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



Advice, Humor, and Miscellaneous Words of "Wisdom"

For & About Seniors

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Welcome!

In this latest edition of Savvy Jersey Seniors for March and April of 2025 we visit one of our favorite South Jersey volunteer leaders, attorney Joe Murphy, and learn about one of his many volunteer interests, the historic Indian King Tavern in Haddonfield.

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

- "Superfoods,"
- Medications that you should take on an empty stomach...and why,
- Mistakes we may be making at the supermarket, and
- Early warning signs of a ministroke.



Indian King Tavern, Haddonfield, NJ

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—friends and neighbors like Joe Murphy. Just drop us a note at *savvyjerseyseniors.com*.

Indian King Tavern: Volunteering to Help Promote



an Historic Site

Some of our regular SJS readers may know Joe Murphy as the driving force behind "Dance Haddonfield." Those of you who are attorneys may know him as an internationally-recognized expert on corporate ethics and compliance. And still others may know him for his long-time and generous presence as a member of the board of the Haddonfield Outdoor Sculpture Trust. But perhaps less well known is Joe's behindthe-scenes presence as a supporter of the Indian King Tavern in Haddonfield. We asked Joe to share that part of his story and here's what he told us.

"Who knew that little Haddonfield, a Quaker village (founded 1713), was once the capital of New Jersey? That Redcoats and Colonials battled on our historic Kings Highway. That New Jersey picked the Indian King Tavern to be the first historic building it would purchase to preserve. Joe Murphy

"This is what you learn when you volunteer to promote a historic site. Originally when I signed up to help I was not yet a "senior." But my love for this quaint town and this historic building accompanied me into my senior years.

"The Indian King is not a rebuilt version of history, but the actual building where history happened. You enter and immediately are back living history from hundreds of years ago.

"I am not sure I ever 'decided' to help the Indian King. I walked in to visit and was captured on the spot. This historic site grabs your imagination, and you just want to keep that connection. So much so that I bought colonial attire (with a tri-cornered hat) so I could be

part of that history.





"In 1777, in the revolution that local Quakers described as "the commotion," it housed the New Jersey legislature when it voted that we would cease being a colony and become a state.

"Haddonfield was also where a young Lafayette led revolutionaries as they went off to defeat Hessian troops and earn Lafayette a leading role with General Washington.

"When you step into the Indian King you step back into life in those times. The group I founded, the Friends of the Indian King Tavern Museum, partners with Michelle Hughes, the brilliant historian who runs the Museum.

"We supply items that enhance the historical story

and volunteers who dress the way people dressed in those times.

"Every June, on the first Saturday, we remember the time the British evacuated Philadelphia and marched down our Kings Highway on the way back to New York. Of course, we could not leave them unscathed (Washington had instructed us to 'annoy' them), so there was an actual skirmish on our main street.

"Now the Friends of the Indian King stage a town-wide event to commemorate this historic clash, with Red-Coated British firing their muskets and valiant colonial soldiers rushing out of the Indian King to fight the King's troops.

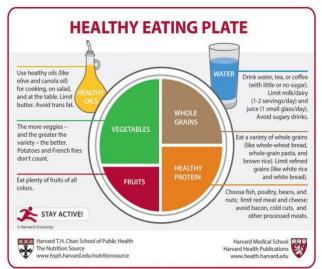
"Our little, historic village offers a step back into time for us seniors and all the young folks as well," adds Murphy.

So mark Saturday, June 6th on your calendar and stop by to watch *The Skirmish* and thank the man behind the scenes.

Ten "Superfoods" That We Should Know About Are there really "superfoods" that we all should know about? And eat?

Let's take a look at the ten candidates suggested for superfood status by the folks at Harvard Medical School.

