

An Anthology of
Timely Tidbits, Personal Stories, and Fascinating Factoids for

Savvy Jersey Seniors



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

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Welcome!

In this latest edition of *Savvy Jersey Seniors* for July and August of 2024 we present a follow-up report from our nationally-ranked pickle ball correspondent on the physical perils of hersport and how to play through the pain.

(Note the cast on author Mary Ann Oster's left wrist and forearm!)

And we also have another first-person account—of what's it's like to spend several hours every day during the hottest summer in recent memory creating and maintaining an urban box garden for an inner-city charity:

Plus, of course, we have our usual potpourri of information that we feel might make a difference to our senior friends across South Jersey, including some notes on:

- Medicare changes for 2025,
- Early signs of Alzheimer's and dementia,
- Red flags for romance scams,
- Benefits of joining a grief group, and
- Stair climbing as a great form of exercise.



By the way, please don't forget that we always welcome your ideas for any topic that you'd like to see us tackle. As we've noted previously, we're especially interested in the avocations and hobbies of our readers.

In that vein, remember that we especially want to hear about the volunteer efforts that seniors across South Jersey are making on behalf of the literally thousands of non-profit organizations that serve our region. Just drop us a note at savvyjerseyseniors.com.

Red Flags for Romance Scams

Lots of people meet friends and potential love interests online through dating sites, social media, or mobile apps. It can be a great way to meet people, but recognize that not everyone is who they say they are online.

Beware the romance scam. It's a red flag if the person:

- Wants to leave the dating site immediately and use personal email or instant messaging to communicate.
- Professes love too quickly.
- Claims to be from the U.S., but is traveling or working overseas.
- Plans to visit, but cancels at the last minute because of a traumatic event or a business deal gone sour.
- Asks for money for a variety of reasons (travel, medical emergencies, losses from a financial setback).



If you spot any of these red flags, experts advise that you cut off contact right away. Don't send money by mail, wire transfer, peer-to-peer payment (such as Venmo or CashApp), or put money on a gift card for someone with whom you have only an online relationship.

Contact the AARP Fraud Watch Network Helpline if you have questions or think you or a loved one has become a victim. The Helpline can be reached at 1-877-908-3360.



Volunteering: One Thing Led to Another...and Suddenly She Was an Urban Farmer

How does a retired teacher and social worker Joanne Rafferty go from tutoring a high school student in Camden to worrying about "squash borers," plant mildew, and when and how much to water eggplants, sweet potatoes, tomatoes, and strawberries.

"My volunteer work tutoring at Urban Promise in Camden was about to end with summer approaching, so I asked the agency volunteer coordinator if they needed help with any gardening projects.

"They did indeed! I was shown a spacious stone terrace beside their Peace House on Federal Street filled with thirteen raised beds and eight smaller framed beds. In May a faculty member had taken on planting vegetable seeds in some of the beds, but she had summer work with another Urban Promise program and could not do more.

"It was a daunting sight, the garden area quite overgrown with weeds and an invasive morning glory vine that literally covered everything. While I love gardening, my previous efforts had been cultivating home perennial flower gardens, and I knew little about growing vegetables, but I was excited about the prospect of providing fresh produce for a Camden food program, so I said I'd do it and dug in.

"Fortunately, I had a willing partner in this project and since that day in mid-May when I signed on, together we have spent a several hours each day working in the garden, and in spite of our lack of experience and a few setbacks, we have been able to create a beautiful and productive garden along a busy, urban street.

"Initially, almost every day began with a trip to Home Depot to buy seeds, plants, and many, many bags of mulch. Every day has included weeding and watering. While I worked on planting, cultivating and weeding the beds, my gardening partner took on the area around the beds. We cleared the fence surrounding the garden of vines, and mowed, spread weed killer, and weed-wacked the grass and weeds on the terrace.



"We used bricks we found in the space to edge the flower gardens and decorative planting, planted a pear and crab apple tree, rose bushes, and azaleas along the street-facing fence, painted the existing (but blank) 8' x 4' signboard, and bought a vinyl "Urban Promise Gardens" sign to hang there.

"We planted rose bushes under the sign and zinnias and vincas in some of the smaller

beds to bring some color into the garden.

"Growing vegetables has been a learning experience. For weeks we watched one of the beds fill with a leafy green "holdover" plant that was clearly thriving, but we could not identify what it was. Finally, we took a sample to a local garden center, and they identified it as a weed.

"Squash borers invaded and had a feast on our summer squash, zucchini, cucumbers and pumpkin plants. We buried the damaged stalks to save some of the plants and planted new seeds where we could. Powdery mildew was another setback. But these plants are now displaying new growth that we expect will bring a later harvest.

"There have been successes, too. We have brought cucumbers, green beans, zucchini, spaghetti squash, eggplant, peppers and cherry tomatoes to Cathedral Kitchen, a food program in Camden that was delighted to accept our produce. And we look forward to bigger harvests of these vegetables in the coming weeks, including watermelon, sweet potatoes, and pumpkins.



"The community around us has noticed our efforts. We've had help watering and weeding from

Dion, a homeless woman, and neighbors and passersby have stopped to tell us how good the garden looks.

"It's been a challenging project, but the rewards are spectacular, including watching our garden grow, beautifying the neighborhood, and producing healthy food that goes to Cathedral Kitchen, which feeds hundreds of Camden's less advantaged every day.

