SNP stands for Dual Eligible Special Needs Plan. D-SNP is a Medicare Advantage Plan designed for people who are eligible for both Medicare and Medicaid. Unlike PACE and PACENET, a D-SNP is not only for seniors. You have to qualify for both Medicare (65 and older or under 65 with certain disabilities) and Medicaid (receive assistance with Medicare premiums or eligible for full Medicaid benefits and assistance



"We offer a Benefits Checkup — a single site that a trusted agent can walk you through and help you determine if you qualify for any programs."

-Bob O'Connor, Executive Director of Medicare for Aetna in Pennsylvania

with Medicare costs). So someone who is 40 years old and living with certain disabilities can qualify for a D-SNP. A D-SNP will help you maximize your Medicare and Medicaid benefits. Keep in mind, if you are dual eligible and are on other programs, you may be overpaying on your co-pays and missing out on some additional benefits. It's always good to examine what you are eligible for so you can maximize your benefits.

What is LIS?

LIS is also referred to as Part D Low Income Subsidy or Extra Help. This federal program is for people who have resource and income limits. It helps people with Medicare pay for prescription drugs. If your monthly income is under \$1,581 for an individual or under \$2,134 for couples, and your assets are below specified limits, you may be eligible for LIS. To apply, you can fill out an "Application for Extra Help with Medicare Prescription Drug Plan Costs" form with your local Social Security office.

Do you have any final takeaways for our readers?

Financial situations change over time. Maybe your spouse passed away, your income level decreased, or you had to sell your assets. There are several programs available for help, but understanding your options can be confusing at times. We offer a Benefits Checkup — a single site that a trusted agent can walk you through and help you determine if you qualify for any programs.



For more information, visit www.aetnamedicare.com and <https://aetna.benefitscheckup.org/welcome-aetna/>

The 24-Hour Friendship Line: 800-971-0016

The Friendship Line is a 24-hour, national crisis phone line specifically for older adults age 60 and over, and for adults with disabilities. It was started by the Institute on Aging, based in San Francisco, to address the problem of isolation and loneliness that many older adults experience, especially in the winter months. Older adults who are feeling sad, anxious, depressed or suicidal can call and talk to trained counselors. The Friendship Line offers a "warmline" for emotional support and connection, plus grief support, crisis intervention and suicide prevention. To learn more, visit www.ioaging.org





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LIVING WITH A DISABILITY

ADRIENNE MOON: Providing Care from the Heart through A & M Healthcare Agency and Live-In Disability Solutions

By Nancy Kennedy

Registered nurse, business owner, entrepreneur, educator, mentor, and advocate: Adrienne Moon, RN, fills many roles and fills them with competence, creativity and grace. She is an intrepid spirit with a generous heart, who sees unmet needs and strives to provide for them. Adrienne is a registered nurse and is the founder, CEO and owner, along with her father, John Moon, of A & M Healthcare Agency, LLC, and a second company, Live-in Disability Solutions.

A & M Healthcare provides home health care to clients who are in need of care, support and services in order to continue living in their homes with as much independence as possible.

"Our mission is to efficiently provide client-centered, quality

nursing and home care services from the heart, and to keep the client in the least restrictive environment possible," Adrienne says. "We define 'care from the heart' as the kind of care that you would give your mother or any beloved family member. We give excellent care along with empathy, understanding and compassion."

A & M's services range from non-medical in-home care to skilled nursing care. Non-medical care means personal assistance services, or PAS, including bathing, dressing, feeding, basic cooking, light housekeeping, medication reminders, food shopping and transportation to appointments. This level of care is delivered by home health aides and certified nursing assistants who also serve, according to Adrienne, as "the eyes and ears of the nurses," by communicating their concerns about the

client to the attending nurse. The home health aides are able to identify early signs of problems that make it possible to intervene before the problem becomes a crisis or a hospital re-admission becomes necessary.

Skilled nursing care is provided by LPNs and RNs, who also serve as liaisons to the attending physicians. The nurses provide wound care, diabetes management, medication management, administration of medications and many more clinical services.