- 1. Tomatoes: Rich in lycopene, a powerful antioxidant associated with a reduced risk of heart disease and certain cancers. Lycopene is more easily absorbed by the body after cooking.
- 2. Raspberries: Rich in antioxidants, including vitamin C and manganese. They are also a good source of dietary fiber, which helps digestive health.
- 3. Chickpeas: Belonging to the legume family, it is a good source of plant-based protein, fiber and various minerals (such as iron and magnesium). Helps control blood sugar and lower cholesterol.
- 4. Kale: Dark green leafy vegetable, rich in vitamin K, vitamin A, vitamin C and various minerals. It has anti-inflammatory effects and may help reduce the risk of chronic diseases.
- 5. Broccoli: Cruciferous vegetable, rich in vitamin C, vitamin K and fiber. Contains sulforaphane,





- a compound associated with cancer prevention.6. Blueberries: Rich in antioxidants,
- especially anthocyanins, which are associated with improved brain function and reduced risk of heart disease.
- 7. Salmon: Rich in omega-3 fatty acids, which are essential for heart health. It is also a good source of high-quality protein and vitamin D.
- 8. Avocado: Rich in healthy fats (monounsaturated fatty acids), fiber, and potassium. Helps lower cholesterol and improve heart health.
- 9. Red Cabbage: A cruciferous vegetable rich in antioxidants and vitamin C. Its rich color indicates that it contains a lot of phytochemicals.

10. Beets: Rich in nitrates, which help lower blood pressure. It also contains antioxidants and fiber.

And, of course, a reminder that even if these are "superfoods," they don't work their magic in a vacuum. Nutritional recommendations from Harvard Medical School emphasize a plan that includes:

- 1. Balanced diet: Consume a variety of fruits, vegetables, whole grains, lean protein, and healthy fats.
- 2. Control portion sizes: Avoid overindulging in any food, even healthy foods.
- 3. Reduce processed foods, saturated fats, and added sugars: These foods can have a negative impact on health.
- 4. Drink plenty of water: Keep your body hydrated.
- 5. Exercise regularly: Combined with a healthy diet, you will get the best results.

What Is Magnesium Deficiency...And When Is It a Problem?

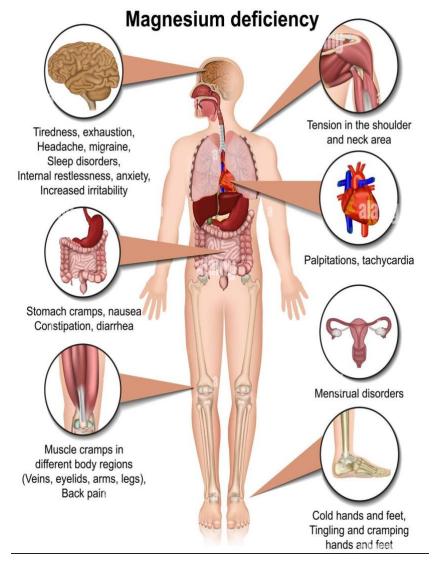
Magnesium is a mineral that helps your body work properly. But your body can't make magnesium on its own, so it's important to get enough of it from your diet.

A low magnesium level, also called "hypomagnesemia," is a blood magnesium below 1.7 mg/dL. There are several different causes, like poor dietary intake or loss of magnesium from the urinary or digestive tract.

Severe magnesium deficiency can cause problems with the function of your nervous system and heart. It can lead to things like muscle spasms, seizures, or heart arrhythmias, according to Joanna Jan, MD, writing for *Good Rx*.

Oral or intravenous magnesium can supplement a low magnesium level. But it's important to find and address the underlying cause. Some of the symptoms of hypomagnesemia may include:

- Weakness and fatigue
- Tremors or muscle twitching
- Muscle cramping
- Heart palpitations or heart arrhythmias



- Numbness
- Seizures
- Confusion or mood changes.

In many cases, low magnesium is associated with low levels of other important electrolytes. Low levels of calcium and potassium are especially common. That's because low levels of these electrolytes share common causes.

Treatment for low magnesium levels includes oral (by mouth) magnesium supplements (magnesium oxide pills). If your levels are especially low or cause symptoms, intravenous (IV) magnesium is a better option.

In addition to treating the low level, it's important to figure out the reason for the low magnesium and treat the underlying condition.