"It keeps us coming back...and we're already thinking about next year."

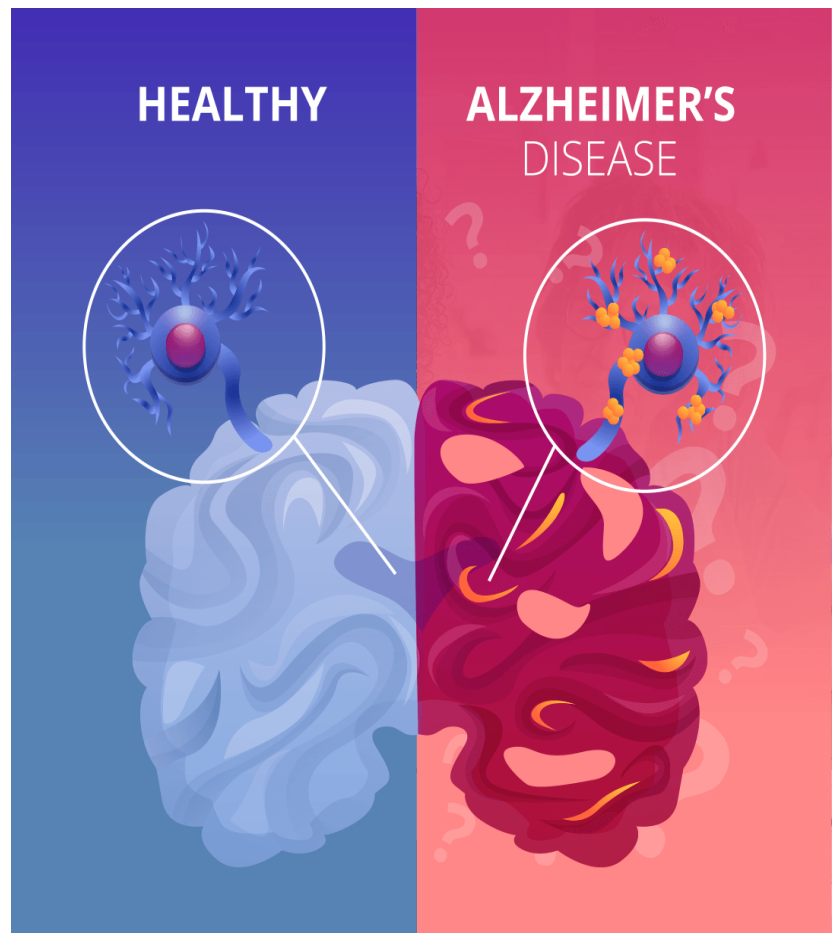
Early Signs of Alzheimer's and Dementia

As Dr. Cherilyn Cecchini noted in her recent article on Alzheimer's and dementia for GoodRx, there are many different types of dementia, but they all cause forgetfulness, trouble thinking clearly, and difficulty controlling emotions.

Alzheimer's disease is the most common type of dementia. Early signs of Alzheimer's dementia include new memory loss, moments of confusion, difficulty planning or problem solving, mood changes, and social withdrawal.

Obviously, understanding the differences between memory changes that are common as you age and the early signs of Alzheimer's may be helpful to know if you are worried that you or a loved one may have dementia.

It is easy to forget where you put your keys or if you locked the front door, no matter what age you are.



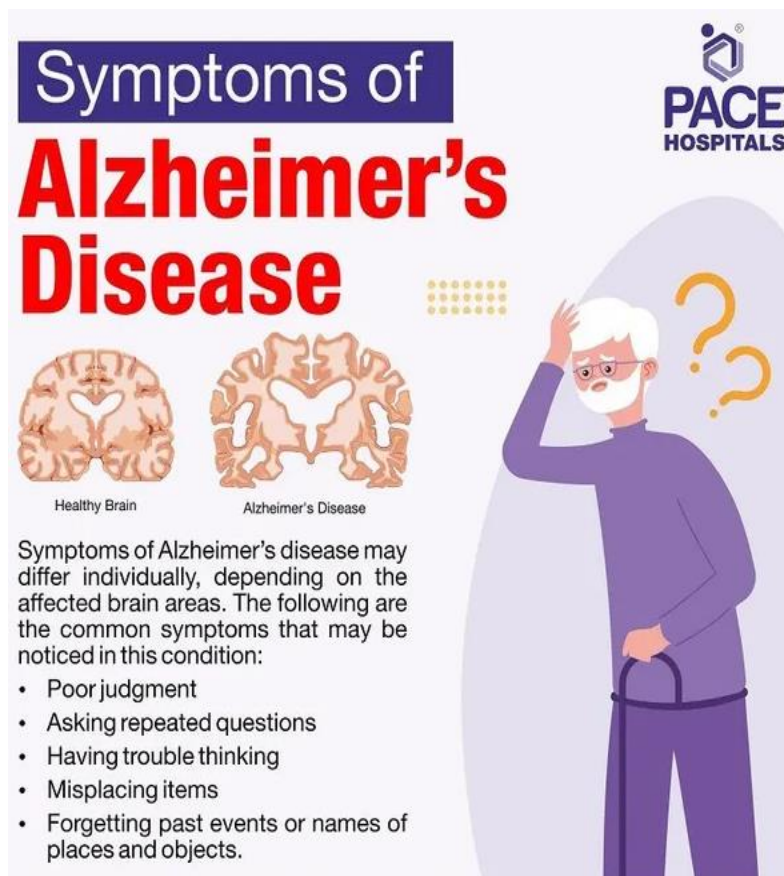
As you get older, some changes in your memory, attention, and thinking patterns are normal. But many people worry that their forgetfulness could be the first sign of Alzheimer's. It can be hard to know the difference between normal, age-related memory changes and dementia.