Adrienne has empathy for her staff because she has filled every role herself. She began her healthcare career as a certified nursing assistant, in Florida; she completed LPN training in 2006 and obtained her RN license in 2011. She is currently working towards her BSN degree. With deep experience in home care and wound care, she knew that there were enormous needs for the type of services that A & M provides. She also is well-acquainted with the role of caregiver: she returned to Pittsburgh in 2011 when her mother became ill and quit school in order to care for her full time.

A & M has a second location near Philadelphia, which is managed by Adrienne's sister, Ja'net Moon. The two agencies serve Allegheny, Beaver, Butler, Washington, and Westmoreland counties in western Pennsylvania, along with Philadelphia, Montgomery and Cheswick counties in the east. Clients are referred to the agency through word-of-mouth, the web site, social media and television, and by healthcare professionals.

Adrienne has also founded Live-in Disability Solutions, which provides in-home services to intellectual disability individuals residing in the Allegheny County Area. This includes Homemaker services that enable the individual or the family with whom the individual resides to maintain their private residence. Live-In Disability Solutions will provide this service when a household member is temporarily absent or unable to man-



Adrienne Moon

age the home, or when no landlord or provider agency staff is responsible to perform the homemaker activities. Services are provided by a trained homemaker and may include cleaning and laundry, meal preparation, and other general household care needed to maintain the home in a clean, sanitary, and safe condition.

Additionally, Live-In Disability Solutions provides Companion services, meaning direct assistance or supervision to individuals age 18 and older who live in private homes. The services are designed to ensure the individual's health, safety and welfare. Companions may supervise, assist or perform activities that include: grooming, household care, meal preparation, ambulating, medication administration in accordance with regulatory guidance, and socialization.

In-Home and Community Support is a direct service to assist clients to acquire and improve the skills needed to live in the community with greater independence and meaningful participation. The support includes guidance in home management, mobility and transportation, use of community resources, decision-making and socialization.

In all of her endeavors, Adrienne Moon is above all an advocate for others: her clients, their families, and the nurses and aides on her staff.

To learn more about A & M Healthcare Agency, or Live-In Disability Solutions, visit www.am-hcagency.org or call 412-793-3705

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H4279_201660_M



Next Evolution Healthcare Eases the Transition to Home Care for Senior, Adult and Pediatric Patients and Families

By Nancy Kennedy



Daniele Doerfler

As a veteran of the front lines of healthcare, Daniele Doerfler, LPN, has firm ideas about what constitutes quality care, and she is eager to share that vision as she and a group of like-minded colleagues embark on a new venture in home healthcare: Next Evolution Healthcare, Inc.

Next Evolution will provide home healthcare, private duty and nurse visiting services to patients of all ages in seven counties throughout Southwestern Pennsylvania: Fayette, Somerset, Westmoreland, Washington, Greene, Indiana and Allegheny. According to Ms. Doerfler, home health is an undervalued aspect of the healthcare industry, but it is a necessary component and critically important to patients and families. All too often, she says, patients and families are not aware that they have options beyond long term care facilities, and patients who could return home, with care and support, are not given that opportunity. With Next Evolution, she plans to change that.

“Before I became an LPN, I was a CNA and I worked in facilities as well as in home care. From my perspective, the benefits of home care vs. facility care were obvious – keeping people in their own familiar environments, surrounded by family and personal belongings, helped them recover from illness and improved their quality of life. In home care, there is more emphasis on the emotional health of the patient, instead of just the clinical health.”

Danielle decided to focus on home care exclusively, specializing in pediatric home care, and gained experience in care of medically fragile infants and children. In addition, Doerfler quickly advanced to a management position and took on responsibilities for staff recruitment and training, plus marketing, for the home care agency. Recruitment of the right staff is the key to high quality home care, she believes, and she has initiated a strategy for identifying and recruiting nursing graduates from the region’s LPN programs. “We have a training program for newly recruited nurses; the program meets all the state guidelines so it enables us to have these nurses go right into home care instead of requiring them to first have hospital or long term care experience.”