If your magnesium is low because you aren't getting enough magnesium in your diet, try to eat more of the following foods that have lots of magnesium:

- Nuts and nut butters especially almonds, peanuts, and cashews
- Spinach
- Grains, like rice and whole-wheat breads and cereals
- Black beans and edamame
- Soymilk
- Yogurt
- Potatoes.

A serving of each of the above foods contains 40 to 80 mg of magnesium. Experts recommend that adults consume 400 mg of magnesium every day. This may be easier than you think — a small serving of pumpkin or chia seeds contains up to 150 mg of magnesium!

It's also important to recheck your magnesium level and continue supplementing for several days after your level returns to normal. This is so you restore your magnesium levels in your blood as well as your cells, which can take a bit longer.



Eleven Medications You Should Take On an Empty Stomach

Some medications work better when taken on an empty stomach. Common examples include thyroid medications, bisphosphonates, and sucralfate (Carafate).

The general rule of thumb is to take your medication either 1 hour before or 2 hours after a meal. But how long you should wait before eating or drinking can differ depending on the medication.

Check with your pharmacist or prescriber if you should take any of your medications on an empty stomach. Make sure you understand what to separate from your medications, and for how long, according to Kristianne Hannemann, PharmD writing for *Good Rx*.

If you've ever been told to take medication on an empty stomach, you might still have a few questions about how to do so. For instance, can you still enjoy your morning cup of coffee after taking your pill? And how long do you need to wait after you've taken your medication before eating?

Well, a lot of research has gone into finding out how foods and drinks affect medications. And, depending on the medication, the answers to your questions might vary.

Generally, there are a few reasons why some medications need to be taken on an empty stomach.

These include:

- Slowed absorption: Food can delay the time it takes for certain medications to be absorbed by your body. This can cause the medication to take longer to work.
- Lower absorption: Some foods, drinks, and supplements can lower the amount of medication that gets into your body. This usually happens when these foods or drinks attach to the medication in your stomach.





• Faster or slower breakdown: Some juices, like grapefruit juice, can cause certain medications to get broken down faster in your body. If this happens, your medication might not work as well. Juices can also sometimes cause medications to get broken down more slowly. This can lead to a buildup in your body and cause more side effects.

Taking medicine on an empty stomach typically means you do so either one hour before or two hours after meals. Although this is a good general rule to follow, some medications have more specific instructions. So, it's important to understand what this means for your medication.

And keep in mind that some medications *should* be taken with food, so it's helpful to know the difference. You might be wondering about how long does it take for your stomach to empty? After a meal, it normally takes around 1 hour and 30 minutes to 2 hours for your stomach to empty. But, the type of meal you eat plays a role in how fast it moves through your stomach. For example, a high-fat meal can slow down the time it takes for your stomach to empty. Certain health conditions and medications can also slow down stomach emptying. And other medications can speed it up.

What about coffee, juice, or other products? The answer will differ depending on the product. But try not to mix any foods, drinks, or other medications without speaking with a healthcare professional first. This is because even your morning coffee could affect the way some medications get absorbed into your body. Common examples include:

- 1. Thyroid medications
- 2. Bisphosphonates
- 3. Sucralfate
- 4. Sildenafil (Viagra)
- 5. Rybelsus
- 6. Captopril
- 7. Bethanechol
- 8. Ampicillin
- 9. Zafirlukast
- 10. Proton pump inhibitors
- 11. Isoniazid.



The bottom line is that many foods and drinks can cause certain medications to be less effective. In this case, you may need to take them on an empty stomach. What this means can depend on your particular medication.

It's important to know if any of your medications should be taken on an empty stomach. If you aren't sure about timing or specific interactions, ask a healthcare professional to give you more details.



Mistakes Retirees Make at the Supermarket

It's not just inflation. Some bad habits may explain why you're paying too much for groceries. Retirees living on fixed incomes have been feeling the pinch of rising grocery costs.

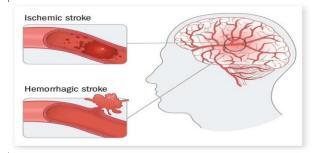
Grocery prices in February rose 2.6 percent yearover-year, according to the U.S. Bureau of Labor Statistics' Consumer Price Index. For some items, such as eggs, price hikes have been much steeper.