As people get older, they're likely to notice changes in the way their brain works—especially what they are able to remember. The symptoms that occur in the early stages of dementia are similar to normal, age-related changes but with a few differences. These differences can help you know if you should be concerned about Alzheimer's or dementia.

Here are Dr. Cecchini's ten early signs of Alzheimer's and other types of dementia.

1. Memory loss: People with dementia will often immediately forget a conversation they just had or the details of an event that just happened. This looks different from being forgetful or absent-minded, which is normal when performing tasks that are automatic or require little brain

power. For example, it's easy for someone to forget where they put their car keys when they've been unloading groceries, since they're more focused on the groceries. It is very different when someone has a full conversation and then seconds later has no recollection of it.



2. Challenges with planning or focusing: A person with dementia may become easily confused when trying to make plans. They may also struggle to perform or stay focused on certain tasks. For example, it could be a warning sign if someone has difficulty managing bills or balancing a checkbook.

3. Difficulty doing familiar things at home or at work: Tasks that were once performed automatically may seem challenging. For example, someone with dementia may forget how to drive to a place that they drive to every day. Or they may no longer understand the rules to a game that they've played many times.

4. Not knowing where you are: People with dementia may forget where they are or how they got there.

5. Confusion about time: Dementia can also cause a person to not understand how much time has gone by or what year or season it is.

6. New problems with writing or speaking: This can show up in many different ways. Someone with dementia may forget the names of common items. Or you may notice they have a tendency to stop mid-sentence or repeat themselves when speaking. These pauses and word-finding difficulties can also interrupt their writing.

7. Misplacing things: We all lose or misplace things from time to time. When someone has dementia, they lose things more frequently and also struggle with retracing their steps to help locate what's missing.

8. Poor judgment: Someone with dementia may seem to be more disinhibited or lack judgment in a way that is not typical of their past behavior. For example, they may overspend or take financial risks when they otherwise wouldn't have.

9. Withdrawing: People with dementia tend to withdraw from social activities, sports, and other hobbies. This can also apply to work projects.

10. Changes in mood: Dementia may cause someone to become easily upset or unusually sad. People may experience frustration, confusion, or suspicion even when they're around friends.

These symptoms are more likely to be dementia-related if there are several happening consistently, and if they seem to be worsening or becoming more frequent, according to Dr. Cecchini. "If you are experiencing some of the above symptoms, it helps to consider your age and risk factors for Alzheimer's," she adds.

There is no single cause of dementia. Instead, there are many different factors that may contribute to developing it, including:

- **Age:** This is the best-known risk factor for Alzheimer's and other types of dementia. As age increases, the likelihood of developing dementia increases. Most people with Alzheimer's dementia are 65 or older.

- **Sex:** Women are more likely to develop Alzheimer's dementia than men. Researchers think this could be related to women living longer than men, but they're investigating other sex-related factors.

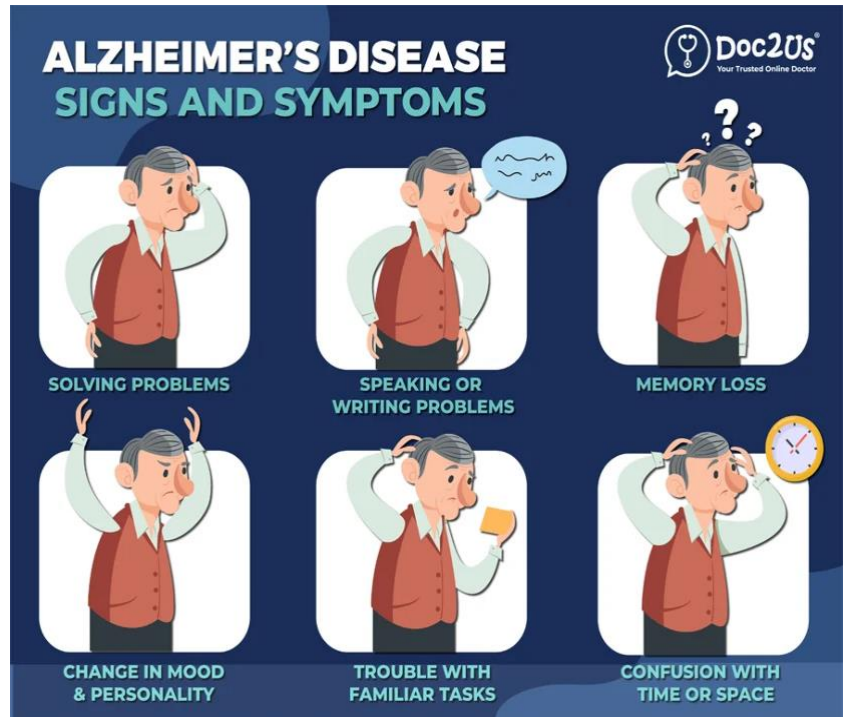
- **Family history:** If you have a parent or sibling with Alzheimer's dementia, you are more likely to develop it. Studies show that your existing risk increases by about 30 percent if you have a close relative with the condition. If more than one family member develops it, the risk is even greater.