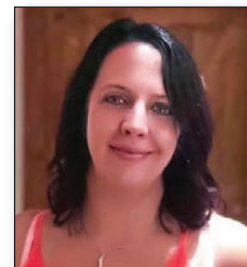
In addition to her nursing experience, Doerfler has had diverse experience in business. She has been an assistant manager in retail stores, and has twice created successful non-profits. One of them, a non-profit in the Mon Valley, pioneered the largest backpack feeding program in southwestern Pennsylvania, providing emergency food boxes and care packages to food-insecure children and to victims of fires and natural disasters.

Next Evolution Healthcare will open in February 2020 as a licensed home care agency, staffed by clinical nursing supervisor, Theda Embacher, RN, and a team of experienced nurses and home health

Next Evolution Healthcare Provides a Range of Services:

- Home Healthcare for all ages, infants through older adults
- Care for Medically Complex Infants
- Exiting Doula services for terminally ill patients and families
- Private Duty Nursing
- Visiting Nurses
- Initiate Nursing Program for Graduate Nurses
- CPR Instruction and Certification
(for organizations, individuals and the community)

aides. Our nursing team includes Stephanie Eiler, Lori Johnson, Shelly Hendricks, Amanda Fischer, and Holly Roebuck. Office manager is Heidi Fields. All are also certified as CPR instructors, and Next Evolution will offer CPR training to the community.



Stephanie Eiler

Healthcare industry leaders predict that that in the next decade, healthcare will largely shift from the hospital to the home. Next Evolution is perfectly positioned and prepared to meet the needs of patients and their families as they navigate the transition to home. Next Evolution has a “Care First” team who will ease the process for families by serving as the initial caregivers and becoming familiar with the patient and their medical needs, medical equipment, safety concerns and personal needs. The Care First nurse will then train the team who will become the consistent care providers in the home. “This approach helps the staff as well as the patient and family to become comfortable and assures the family that they will have the staff they need,” explains Care First nurse Stephanie Eiler.

“Our philosophy is ‘Evolving with our patients, for our patients,’ Danielle Doerfler explains. “The needs of our patients are always changing, and the healthcare system is always advancing, and we have to be ready to grow and develop ourselves in order to provide the highest quality home care. We are committed to filling in the quality gaps in home health care, with a focus on the patient as a whole person.”

> To learn more, visit www.nextevolutionhealthcare.com or call (724) 201-1487.

“Our philosophy is ‘Evolving with our patients, for our patients.’”



Why Rehabilitation is Important

By Richard C. Senelick, MD

You never expected to get sick or injured, but now you find yourself in the hospital after experiencing a stroke. Your right side is weak, and your speech is a bit slurred. How will you ever get home and get your life back on track?

We never think we will need rehabilitation, yet there are more than 50 million people with disabilities in the United States. Rehabilitation is the key to getting back to your community and the activities you love.

Just like school

Going for therapy and rehabilitation is kind of like going back to school later in life. You may have to relearn information that you had previously acquired. You may need to learn to read again, speak clearly or improve your memory. Like school or learning a new skill, there are certain principles that make a difference.

Dose matters

When we take a medication for a medical problem, we carefully adjust the dose. Too little or too much antibiotic and the infection worsens or never goes away. The same is true of rehabilitation. The intensity and amount of therapy you receive matters. Typically, an inpatient rehabilitation hospital will provide at least three hours of therapy a day, five days a week.

Function matters

If you want to learn to play a piano, you need to practice on a piano and not just read about it. The same is true for rehabilitation. If you had a stroke and have lost the use of your right arm, you will need to do tasks and therapy that require the use of your right arm. Performing these tasks will help rewire your brain.

Know the guidelines

According to the adult stroke rehabilitation guidelines released by the American Heart Association, whenever possible, stroke patients should be treated at an inpatient rehabilitation hospital, rather than a skilled nursing facility.

By using an interdisciplinary team approach, which includes physical therapists, occupational therapists, speech-language pathologists, physicians, case managers, pharmacists and dietitians, clinicians at Encompass Health rehabilitation hospitals work together to create a customized care plan designed with each patient's unique goals at the center.



