

An Anthology of
Timely Tidbits and Fascinating Factoids for
Savvy Jersey Seniors



Advice, Humor, and Miscellaneous Words of "Wisdom"
For & About Seniors

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Welcome to our 10th issue!

Welcome to the 10th issue of *Savvy Jersey Seniors* (SJS). In this edition, we take a look at everything from sleeplessness to death from falls to laughter as a stress reliever. Plus, we get a first-hand report from contributor Daryl Albury on what it's like to face COVID-19 head on!

And, as we've noted before, if you have ideas for topics that you'd like to see us tackle, just drop us a note at savvyjerseyseniors@gmail.com. Ditto if you'd like us to take a deeper dive into a subject that we have mentioned previously or in passing, such as yoga, dementia, or estate planning.

SJS Poll: Ageism

We're always interested in what our friends and neighbors across the region are thinking. So, as you know if you're a regular *SJS* reader, we've recruited 100 seniors who respond to a question or two for every issue (and who will remain totally anonymous).



This time, we're asking the members of our Anonymous 100 about their experience with ageism. So, if you feel that you have been discriminated against because of your age, let us know and we'll try to include your experience in our next report.

Sleeplessness troubles many older adults

More than a third of older adults in the United States are taking pills to help them sleep, according to new research. The study, which spoke to more than 1,000 people aged 65 to 80, found that 14 percent regularly took prescription sleep medication, prescription pain medication and over-the-counter sleep aid or herbal supplements—and 23 percent did so occasionally.



Nearly half said they had trouble falling asleep at least one night a week, while 15 percent reported problems three or more nights a week.

Dr Preeti Malani of Michigan University, who led the new survey, said many elderly people were not seeking advice from doctors partly because they wrongly thought sleeplessness was a natural part of the ageing process. She stressed that taking some kind of pill was not a long-term solution and could be dangerous.

Adverse drug events on the rise among older adults

Every day in the U.S., 750 older adults, age 65 and over, are hospitalized for an adverse drug event (ADE) due to side effects from medications. Each additional prescription drug increases one's chance of an ADE and older adults are taking more medications than ever. More than 40 percent of older adults are taking five or more medications—the threshold that many health professionals believe puts patients at high risk for ADEs—triple the rate in the mid-1990s. You can take preventive action to reduce the risk of harm. Before adding another medication to your or a family member's regimen, ask your health care provider the following questions to better understand the potential risks and benefits of the medication:

- What is this medication for?
- How many patients like me are helped by this medication?
- When should I stop taking this medication? How will we know when it's working?
- Can I start on a lower dose and see if that works?
- Are there side effects I should watch out for if I take this medication?

Remember to never stop or adjust your medications without first discussing it with your doctor.

Sit less...build strength and balance

One in four people age 65 and older fall each year. And one in five of those falls causes serious harm such as broken bones or a head injury.



Research shows that exercise focused on building strength and balance can reduce your risk. Simply reminding yourself to sit less can be a boon. A study conducted among older Kaiser Permanente Washington members with obesity found that wrist-worn alarms worked well to inspire people to take breaks from sitting several times a day.

So, you might try setting an hourly timer on your kitchen stove or mobile phone to see if an alert could work for you. When the alarm rings, take a few minutes to walk around inside or outside your home—building strength, balance, and stamina.

Deaths caused by falls have more than doubled in 20 years

Speaking of falls, two decades ago, about 57% of U.S. seniors took medications that increased their risk of falls. By 2017, that number had risen to 94%, and deaths caused by falls had more than doubled, a new study found.



Drugs that can increase the risk of falls include antidepressants, some high blood pressure and anti-seizure medicines, antipsychotics, opioids, sedative hypnotics and tranquilizers.

Over an 18-year period, older adults filled more than 7.8 billion prescriptions for drugs that can increase the risk of falls, the findings showed. Most were high blood pressure medicines.

Prescriptions for antidepressants also rose sharply, from 12 million in 1999 to more than 52 million in 2017. Since 1999, falls more than doubled from 29.4 per 100,000 to 63.3 per 100,000, the investigators found.

Stress relief from laughter

A good sense of humor can't cure all ailments, but data is mounting about the positive things laughter can do.

A good laugh has great short-term effects. When you start to laugh, it doesn't just lighten your load mentally, it actually induces physical changes in your body.



Laughter can:

- Stimulate many organs—Laughter enhances your intake of oxygen-rich air, stimulates your heart, lungs and muscles, and increases the endorphins that are released by your brain.
- Activate and relieve your stress response—A rollicking laugh fires up and then cools down your stress response, and it can increase and then decrease your heart rate and blood pressure.
- Soothe tension—Laughter can also stimulate circulation and aid muscle relaxation, both of which can help reduce some of the physical symptoms of stress.