- **Genetics:** Experts have identified some genes that increase the risk of Alzheimer's and some, though rare, that can directly cause the disease. Tests for these genes are available, but it is recommended that you speak to your provider and a genetic counselor before considering taking them.

- **History of head injury:** There is a link between moderate to severe head injuries and Alzheimer's dementia. Moderate head injuries are defined as those that cause loss of consciousness for more than 30 minutes. Severe head injuries cause loss of consciousness for more than 24 hours.

According to Dr. Cecchini, certain health conditions and behaviors are associated with the disease, as well. These include:

- **High blood pressure:** Having elevated blood pressure can affect the blood vessels in the brain, which can increase the risk of developing dementia.
- **High cholesterol:** Having elevated cholesterol levels also affects blood vessels in the brain, increasing the chances of developing dementia.
- **Type 2 diabetes:** While it's not fully understood why Type 2 diabetes increases dementia risk, there is a clear association between the two.
- **Depression:** Studies have shown that major depressive disorder, if diagnosed before the age of

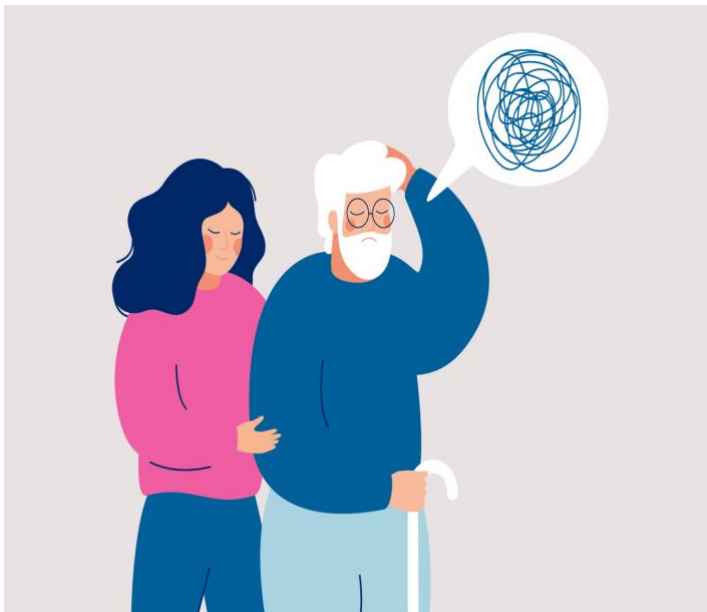


60, increases the risk of dementia. There may be an association with depression diagnosed at a later age, but more research is needed.

- *Smoking*: Smoking may increase the likelihood of developing Alzheimer's for a number of different reasons. One reason is that it increases the production of molecules known as free radicals, which can damage brain cells.

It can be difficult to tell the difference between normal, age-related cognitive changes and dementia, says Dr. Cecchini. But there are a few things to keep in mind.

"It can be helpful to consider if the change represents something new or unusual for someone. For instance, if a person has always had a difficult time planning a trip or balancing their checkbook, those habits getting worse with age wouldn't be considered a warning sign. But if they went from being good to forgetting how, this would be more concerning.



"Another thing to consider is the impact that the change has on day-to-day life. Someone occasionally forgetting to close the garage door or the name of a distant friend isn't too worrisome.

"But if a person continues to forget names, dates, or events that should be easy to remember, this could be a warning sign.

"This is especially true if it causes them to get lost frequently, be unable to complete tasks, need frequent reminders, or rely on notes or alarms in a way they never have before.

"If you think you or a loved one may have dementia, a good place to start is to talk to a provider. A provider can ask

questions and perform tests to help determine if anything else is going on. Blood tests and other studies are usually the first steps in ruling out the conditions that mimic dementia.

"The next step is cognitive testing, during which your provider or a brain specialist (neurologist) asks questions to check things like memory, awareness, and language skills.

"Depending on the results, your provider may order imaging tests of the brain. These can help them determine the next steps. Diagnosing dementia often takes time, both to rule out other conditions and to observe how the symptoms progress."

The Bottom Line: Dr. Cecchini reminds us that "the early signs of Alzheimer's dementia can easily be confused with the normal, age-related changes in memory that almost all of us experience.

"Thankfully, there are some clues that you can use to help tell the difference. And, if you aren't sure, talk to a provider. They can help you rule out other conditions and decide on the next steps for you or a loved one."



A Championship-Level Pickle Baller's Mantra: Don't Let a Little Thing Like a Broken Wrist Keep You Off the Court

As we reported in our last issue, pickle ball injuries are on the rise. Not surprising when you consider how the popularity of the sport has skyrocketed.

Bone fractures related to pickleball have increased 200 percent over the last 20 years, according to an analysis of a large government injury database presented at the annual meeting of the American Academy of Orthopaedic Surgeons.

After all, pickleball is the fastest growing sport in the US, with the number of players rising from 4.8 million in 2021 to 8.9 million in 2023, according to USA Pickleball. So, the overall rate of injuries may well be much higher than reported.

And it just so happens that one of *SJS*'s devoted readers and a previous pickle ball correspondent has offered us an insider's look at how a major injury can affect an avid pickle baller.

You may remember Mary Ann Oster's account of her trip to the national senior pickle ball championship in Pittsburgh in 2023. She recently broke her left wrist, but hasn't missed a beat...or any time on the court.