To learn more about **Encompass Health Rehabilitation Hospital of Sewickley**, visit encompasshealth.com/sewickleyrehab. To learn more about **Encompass Health Rehabilitation Hospital of Harmarville**, visit encompasshealth.com/harmarvillerehab.

Dr. Richard Senelick is a neurorehabilitation physician and editor of Encompass Health Press.

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Eye Health

GLAUCOMA - The Silent Threat to Vision

by Christopher M. Spearman, M.D.

What is glaucoma?

Glaucoma is caused by increased pressure within the eye. This increased pressure, untreated, can cause damage to the optic nerve. Initially it is without symptoms, but as it progresses, it may start to decrease a person's peripheral vision (see photos to right). Eventually it can affect the central vision, resulting in tunnel vision.

If left untreated, glaucoma ultimately may cause complete blindness. Vision loss from glaucoma is irreversible. Therefore, early detection and treatment is extremely important.

What is my risk of glaucoma?

Two percent of all Americans have glaucoma. The risk of glaucoma increases in those with a family history and also with increasing age. Other risk factors for increased eye pressure include eye infections, inflammation, diabetes, steroid medications, eye trauma, and more.

How is glaucoma treated?

There are three main categories of glaucoma treatment. These include eye drops, laser treatments, and surgery.

Traditionally, glaucoma is treated with eyedrops that lower the eye pressure.

A laser treatment, Selective Laser Trabeculoplasty (SLT), is another treatment option. This is a painless treatment with minimal risk. It works on average for five years and can be repeated.

Minimally Invasive Glaucoma Surgery (MIGS) is an emerging form of glaucoma treatment. These procedures are often performed at the same time as cataract surgery and can help reduce the eye pressure and

NORMAL GLAUCOMA



EARLY GLAUCOMA



MODERATE GLAUCOMA



ADVANCED GLAUCOMA



decrease the risk of glaucoma progression. These procedures are much safer than previous surgical procedures for glaucoma.

Ask your ophthalmologist for more information about these procedures and if they are a good option for your glaucoma treatment.

What can I do to reduce my risk of vision loss from glaucoma?

Since most forms of glaucoma are painless and initially without symptoms, the most important thing to do is schedule a routine eye exam with your eyecare provider. **The American Academy of Ophthalmology recommends that every person receives an eye exam by the age of 40.** The earlier glaucoma is diagnosed, and the earlier treatment is started, the less risk there is of vision loss from glaucoma. Glaucoma cannot be cured, but with proper management, the risk of significant vision loss can be reduced or eliminated.

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Age-Related Macular Degeneration: Learn More



Your vision is one of your most important senses. As you get older, your eyes will experience many changes that you don't even notice until it's in advanced stages. It is important to receive a thorough exam at least once a year with an experienced ophthalmologist at Associates in Ophthalmology.

One service AIO provides is the diagnosis and treatment of Age-Related Macular Degeneration. You might be wondering, what is AMD (age-related macular degeneration), how does it affect me, and am I at risk of vision loss?

What is Macular Degeneration?

Macular Degeneration is caused by the deterioration of the central portion of the retina, the inside back layer of the eye that records the images we see and sends them via the optic nerve from the eye to the brain. The retina's central portion, known as the macula, is responsible for focusing central vision in the eye, and it controls our ability to read, drive a car, recognize faces or colors, and see objects in fine detail.

There are two basic types of Macular Degeneration: "dry" and "wet." Approximately 85% to 90% of the cases of Macular Degeneration are the "dry" (atrophic) type, while 10-15% are the "wet" (exudative) type.

Three stages of Age-related Macular Degeneration (AMD).

- **Early AMD** – Most people do not experience vision loss in the early stage of AMD, which is why regular eye exams are important, particularly if you have more than one risk factor (see below). Early AMD is diagnosed by the presence of medium-sized drusen (yellow deposits beneath the retina).
- **Intermediate AMD** – At this stage, there may be some vision loss, but there still may not be noticeable symptoms. A comprehensive eye exam with specific tests will look for larger drusen and/or pigment changes in the retina.
- **Late AMD** – At this stage, vision loss has become noticeable.