Biological aging versus chronological aging

"Aging is a lifelong process. It doesn't suddenly begin at the age of 60," said Maxwell Elliott, a doctoral student at Duke University in Durham, N.C.



**Chronological
Age**



**Biological
Age**

Anyone who has ever known a spry, sharp-as-a-tack 80-year-old—or a 50-year-old burdened with health problems and disabilities—knows that chronological age does not tell the whole story.

The concept of biological aging -- or the speed at which body systems decline over time -- acknowledges that. But it's not clear exactly when people begin to diverge in their rate of biological aging, Elliott said.

In a recent study, it turned out that people varied widely in biological aging: The slowest ager gained only 0.4 "biological years" for each chronological year in age; in contrast, the fastest-aging participant gained nearly 2.5 biological years for every chronological year.

Benefits of a Mediterranean Diet

A recent study focused on the healthy "Mediterranean" diet, a regimen reliant on olive oil, beans, nuts, fruits, vegetables and whole grains, with chicken and fish largely replacing red meat. Dairy products and eggs are only used in "low to moderate amounts," according to the American Heart Association.

Nutritionists have long touted the benefits of the diet on various facets of health, including cardiovascular health. But a team of researchers in Scotland wanted to see whether Mediterranean fare might help the brain work better with age, too.



The team tested the mental ("cognitive") ability of over 500 people averaging 79 years of age, none of whom showed any signs of dementia. The tests focused on problem solving, thinking speed, memory and word knowledge, and the researchers also obtained MRI brain scans of over 350 of the participants.

In their initial test, people who adhered more closely to the Mediterranean diet tended to score better. While the study couldn't prove cause and effect, the diet was positively associated with improved performance in specific brain functions, such as memory, verbal ability and visual spatial ability (people's ability to analyze and mentally alter objects).



Exercise affects brain health

It's not just your legs and heart that get a workout when you walk briskly; exercise affects your brain as well. A new study by researchers at University of Texas Southwestern shows that when older adults with mild memory loss followed an exercise program for a year, the blood flow to their brains increased.

"This is part of a growing body of evidence linking exercise with brain health," says Rong Zhang, Ph.D. "We've shown for the first time in a

randomized trial in these older adults that exercise gets more blood flowing to your brain."

As many as one-fifth of people age 65 and older have some level of mild cognitive impairment (MCI) -- slight changes to the brain that affect memory, decision-making, or reasoning skills. In many cases, MCI progresses to dementia, including Alzheimer's disease.

Six Brainy Bits

And, while we're on the subject of brain health, you may find the following facts about brain health pretty interesting. They are taken from research used in Boost Your Brain & Memory, a program developed by Mather Institute:



- Time to go back to school—Researchers believe the most efficient way to build more connections between brain cells is to learn something new.
- 1, 2, 3 relax—Stress is bad for the brain and the body. Learn to counter it by activating your relaxation state. For example, you can sit quietly and focus on slowing your breathing.
- Walking the walk—Cardio exercise such as brisk walking has been linked to growth in the area of the brain associated with creating new memories.
- Oooohhmmmm—Meditation increases gray matter in areas of the brain associated with short- and long-term memory and complex cognitive processes.
- Get a move on—Regular physical activity can prevent or delay signs of dementia. People who have

a genetic predisposition to Alzheimer's Disease may be helped most by physical exercise.

- To err is human—Forgiveness is good for the brain. Letting go of grudges and anger can reduce stress and depression, and increase feelings of well-being.

Practicing gratitude

And, on the subject of optimism versus negativism, practicing gratitude can decrease stress, increase optimism, and improve your well-being. This is because negative thoughts can be very draining.

So, changing your outlook and focusing on the positives in your life can help pave your path to healing. Here are a couple of gratitude exercises to incorporate into your daily routine:



- Recognize something positive about yourself and give yourself praise. Too often, people put themselves down for past mistakes.
- Forgive yourself and recognize all of the good you have in your life now.

Just as people get in the habit of noticing their own faults, it's common for individuals to be quick to complain about the people close to them, too. Take a moment to consider the things you appreciate about individuals in your life. Express gratitude to a friend, partner, or child. Choose something you specifically enjoy about the person and share that with them.

Eight tips to make online dating easier

Returning to one of the topics that our readers have told us they find most interesting, here are some tips on making online dating easier for seniors. Erika Ettin is the founder of A Little Nudge, where she helps others navigate the often-intimidating world of online dating.