"I am an avid pickleball player, on the courts usually 3-4 times per week. About a month ago, I became a pickleball injury statistic. Reaching back for a lob, wearing my new Skechers shoes, my foot caught which caused me to suddenly lose my balance and back peddle out of control.

"I knew the fall was coming so I tried my best to land in the safest way possible, i.e. don't hit my head, which resulted in a broken left wrist.

"Not realizing it was broken (having not heard a crack or snap) I continued to play for a few hours and even went out to lunch! The next day the orthopedist confirmed it was a broken wrist and applied a pretty blue cast.

"So....it was my left wrist, not my right....can I still play?



"Pickleball is an important part of my life, and I was not relishing the thought of being sidelined. I decided to give it a try and after four weeks, two in a cast and so far two in a brace, I am happily playing—though still trying to be cautious.

"Pickleball offers the benefit of physical and social activity as well as satisfying your competitive spirit," says Mary Ann. "It truly is a sport for everyone!"



Five Possible Benefits of Joining a Grief Group

When we experience loss, it's hard for loved ones at times to know how to help us through our grief. Joining a support group to help navigate this challenging time in our lives can be as helpful as relying on family and friends to get us through.

Bereavement groups are available in many communities and usually free of charge.

Finding the right group can be a comforting ritual that allows us to understand the depth of our mourning and grieve in our own unique way.

Here are five potential benefits that joining a bereavement group can provide:

- *Know you are not alone:* Grief is a universal feeling we all go through, and it's important to understand that you are not alone in it. Sharing thoughts, feelings, and support with others who've experienced loss in a safe and comfortable environment may help ease the pain especially when it comes to facing milestones without your loved one.
- *Provide hope:* Often in these groups, people are at various stages in their healing journey. It's hopeful to engage with others who are further along their grief path and see how they are working their way toward happiness again. It offers a glimpse into our own future happiness down the road.
- *Access to wisdom:* Coming together with others in grief can be a resourceful brain collective. Those who have been through similar experiences to yours can offer their own unique insight, empathy, suggestions, and advice to help you get through this dark time. And gathering these tools and techniques to manage your daily life can provide a sense of control at a time when you may feel you have none.
- *Stepping outside yourself:* Being part of a group means you give as well as take. In taking advice, you may also impart advice that aids others. Sharing our own experiences and insight is a way to move outside our personal grief and help others heal. In doing so, we are supporting our own healing path.
- *Sense of belonging:* Isolating ourselves in grief can be a lonely place and hinder our moving toward acceptance and peace. Wanting to belong is another universal need. We all yearn to be part of something bigger than ourselves and to be accepted and validated. Meeting with others on a regular basis with the same goal offers us a sense of belonging that can provide hope and comfort.

Stair Climbing: A Great Form of Exercise...And It May Help You Live Longer

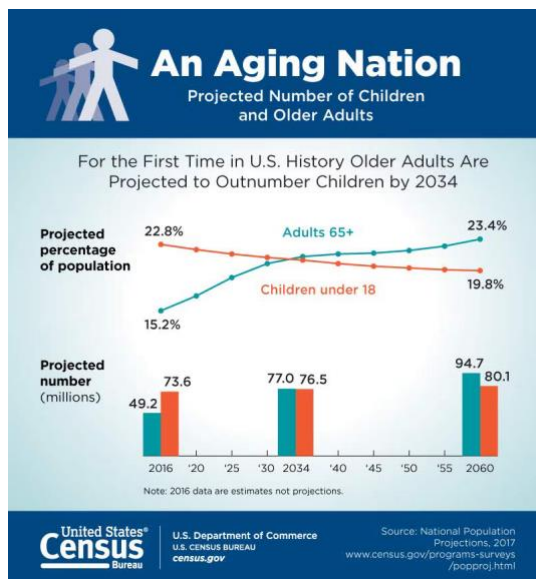
At a time when less than half of adults in the U.S. get the recommended amount of exercise, there is new evidence that climbing stairs can reduce the risk of heart disease and help people live longer.

A new meta-analysis presented at a European Society of Cardiology conference finds that people in the habit of climbing stairs had about a 39% percent lower likelihood of death from heart disease, compared to those who didn't climb stairs. They also had a lower risk of heart attacks and strokes.



"I was surprised that such a simple form of exercise can reduce all-cause mortality," says study author Dr. Sophie Paddock, of the University of East Anglia and Norfolk and Norwich University Hospital Foundation Trust in the UK. The moment you start climbing steps, your body responds. "Your heart rate goes up, your cardiac output goes up, and your circulatory status improves," explains Dr. Manish Parik, chief of cardiology at New York-Presbyterian Brooklyn Methodist Hospital. "And all of those we know have positive impacts."

So, how much stair climbing is enough? It's generally accepted that the typical flight is between 13 and 16 step, and one study found climbing 6 to 10 flights a day was linked to a reduced risk of premature death. And another study found climbing more than five flights a day lowered the risk of cardiovascular disease by 20 percent. Taking the stairs can also help build muscle. "Climbing stairs can be a wonderful mix of both aerobic exercise and resistance training," says Dr. Tamara Horwich, a cardiologist at UCLA who focuses on women's heart health. Note: If you're not in the habit of stair climbing, you may have to start slowly.