Macular degeneration causes loss in the center of the field of vision. In dry macular degeneration, the center of the retina deteriorates. With wet macular degeneration, leaky blood vessels grow under the retina.

You are more likely to develop AMD if you:

- eat a diet high in saturated fat (meat, butter, and cheese)
- are overweight
- smoke cigarettes
- are over 50 years old
- have hypertension (high blood pressure)
- have a family history of AMD

Having heart disease is another risk factor for AMD, as is having high cholesterol levels. Caucasians also have an elevated risk of getting AMD.

Diagnosing AMD

The first signs of Age-related Macular Degeneration are typically discovered by an eye doctor in an annual dilated eye exam. They include the presence of drusen – tiny but visible heaps of cell waste on the surface of the retina – and pigment changes in the macula. Often these signs of AMD are present long before any changes are noticeable in a person's vision. Nearly everyone over age 50 has at least one small drusen. Standard screening tests include the visual acuity exam (the letter chart with an E at the top) and an Amsler grid, which looks like graph paper.

Treatments

Current treatments, especially for age-related macular degeneration, are slowing the progression of AMD and improving vision. Although there is not yet a cure for age-related macular degeneration or Stargardt disease, research at leading institutions worldwide progresses steadily. Scientists have begun to understand underlying genetics, cell metabolism, and environmental factors that cause macular degeneration.

Research at AIO

AIO is currently conducting research studies for Age-Related Macular Degeneration treatments. The Research Team was just recognized for their excellence in recruitment by the PANDA AMD study they are conducting. To learn more about participating in a study at AIO or would like to schedule an exam, please visit AIOvision.com or call 888.634.9800.

1. American Academy of Ophthalmology, [n.d.] What is Macular Degeneration, retrieved from <https://www.aaof.org/eye-health/diseases/amd-macular-degeneration>
2. American Macular Degeneration Foundation, [n.d.] About Macular Degeneration, retrieved from <https://www.macular.org/what-macular-degeneration>

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How to Manage Post-Holiday Stress in You and Your Aging Loved One

For many older adults, the holidays are a stark reminder of lost loved ones and/or the inability to be with family and friends.

The good news, though, is that there are ways you and your aging loved one can overcome these common holiday challenges and celebrate together.

Shift The Focus

Family is at the center of the holiday season for most people. And it's no different for older adults. However, seniors are therefore more likely to have lost loved ones. This can make the holiday season a less-than-jolly time.

It can help to honor his or her lost loved one(s) in a meaningful way. You and your loved one can do so by, for example, holding a candle-lighting ceremony or continuing a timeless tradition.

This can help shift your aging loved one's focus from loss and loneliness to the reason for the season: the gift of life.

Stay Socially Active

It's not uncommon for these seniors to isolate themselves and stay home. However, isolation only furthers feelings of loneliness and keeps older adults from enjoying the season.

For Senior LIFE members, there are ample opportunities to remain active and spend time with others. Members can visit the Senior LIFE Center to socialize with friends, visit their medical providers, and access rehabilitation services, which can all be helpful in combating loneliness and depression.

- Some other suggestions include:
- volunteering at a local organization

- exercising together
- participating in local activities for seniors

The options are endless—the key is to keep doing what brings you joy.

Share the Load

To prevent burnout and offset post-holiday stress, it's important to set realistic expectations from the beginning. Be aware of what you can manage and accomplish and what you can't—and ask for help.

At Senior LIFE, we understand that caregivers need a helping hand. That's why we provide options to help care for loved ones and give family caregivers the break they need. For those who qualify, there are no co-pays and no deductibles for Senior LIFE services. There is also no cost to enroll in the program.



> For more information on how Senior LIFE could help you or a loved one, call us today at Senior LIFE Washington 724-222-5433 or Senior LIFE Uniontown 724-434-5433. You can also visit us online at www.SeniorLIFEPA.com.