We all know...or think we know...that dating can be difficult, particularly when you are widowed, divorced or retired. But, Ettin says it doesn't have to be as hard as you might think.

Senior Dating and Online Senior Dating

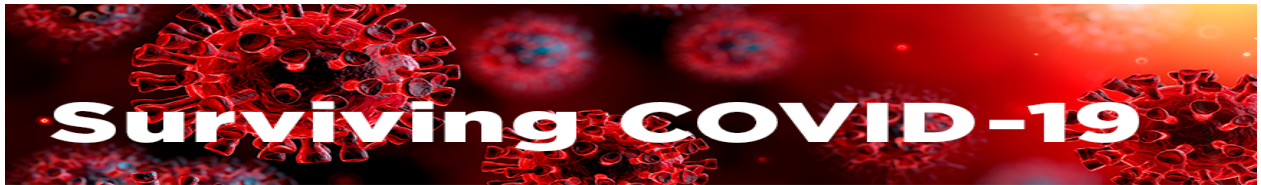
Senior Dating - The Joy Of Dating
In Your Senior Years



She offers a few pointers that may make dating easier.

- Focus on today, not tomorrow—Concentrate on the person in front of you. Enjoy the date you have before you worry about who else may be on your list.
- Show up for your dates—Many of Ettin's clients are either stood up or have been canceled on within an hour of the date. Always call to let the person know if you're going to be late. Be an adult and keep your plans.
- Be present, even if it's not a match—Sometimes you walk into a restaurant or bar and just know it's not a match, and then you turn off, like a light switch. As tough as it is, try to remain present for the remainder of the date. Despite your first impressions, you never know what might come out of it.
- Stop ghosting people—if you don't like someone after a couple dates, own up to it and tell the person you're not feeling a spark versus letting him or her wonder why you haven't returned a text. End things tactfully and maturely.
- Be yourself—Don't gloss over your real personality on the first date. Someone is going to have to get to know it eventually, so it might as well be sooner than later.
- Try using only two online dating sites—Just like when you have too many cooks in the kitchen, you might have too many online dating profiles up and running. When you spread yourself too thin, you rarely do anything well. Try sticking with two sites and focusing on using them both to their fullest.
- Don't make the date all about you—Ask questions of the other person. Try to find out their interests, personality type and background.

- Remember everyone has flaws—With age and experience, most people have come to accept this, but you may need to remind yourself of it. It's just a decision of which ones you can live with and which ones you can't. Always try to find the positive in people.



COVID-19 can't happen to me. Or can it? A first-hand report from a survivor...

Here's a first-hand report from SJS contributor and Cherry Hill, NJ resident Daryl Albury on what it's like to take on COVID-19.

Most of us think, "this can't happen to me," either because we don't believe in the rules, or because we follow them carefully. I thought I was following the rules. In fact, had I known my granddaughter had been exposed to Covid 19, I would not have met her for lunch, let alone shared her fries. BUT, neither she nor I were informed of her exposure by a "trusted" adult within our quarantine group.

Fortunately for me, my son-in-law is a doctor at Temple Hospital, internationally known for its Lung Center. He recognized my symptoms and immediately took me to Temple's emergency room where I was expediently diagnosed and treated. I had x-rays, CT scans, needles of steroids, antibiotics, and vitamins along with whatever else they had to get me well.

I rehabbed for days, struggled to walk up the stairs, and was readmitted to the hospital for a treatment of Remdesivir and more drugs. Finally, I moved in with my daughter who nursed me back to health for another three weeks (we were all counting the days until my recovery). All of this led to a need for cardiac treatment and hastened an aortic heart valve replacement.

What would I have done differently, had I known all this would happen to me? I would have been much more careful about seeing my granddaughter after her out-of-state visit. I would not have gone to a restaurant. I would not have shared her food. I would have taken quarantining more seriously. (My daughter, who has been super cautious about masking, social distancing, etc., did not catch Covid from either of us.)

I am grateful to be alive and have learned that it doesn't really matter how seriously we take Covid. It's about how carefully we treat it. It's not about living in fear; it's about not living with regret.

The people who help make SJS happen

We readily admit that we don't have a real "staff," but our contributors now include (in alphabetical order) Daryl Albury, Karen Berg, Lou Ciavolella, Courtney Colletti, "Mark from Moorestown," Barry Sparks, and Phyllis Weber.

Contact us!

If you have story ideas, comment, kudos, or criticisms, you can reach us at savvyjerseyseniors.com.