US Workforce Is Graying...Unprecedented Time for Most Workplaces

The graying of the U.S. workforce is gaining momentum. A Pew Research survey found nearly a fifth of Americans age 65 and older were employed in 2023, nearly double the three decades prior.

Employees 55 and older will constitute over a quarter of the global workforce by 2031, according to Bain & Co., so finding ways to capitalize on an increasingly intergenerational workforce is top of mind for Jason LaRue, national managing partner of talent and culture at KPMG.

"We're absolutely going to have to be able to attract workers across a wide set of generations, including people who have had longer careers already," LaRue tells *Fortune*.

"There's no magic about, 'I turned X age, and therefore I am capable or not capable of doing something else.'"

This marks an unprecedented time for most workplaces, where the presence of retirement-age workers used to be rare. However, given the current U.S. labor shortage, it could be a win-win for those older workers and their employers alike.

As the pool of older workers grows, so does the evidence that their presence on multigenerational teams can boost a company's bottom line, foster innovation, and help combat widespread burnout. In the war for talent, employers must implement novel ways to integrate and engage both longtime and new cohorts of experienced workers.

For both practical and professional reasons, adults are working longer. For some, the financial impact of caregiving and the need for a steady paycheck to support their longer, healthier life spans have made traditional retirement impossible.



Heads Up: Medicare Changes for 2025

In 2024, generally speaking, once your out-of-pocket spending on prescriptions tops about \$3,300, you qualify for Medicare's "catastrophic coverage" and pay nothing for your covered Part D drugs for the rest of the year. (In 2023, once you hit catastrophic coverage, you still owed percent of your drug costs.)

But come 2025, people with Part D plans won't have to pay more than \$2,000 in out-of-pocket costs, thanks to a provision in the Inflation Reduction Act of 2022.

This new rule applies only to medications covered by your Part D plan, though, and does not apply to out-of-pocket spending on Medicare Part B drugs. Part B drugs are typically vaccinations, injections a doctor administers, and outpatient prescription drugs.

The \$2,000 cap will be indexed to the growth in per capita Part D costs, so it may well rise each year after 2025. The \$2,000 cap will likely save money for some Medicare beneficiaries, particularly ones taking expensive brand-name drugs. But it's quite possible the cap will have deleterious effects on people who have or who are looking for Part D plans too.

Increase in STIs Among Seniors

Data from the U.S. Centers for Disease Control and Prevention (CDC) indicate that rates of sexually transmitted infections (e.g., chlamydia, gonorrhea, and syphilis) among US adults aged 55 and older have more than doubled over the past 10 years.

For example, rates of gonorrhea among those aged 55 to 64 years rose from around 15 cases per 100,000 people in 2015 to 57 per 100,000 in 2019.



Rising divorce rates, forgoing condoms as there is no risk of pregnancy, the availability of drugs for sexual dysfunction, the large number of older adults living together in retirement communities, and the increased use of dating apps are likely to have contributed to the growing incidence of STIs in the over 50s.

"These data likely underestimate the true extent of the problem, as limited access to sexual health services for the over 50s, and trying to avoid the stigma and embarrassment both on the part of older people and health care professionals, is leading to this age group not seeking help for STIs," says Dr. Justyna Kowalska, professor of medicine at the University of Warsaw.

Compounding the problem are the many misconceptions around sexuality and sexual activity in older adults, and the importance of sex and intimacy to older people's happiness and well-being. As Prof. Kowalska explains, "People do not become asexual with age. In fact, with preventive medicine and improved lifestyles people are enjoying a healthy life and sex life for longer."

Prof. Kowalska says, "These findings indicate that sexual risk-taking is common among older adults, particularly men. Given that the number of people aged 60 years and older is set to double worldwide by 2050 and the widespread availability of drugs to enhance sexual activity, health professionals must be proactive in discussing sexual concerns and making sexual health a routine part of general health care for older adults."

Seniors Embrace Urgent Care Centers

When today's older adults were growing up, urgent care centers and clinics inside retail stores didn't exist. But most of them have now embraced these non-traditional sites for getting medical care, a new national poll finds.

In the past two years, 60 percent of people age 50 to 80 have visited an urgent care clinic, or a clinic based in a retail store, workplace or vehicle, according to new findings from the University of Michigan National Poll on Healthy Aging.

Urgent care clinics were the most common alternative source of care, with 47 percent of adults age 50-80 visiting one at least once, and 23 percent going more than once, in the past two years.



Many of those who went to any alternative site said they did so to avoid going to the emergency room (44 percent) or to get a vaccine, a test or an exam (35 percent).

They went for a variety of health reasons, including getting immediate attention for symptoms and injuries, getting vaccinated, and receiving tests or treatments for COVID-19 infections.

And 75 percent of those who have gone to such a site recently say they're likely to go again in the next two years.

But even as they sought care at these sites, most older adults who also have a primary care provider preferred the quality of care and sense of connection at their regular clinic. Among those who say they're not likely to go to an alternative site for care in the future, 74 percent said it's because they prefer to go to their regular provider.



Health Costs Weigh Heavily on Older Americans

From medical and dental care to medications, insurance and nursing homes, health-related costs weigh heavily on the minds of older Americans of all backgrounds, a new poll suggests.

Asked to rate their level of concern about 26 different health-related topics for people over 50 in their community, five of the six issues that the most people cited as very concerning involved health costs. The sixth—financial scams and fraud—also had to do with money.