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Diabetes and Your Eyes

Just over half of Medicare beneficiaries with diabetes had an eye exam in 2017, reports the CDC. Medicare covers annual eye exams, which are an essential preventive care practice for persons with diabetes. Early detection of diabetic eye disease and other eye conditions can prevent vision loss.

Keep an Eye on Your Vision!

*Eye health is important at every age
– your vision is precious.*

Nutrition: To maintain healthy eyes, eat lots of fruits and vegetables including carrots, of course, plus dark, leafy greens like kale and spinach, and fish. Avoid weight gain and smoke.

Safety: Protect your eyes at work and at play. Safety glasses, goggles or eye guards are essential in many jobs, and also in sports. Wear sunglasses year-round, and choose ones that block 99-100% of UV-A and UV-B rays.

Eye Care: Know your family history of eye diseases such as glaucoma and cataracts, which are often hereditary, and see an eye care professional regularly to monitor your eye health. Annual dilated eye exams are recommended for adults.

General health: Eye problems can be a consequence of other conditions such as high blood pressure and diabetes. See your PCP and medical specialists to manage these conditions and prevent eye complications.

Test Your Balance

Maintaining balance is a key to healthy aging. When balance is poor, your risk of falling increases, and falls often lead to a loss of mobility and independence. To check your own balance, try this simple test:

**Stand next to a strong countertop.
Stand on one foot without holding on.
Count to ten.**

If you need to support yourself on the counter after just five to ten seconds, your balance needs improvement. Visit www.aarp.org to find simple exercises to improve balance.



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Coping with Caregiving and Recognizing Burnout

By **Evalisa McClure**

When a person becomes impaired by age, illness or injury, a friend, family member or other relative may take responsibility for their care. This primary caregiver helps a patient remain at home, rather than in a hospital, nursing home or assisted living facility.

For over four decades, VITAS® Healthcare has delivered expert hospice care to patients with six months or fewer to live – even those who are considered challenging or risky. Caregivers have been crucial in shaping and administering VITAS' patients' care plans, informing the hospice team of status changes, and handling patients personal and minor medical care.

The significance of that role, however, means that an overworked caregiver can negatively impact the patient's health as well as their own.

Caregiver burnout

Caring for a loved one can be emotionally, mentally and physically exhausting. Eventually, it can lead to caregiver burnout, a debilitating psychological condition brought about by unrelieved stress.

Symptoms include:

- overwhelming fatigue
- sleep problems
- changes in eating habits
- depression

Because a caregiver might continue to work outside the home, the impact of burnout can extend beyond the caregiver and their patient.

About 18 percent of American adults (43.5 million people) were caregivers in 2015, according to the National Alliance for Caregiving. A 2017 study published in *Journal of Multidisciplinary Healthcare* found that caregivers

miss more work than non-caregivers (8% vs. 4%), experience greater impairment of job productivity (24% vs. 14%), and higher rates of depression (53% vs. 32%) and insomnia (46% vs. 37%).

Recognition, respite care and self-care are solutions

VITAS hospice teams are trained to keep an eye out for overworked caregivers.

We encourage all caregivers to:

- ask for help when necessary
- tend to your own needs
- find time to take breaks or pamper yourself

This keeps caregiver, patient and family happier and healthier. Additionally, VITAS offers up to five days of inpatient respite care, so a caregiver can take a vacation, attend an important event or sim-



Evalisa McClure

ply get some rest.

Caregiving isn't easy, but you're not in it alone. If the person in your care is nearing the end of life, hospice can offer comfort and dignity for them along with support and guidance for you.

> Evalisa McClure is general manager of **VITAS Healthcare in Pittsburgh**. For more information about end-of-life care options, call **VITAS Healthcare** at (866) 759-6695 or visit **VITAS.com**.

For Caregivers, Wintertime Cheer Can Be Hard to Come By

Hospice offers emotional and clinical support when caregivers need it most.





Caregivers give more than care to their patients. They give their time, their energy and even their well-being to ensure a loved one's quality of life. When caregiver burnout strikes during the gloomy winter months, hospice can help.