But don't blame a big grocery bill entirely on inflation (or bird flu, in the case of egg prices). Your shopping habits could be a contributing factor, according to AARP.

"There are many ways retirees can reduce their grocery costs and help avoid overspending," says Laura Adams, author of *Money Girl's Smart Moves to Grow Rich* and an analyst at the financial products and services comparison website Finder.com.

AARP advises that to save at the supermarket, make sure you're not making these 11 mistakes:

- 1. Missing out on senior discounts
- 2. Shopping without a plan
- 3. Buying out-of-season produce
- 4. Overlooking frozen fruits and vegetables
- 5. Overbuying foods in bulk
- 6. Sticking to the center aisles
- 7. Buying nonfood items at the supermarket
- 8. Not using grocery store apps
- 9. Being too loyal to major brands
- 10. Using the wrong credit card
- 11. Throwing away receipts.



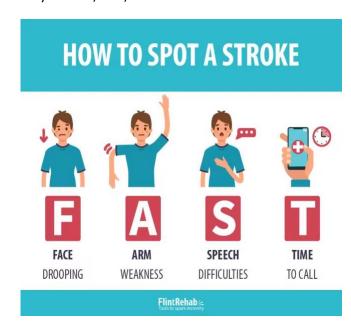


Six Early Warning Signs of a Ministroke

Ministrokes (transient ischemic attacks) are caused by a blockage of blood flow to a specific area of the brain.

Early warning signs of a ministroke include one-sided weakness, speech problems, vision loss, and balance problems.

So, obviously, get medical care immediately if you're experiencing symptoms of a ministroke, Amy Walsh, MD, MDP advises for *GoodRx*.



Ministrokes are brief episodes of low blood flow to the

brain that resolve on their own. They are also called transient ischemic attacks (TIAs). TIAs resolve on their own within 5 to 10 minutes but can also last as long as 24 hours.

They don't cause lasting damage to the brain. But they are an important warning that you are at high risk of developing a stroke in the near future.

The symptoms of a stroke and ministroke are often the same. So it's important to get care right away if you're experiencing ministroke symptoms. Here are six early warning signs of a ministroke you don't want to miss.

Ministrokes develop when blood flow to the brain gets blocked, usually because a blood clot is partially blocking a blood vessel (artery).

The difference between a ministroke and a stroke is that with a TIA, the clot dissolves or moves on from where it was blocking blood flow. Smoking can also increase your risk of developing a ministroke because smoking injures blood vessels.

Ministroke symptoms come on all of a sudden. Common early symptoms of a TIA include:

- 1. One-sided weakness
- 2. Speech changes
- 3. Confusion
- 4. Vision changes
- 5. Dizziness or balance problems
- 6. Headache.

You should call 911 and get immediate medical care if you think you're having a ministroke.

Twelve Medications That Cause Hair Loss

There are many medications that may cause hair loss. These medications can cause hair to thin or come out in clumps.

Common examples include chemotherapy, antidepressants, and anti-seizure medications. Oral retinoids, tamoxifen, and blood thinners can also cause hair loss. It usually reverses once you stop taking the medication, but in some cases it can be permanent.





The most common medications that may cause hair loss.

- 1. Retinoids
- 2. Antidepressants
- 3. Anticoagulants
- 4. Anticonvulsants
- 5. Beta blockers
- 6. Antithyroid medications
- 7. Chemotherapy
- 8. Tamoxifen
- 9. Certain arthritis medications
- 10. Allopurinol
- 11. Levodopa
- 12. Ozempic and other semaglutide medications.

It's best to talk to your healthcare provider about hair loss caused by medication — don't try to treat it on your own. They can recommend the best treatment option or make changes to your medications to help reverse or manage hair loss safely.

If you or someone you know has experienced hair loss, you know how distressing this condition can be. Even though it's not a life-threatening problem, it can harm your self-image and quality of life.

Sometimes hair loss is caused by the natural process of getting older, such as hormone changes.

It can also be caused by genetics. But there are many medications that can cause hair loss, too.