Those same six topics rose to the top no matter what age group, gender,

race, ethnic group, region of the country, size of community, political ideology or income group older came from, according to new findings from the University of Michigan National Poll on Healthy Aging. Overall, 56 percent of people over 50 say they're very concerned about the cost of medical care for older adults in their community. An equal percentage say they're very concerned about the cost of home care, assisted living or long-term care, which the poll grouped together as one topic.

Nearly as many said they're very concerned about the cost of prescription medications (54%), about scams and fraud (53%) and about the cost of health insurance or Medicare (52%). Nearly half (45%) called the cost of dental care very concerning. Other topics rounding out the top 10 health issues that were rated very concerning by the highest proportion of older adults nationally included access to quality home care, assisted living or nursing home care (38%); overall health care quality (35%); inaccurate or misleading health information (34%); and access to affordable healthy foods (33%).

Should You Consider Participating in a "Clinical Trial"?

Have you considered participating in a clinical trial? Clinical trials are part of clinical research and at the heart of all medical advances. Clinical trials look at new ways to prevent, detect, or treat disease.

Treatments might be new drugs or new combinations of drugs, new surgical procedures or devices, or new ways to use existing treatments.



The goal of clinical trials is to determine if a new test or treatment works and is safe. Clinical trials can also look at other aspects of care, such as improving the quality of life for people with chronic illnesses.

People participate in clinical trials for a variety of reasons. Healthy volunteers say they participate to help others and to contribute to moving science forward. Participants with an illness or disease also participate to help others, but also to possibly receive the newest treatment and to have the additional care and attention from the clinical trial staff.

Clinical trials offer hope for many people and an opportunity to help researchers find better treatments for others in the future.



Can Too Much Tylenol Harm You?

You wouldn't knowingly exceed the recommended dosage for a pain reliever, right? But if you regularly reach for a common analgesic to treat any one of a number of ailments—whether it's arthritis or back pain, the flu or seasonal allergies—you might inadvertently be doing just that.

Acetaminophen (a.k.a. Tylenol) isn't merely a standalone remedy for, say, the occasional headache, back pain or muscle aches; it's also commonly included in medications that treat the above health woes and others. According to the U.S. Food & Drug Administration (FDA),

more than 600 drugs—both prescription and over the counter—contain acetaminophen to help curb pain and reduce fevers.

And while it's easy to assume that anything sold off the shelf at your local pharmacy lacks the power to do serious harm, the truth is "just because it's over the counter doesn't mean it's a safe medicine," says Mohammed Issa, M.D., assistant professor at Harvard Medical School.

"Too little or too much of anything can be dangerous—even an over-the-counter medicine like acetaminophen."

Does acetaminophen carry more risks than other pain relievers? In a word: no. Nonsteroidal anti-inflammatory drugs (NSAIDs) such as aspirin, ibuprofen (Advil, Motrin) and naproxen (Aleve, Naprosyn) carry risks. Namely, they can irritate the stomach and intestinal lining, and they can increase your risk for heart attacks and stroke, says George Le, M.D., assistant professor at Baylor College of Medicine in Houston. "But it takes a larger amount to overdose on these pain meds.



"Acetaminophen has a much wider focus on it because of the notion that it's the safest pain reliever out there," Issa explains.

"Because of that notion, patients are using it and [often] overusing and abusing it." Unlike NSAIDs, acetaminophen is processed through your liver. So—no surprise—if you take too much, your liver pays the price.

According to the National Institutes of Health, acetaminophen toxicity is the No. 1 cause of liver transplants in the U.S.

It's also responsible for 56,000 trips to the emergency room and 500 deaths per year in the U.S.; half of them due to unintentional overdoses.

The maximum dosage of acetaminophen for the average healthy adult is 4,000 milligrams (mg) per day. "But that's a general guideline," Issa says. In older people, the daily max may still be toxic to the liver.

"If you're taking it over a long period of time ... I would recommend less than that, maybe even 3,000 mg per day, especially if you have coexisting conditions that increase the risk of liver damage ,because you start accumulating toxic compounds in your body," Issa says. "The more there are of these toxic compounds, the more injury to the liver."

Symptoms of an acetaminophen overdose include nausea, vomiting, abdominal pain and, as it progresses, a yellowing of the eyes and skin.



Shortness of Breath: Lung Disease Is NOT Always The Culprit...It Can Be Caused By Some Medications

Shortness of breath isn't always the result of a lung disease like asthma, pneumonia, or emphysema. Sometimes, medications can cause it.

Although it's rare, a small list of medications can lead to symptoms like shortness of breath, coughing, and low oxygen levels.

Sometimes this happens because the medications trigger pre-existing conditions like asthma.

In other cases, medications can cause allergic reactions.

Rarely, medications can cause inflammation and scarring in the lung tissue. This condition is called drug-induced interstitial lung disease (DIILD).

Here are ten medications that can harm your lungs. If you're taking any of these medications and have an existing lung-related condition, talk to your prescriber about how to stay safe.

If it's possible, taking the lowest effective dose for the shortest amount of time may help.

1. Macrobid (nitrofurantoin)
2. Amiodarone
3. NSAIDs
4. Beta blockers
5. Methotrexate
6. Leflunomide
7. Bleomycin
8. Gemcitabine
9. Busulfan
10. Other chemotherapy medications



Several other chemotherapy medications are known to cause DIILD. These include epidermal growth factor receptor inhibitors (EGFR inhibitors) like gefitinib (Iressa), and erlotinib (Tarceva). Another class of chemotherapy drugs—mammalian target of rapamycin inhibitors (mTOR inhibitors)—can also damage the lungs. Examples include everolimus (Torisel), everolimus (Afinitor), and sirolimus (Rapamune, Fyarro).