When caregivers have questions about medication, need extra supplies or simply want some time to themselves, VITAS® Healthcare delivers hospice care to wherever a patient calls home, providing support to both patient and caregiver.

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lines on our faces.
It's the joys, the wisdom,
the moments that
shape us and define
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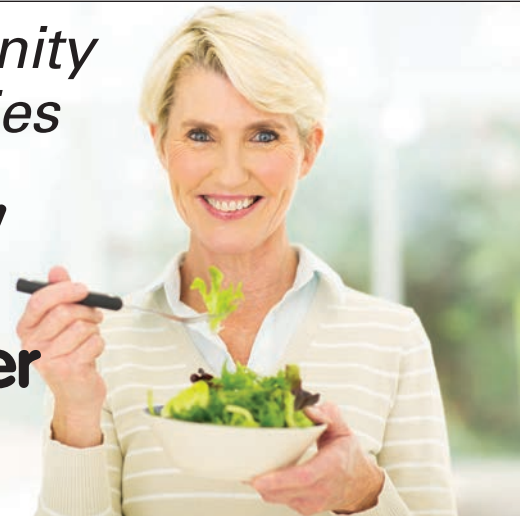
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SENIOR GUIDE

Community Life Series

Healthy Eating for Older Adults



Eating healthy is important at any age, but as we grow older it can make a significant difference in preventing, delaying or helping manage health issues such as high blood pressure or diabetes.

Seniors have unique nutritional needs. Check with your PCP about your personal needs. You may have restrictions (such as low sodium, or reduced saturated fat) because of a medical condition or medications. Your food requirements depend upon your height and weight, activity level, and general health. If you have access to a consult with a nutritionist, it can be very helpful.

The most important nutrients for older adults, in general, are calcium and Vitamin D for bone health, fiber for GI health, and potassium for blood pressure maintenance.

Fish with omega-3s, the healthy fat, is an excellent food choice for seniors. This means tuna, salmon

and mackerel. Aim for two servings per week. Canned versions of these fish are fine and are more economical.

Choose nutrient-dense foods and get the most bang for your buck. Usually, this means choosing brightly colored fruits and vegetables, such as spinach and kale; blueberries; oranges; carrot and cherries. Frozen fruits and vegetables are fine and are less work to prepare. Dairy and whole grains are also nutritious.

Make sure you are adequately hydrated. Sometimes, as we age, we avoid drinking fluids because of urinary bladder problems, but this can lead to problems such as kidney stones and blood clots. The best way to know that you are well-hydrated is by the color of your urine: it should be pale yellow like lemonade, not dark like tea or beer.

Social issues can be a factor in healthy eating. If you become depressed, or you always eat in solitude, you may not feel like making the effort, for example. If you have limited mobility, or a limited income, you may find yourself unable to buy the food you want and need. Assistance may be available to you through the SNAP program or a local food pantry.

The Greater Pittsburgh Community Food Bank is a great resource that can help: call (412) 460-3663 or go to the web site, www.pittsburghfoodbank.org.

Medications, dental problems, swallowing difficulties and fatigue can interfere with healthy eating and can lead to weight loss or malnutrition. If you are experiencing these things, tell a family member or your PCP and get the help you need to resolve the problem.





How to Read a Food Label

Knowing how to read and interpret the information on a food label can be quite helpful in making healthy eating choices. If you need to monitor your calories, salt, fat intake or simply make sure you're getting enough fiber or other nutrients, the information you need is right there on the label.

At the top of the label, you will see "Serving Size" – this tells you the amount of food that contains the listed nutrients – plus the number of servings. This can be a surprise – you think that bottle of juice is a single serving, but the label may indicate otherwise.

Next, the nutrients are listed along with their Percent Daily Value, based on the recommended daily allowance per serving. Calories, fat, saturated fat, cholesterol, sodium, fiber, protein and carbohydrates are usually listed.