Chemotherapy is the most well-known type of medication that causes hair loss. But what are the other medications that cause hair loss you should be aware of? And is there anything you can do to prevent it?



The bottom line is that in most cases, hair loss caused by medication is temporary. Hair will usually regrow once the medication is stopped. But sometimes, stopping medication isn't an option. And although rare, hair loss triggered by a medication can be permanent. Let your healthcare provider know if you think your medication is affecting your hair. They may recommend a treatment option to help the hair regrow. Or they may be able to change the medication causing hair loss to a different treatment option.

The Number One Exercise for Balance

One simple exercise can help prevent falls and improve how well you age. What is it? Standing on one leg can improve ankle stability and help prevent falls, say Michelle Crouch, writing for AARP.



When you think about a total body exercise program, your balance might not be top of mind.

But balance is crucial for mobility and daily living activities, says Karl B. Fields, M.D., a sports medicine and family medicine physician at Cone Health in Greensboro, North Carolina.

Balance exercises also improve stability and reduce the risk of falls. That's especially important for older adults who face a higher risk of falls. More than one in four people age 65 and older fall each year, according to the Centers for Disease Control and Prevention.

Many exercises can help support your balance, but if you have time for only one move, try standing on one foot once or twice a day.

Although it's incredibly simple, practicing your one-foot balance is "the most important thing you can do to improve stability in your ankle," says Fields, who is also past president of the American Medical Society for Sports Medicine.

In addition to strengthening your ankle, standing on one leg enhances your awareness of where your foot and ankle are in space—a critical skill to prevent falls that can diminish as you age, says Anthony Beutler, M.D., medical director for sports medicine at Intermountain Healthcare in Salt Lake City.





New research from the Mayo Clinic has found the timing of how long you can stand on one leg can also give you insight into how well you're aging. The study found it was a more important measure of aging than changes in strength or gait. Beutler suggests incorporating one-legged stands into your daily routine, whether it's while brushing your teeth at night or before your morning coffee.

A meta-analysis published in the Cochrane Database of Systematic Reviews, which analyzed 108 studies, including 8,000 adults aged 60-plus, found that regular balance exercises reduced fall rates by 24 percent.

Here's a step-by-step guide to a one-foot balance exercise you can do anywhere in just a few minutes. Be sure to talk to your doctor before starting a new exercise program.

Fields said he finds that his patients get "better sensory feedback if they are barefoot," but some patients with arthritis or foot pain find balancing barefoot too uncomfortable. If so, it's better to do the exercise wearing shoes.

- 1. Stand upright with your feet shoulder-width apart. If you need extra support, position yourself near a kitchen or bathroom counter or a sturdy piece of furniture that you can hold on to if necessary.
- 2. Keeping an upright posture, raise one foot and balance on the opposite foot, holding the position for 10 seconds. Gradually work up to 30 seconds (or longer) at a time. As you improve, work on not moving your arms away from your body or letting your weight shift from side to side while you perform the exercise.
- 3. Switch feet and repeat on the other side.
- 4. Once you can balance on each leg for 30 seconds without holding on, increase the difficulty by trying it with your eyes closed. Or challenge yourself to balance on one leg while standing on a pillow or another surface that isn't stable. Just make sure you're near something you can grab if you lose your balance.

Six Travel Tips That Can Reduce Stress

Traveling by air, train, or even in your own car isn't always easy for everyone. But for seniors, handling the bumps in the road created by everything from flight delays to lack of support services at their destination can be even more of a challenge.

Following these straightforward travel tips will help you to reduce the stress from travel and ensure you stay safe while also getting the most from each trip.

1. Manage Medications: No matter how you travel, it's important to keep several days of medications close at hand. It's critical for air travel because access to checked bags is virtually impossible and flight delays create a time

crunch if you need to medicate multiple times a day. Also, bags can be lost compounding the



problem. If you take a liquid medication, work with your physician to get documentation stating your need to carry those medications onto a flight so Transportation Security Administration (TSA) rules can be navigated more easily.

2. Stretch Your Legs: Long flights, car rides, and train travel mean being seated for a long period of time. A serious risk for senior travelers is deep vein thrombosis brought on by lack of movement. On long flights or the train try to get an aisle seat which makes it easier to stand, stretch, and use

the restroom.