Are these medications worth the risk? Just about every medication comes with some risk of side effects. But the benefits often outweigh the risks. Many medications that can cause DIILD and other lung problems are used to treat serious, sometimes life-threatening, illnesses.

Since most people don't experience the most severe side effects, it's often worth the risk to treat your health condition. The key is to watch for any side effects closely>

New Jersey Still Needs Election Day Poll Workers...Could You Use an Extra \$300?

We're still trying to get you to consider being a poll worker on Election Day.

To apply you must be a citizen of the US and a resident of New Jersey. In addition, you must be a registered voter in your county, at least 16 years of age, and not a candidate in the election in which you would serve as a poll worker.

The day is long...election workers start at 5 AM and finish between 8 and 9 PM. But the stipend is \$300, and mandatory training is provided. Workers are needed for the General Election on Tuesday, November 5. For more information, contact your County Board of Elections.



How Different Drugs Cause Heart Damage—Plus Signs to Look for

In a recent article for *GoodRx Health*, Sarah A. Samaan, MD suggests that many different drugs can lead to heart damage...each in different ways.

Dr. Samaan says that cocaine and methamphetamines are some of the riskiest drugs for your heart. They put you at risk for heart attacks, heart failure, and heart rhythm problems. And she adds that cannabis use can cause heart disease and strokes, too.

Signs of heart damage from drugs include chest pain, shortness of breath, a racing heart beat, and swelling in the legs. More than 1 in 10 people who are hospitalized with serious heart conditions have illicit drugs in their systems. And different types of drugs can affect your heart in different ways.

Dr. Samaan writes that some drugs—like cocaine—are more dangerous than others and can lead to heart attacks. But, she says, many people are not aware how substances like cannabis (marijuana) and alcohol can also lead to heart disease. If you or someone you know uses substances, it is helpful to know the signs of heart damage.

Cocaine: Cocaine and methamphetamines (meth) are some of the most dangerous drugs when it comes to your heart. This is because they have a direct effect on your heart and blood vessels. These drugs work by stimulating your sympathetic nervous system. That means they can:

- Raise your heart rate,
- Increase your blood pressure,
- Increase the risk for heart rhythm problems like atrial fibrillation, and
- Cause the arteries in your heart to go into spasm

It's also important to note that the arteries that feed your brain can also be damaged by cocaine and meth. As a result, you are more likely to suffer a stroke.

People who inject drugs (of any kind) into their veins are at higher risk for a condition called endocarditis. Endocarditis is the medical term for an infection inside the heart. This can lead to permanent heart damage. From the heart, the infection can also spread to the brain and other organs. Endocarditis happens because the needle or the injected substance is not sterile.



That means that bacteria can be injected along with the drug. The heart is a common place for the infection to settle. From there, it can grow and destroy the heart valves and other heart structures.

Opioids: Opioid overdoses are the leading cause of death for adults in the U.S. aged 25 through 64. At high doses, opioids might slow the heart rate and lower the blood pressure.

But the main way that they cause harm is by slowing or stopping your breathing. This means the heart, brain, and other organs will not get enough oxygen. This can lead to permanent heart or brain damage.

This is why naloxone (Narcan) can be lifesaving. It quickly reverses the effect of opioids, so someone starts breathing normally again. This can restore oxygen to the body and prevent serious complications or death. Dr. Samaan notes that it is also important to know that methadone can cause heart problems. Methadone is a lab-made opioid that can help people recover from opioid use disorder. But in high doses, it can cause heart rhythm problems.

These conditions are called ventricular tachycardia and ventricular fibrillation. When you combine methadone with medications like benzodiazepines and other drugs, it can raise the risk for these problems. That's why it's important to take methadone under medical supervision.

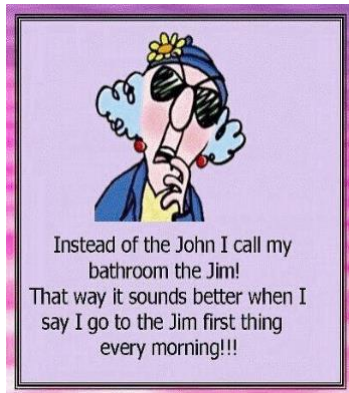
A recent study involving more than 400,000 U.S. adults found that using cannabis daily increased risk of heart attack and stroke by 25 percent and 42 percent, respectively. This increased risk was present even in people who had never smoked tobacco.

Alcohol: Even though it is legal across the country, alcohol is still a substance that can impact your health. Many people enjoy alcohol in moderation. Most people can enjoy one drink or fewer per day without any impact on the heart. But if you drink more than that, you may raise your risk for high blood pressure, atrial fibrillation, congestive heart failure, and high triglycerides.

"Fortunately," Dr. Samaan says, "the heart will often recover when you stop drinking alcohol." The bottom line is "if you are experiencing symptoms like chest pain, shortness of breath, or palpitations, check with a primary care provider.



"Don't be afraid to be honest about your situation. This is the best way for them to help you. And know that you are not alone. Most people with these conditions can recover," she advises.



The People Who Have Helped Make SJS Happen

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