Up Your Fiber to Avoid Constipation

Constipation can be uncomfortable, but it is generally avoidable with a little attention to diet and hydration. Ideally, adults should have a daily bowel movement; at least three per week is still considered normal. The average American gets 15 grams of fiber every day, but we should aim for at least 25 grams. Also, water intake matters, and the recommended 8 glasses per day may need to be increased if you are experiencing bouts of constipation.

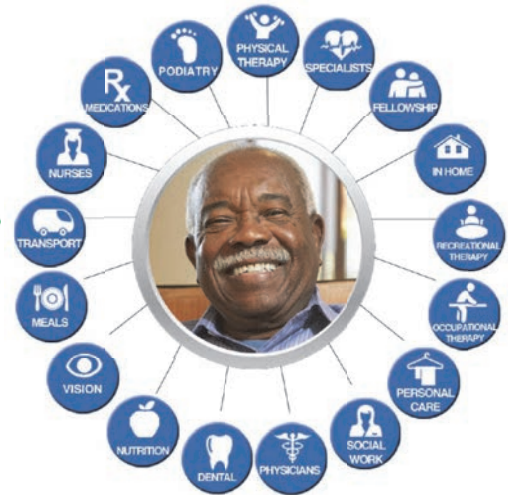
Here are ten foods that help keep things "moving" along:

- | | |
|---|---------|
| Dried plums | Oranges |
| Kiwis | Oatmeal |
| Plain popcorn | Spinach |
| Ground flaxseed | Beans |
| <i>(whole seeds cannot be digested)</i> | Coffee |

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Let us help.



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SENIOR GUIDE



Get by with
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Alzheimer's Support Services Are Available Across Our Network

Alzheimer's disease is life-changing for both those who are diagnosed and those close to them. Having a helping hand when you need it is key to keeping yourself, and your loved one living with dementia, healthy and happy. When you need a little help or an ear to listen, support services are available.

Support groups

Often times, caregivers say they are looking for support from people who "really understand because they've been there." An Alzheimer's Support Group offers just that – a place for caregivers, family and friends of persons with dementia to meet and develop a support system.

Support groups offer a place to:

- Exchange information on caregiving problems and solutions
- Talk through challenges and ways of coping

- Share feelings, needs and concerns

Presbyterian SeniorCare Network, in affiliation with the Alzheimer's Association, holds support group meetings in various locations:

- **OAKMONT AREA:** 4th Tuesday of every month from 3 p.m. to 4:30 p.m. at Woodside Place of Oakmont (1215 Hulton Road, Oakmont, PA 15139)
- **WASHINGTON AREA:** 2nd Wednesday of every month from 10:30 a.m. to 11:30 a.m. at the Hillview Chapel at the Presbyterian SeniorCare Network Washington campus (835 South Main Street, Washington, PA 15301)

We hope you'll join us!



To learn more about the living and care options at **Presbyterian SeniorCare Network**, visit www.SrCare.org.

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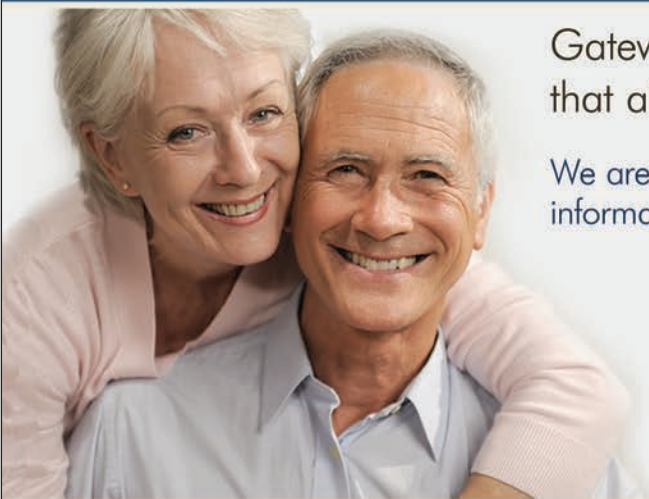
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In order to choose a health professional who is right for you, you need information. The following guide is a good place to start.



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