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Make sure you stop every few hours if you are on the highway to take a short break, walk around a little, and get a good stretch.

- 3. Stay Hydrated: Traveling is a thirsty business and being on the move tends to quickly dehydrate everyone. Seniors flying at high altitudes are at an even higher risk of dehydration so it's a good idea to keep a water bottle full and sip on it during travel. Don't forget about eating either have a few snacks like fruit or nuts in plastic zippered bags or energy bars in their carry bag instead of relying on airport stores and restaurants.
- 4. Share Travel Details: Share your travel details, such as flight departure and arrival times and gates, terminal maps, immigration information with a neighbor or relative to avoid unexpected surprises.
- 5. Pack Light: The goal is to pack everything you need in a rolling suitcase plus a medium-sized over-the-shoulder carry-on. For domestic travel, pack even lighter because anything you need should be available at your destination. Heavy bags and too many of them can contribute to lifting injuries and even falls. Lighter is better.
- 6. Be Prepared for TSA Rules: TSA is something everyone needs to be prepared for at the airport. Make sure you know some of your medical conditions may raise red flags at security checkpoints. Surgical hip or knee implants can set off alarms. To avoid delays, get a physician's statement or the device's description card and make sure you carry that documentation.

Knowing How to Take Your Medications Is ImportantResearch suggests that half of medications prescribed for people with chronic diseases might not be taken correctly.

Some common problems people make are related to how they take their medications, such as forgetting to take it or not taking it at the right time; taking too much or too little; and taking medications that can interact with each other, including over-the-counter medications, herbal products and supplements.

Often, communication plays a large role. For instance, when a health care professional counsels the patient on how to take their new medication in a way that is not clear, the patient may not understand the directions.

Older adults are at higher risk for medication problems. They may



have multiple chronic conditions, which can lead to complex medication regimens, leading to an increased risk for drug interactions or challenges with medication adherence.

Vision or hearing impairments may lead to problems reading prescription labels or hearing instructions. Arthritis may make it hard to open bottles. Cognitive decline may make it harder for older adults to remember how or when to take their medications. Medication costs may also be a large problem.

Heart medications can be a source of medication-related problems, especially since cardiovascular conditions are so prevalent, particularly among older adults, who are on



multiple medications. The medications may have side effects such as dizziness or fatigue or need dosage adjustments requiring monitoring and communication with their health care team.

A patient should understand what each medication treats and how and when to take it, including whether to take it with food.

Take The Initiative—Talk to Your Health Care Provider About Mental Illness

Don't wait for a health care provider to ask about your mental health. Start the conversation.

Symptoms of mental illnesses may include:

- Persistent sad, anxious, or "empty" mood
- Feelings of hopelessness or pessimism
- Irritability
- Feelings of guilt, worthlessness, or helplessness
- Loss of interest or pleasure in hobbies and activities
- Decreased energy or fatigue
- Moving or talking more slowly
- Feeling restless or having trouble sitting still
- Difficulty concentrating, remembering, or making decisions
- Difficulty sleeping, early-morning awakening, or oversleeping
- Appetite or weight changes (or both)
- Thoughts of death or suicide, or suicide attempts
- Aches or pains, headaches, cramps, or digestive problems without a clear physical cause and/or that do not ease even with treatment.



Here are three tips to help prepare and guide you on talking to a health care provider about your mental health and getting the most out of your visit.

1. Talk to a primary care provider: If you don't know where to start for help, you may want to consider bringing up your mental health concerns during your appointment with a primary care provider (PCP). A PCP is a health care practitioner people see for common medical problems, and this person is often a doctor. However, a PCP may be a physician assistant or a nurse

practitioner.

- 2. Prepare ahead of your visit: Health care providers have a limited time for each appointment, so it may be helpful to think of your questions or concerns beforehand.
- Prepare your questions. Make a list of what you want to discuss and any questions or concerns you might have.
- Prepare a list of your medications. It's important to tell your health care provider about all the medications you're taking, including over-the-counter (nonprescription) drugs, herbal remedies, vitamins, and supplements.



- Review your family history. Certain mental illnesses tend to run in families and having a relative with a mental disorder could mean you're at higher risk. Knowing your family mental health history can help determine your risk for certain disorders. It can also help your health care provider recommend actions for reducing your risk and enable you and your provider to look for early warning signs.
- 3. Consider bringing a friend or relative: It can be difficult to absorb all the information your health care provider shares, especially if you are not feeling well. Sometimes it's helpful to bring a close friend or relative to your appointment. A companion can be there for support, help you take notes, and remember what you and the provider discussed. They also might be able to offer input to your provider about how they think you are doing.

New Jersey Offers a Wealth of Aging Services

New Jersey is home to a growing and diverse older adult population that shares the common desire to maintain their independence and live in the community for as long as possible with the assistance of accessible, high-quality long-term services and supports as, and when, necessary.

Helping them along are programs administered by the Department of Human Services and its partners in the aging and disability network.



The Division of Aging Services (DoAS) receives federal funding through the Older Americans Act and serves as the focal point for planning services for older adults, developing comprehensive information about New Jersey's older adult population and its needs, and maintaining information about services available throughout the state. Their website provides information for:

- Staying Healthy, where you will get information about Medicare options, nutrition, health education and other programs that help you maintain and improve your health.
- Staying Safe, where information on how vulnerable adults living at home or in institutions are protected from abuse, neglect and exploitation.

DoAS provides oversight of the home and community-based programs provided by or through New Jersey's 21 county offices on aging known as the Area Agencies on Aging (AAA). Services available at AAAs may include information and assistance, outreach, transportation, case management, homemaker, visiting nurse, respite, telephone reassurance, hospice, escorted transportation, adult day care, legal assistance, education, and caregiver support. Meals provided in a group setting and delivered to the home are also available through the AAAs.

Access to some of these programs is through NJ Save, an online application to help low-income seniors and individuals with disabilities save money on Medicare premiums, prescription costs, and other living expenses.

The Aging & Disability Resource Connect (ADRC) website provides information on federal, state and local programs and services.

The State Health Insurance Assistance Program (SHIP) provides free help to New Jersey.

Medicare beneficiaries who have problems with, or questions about their health insurance.

The Division of Medical Assistance and Health Services (DMAHS) administers Medicaid services in New Jersey. Medicaid provides healthcare coverage for low-income seniors and for individuals needing the level of care typically provided in a nursing home, whether those services are provided in an institutional setting or at home.

The Division of Family Development (DFD) administers the Supplemental Nutrition Assistance Program which helps seniors with low incomes pay for nutritious food items.

Should You Be Taking a Daily Aspirin?

Taking a daily aspirin? It could be worth asking yourself why, and if it's still the best choice for you.

That's because it's been five years since recommendations began changing about who should take the tiny little pill to prevent heart problems, and new data shows that 48 percent of adults still mistakenly believe the benefits of taking a low-dose aspirin every day to reduce the chance of a heart attack or stroke outweigh the risks.

That's no longer recommended for everyone. In 2019, the American College of Cardiology warned of bleeding risks – particularly in the gut – from using low-dose aspirin preventively, and in 2022, the U.S. Preventive Services Task Force followed suit.

The task force now says people ages 60 and older shouldn't take it for prevention, and people ages 40 to 59 may consider doing so if they have a 10 percent or greater risk of having a disease of their heart or blood vessels within the next 10 years.

About 18 percent of people—which is nearly 1 in 5—say they take preventive low-dose aspirin even though they have never had a heart attack or stroke and don't have a family history. Among them, a little over half said they take aspirin "basically every day," and the remainder took it a few times a week or a few times a month, according to the survey results published by the Annenberg Public Policy Center at the University of Pennsylvania.



Among people ages 60 and older with no personal or family history of a heart attack or stroke, 22% said they take daily low-dose aspirin.

People may be taking low-dose aspirin because they heard about it long ago and began using it on their own, or because it was recommended before the guidelines changed and they haven't had an updated conversation about it with their health care provider.

Create a Support Network For Disasters and Emergencies

As an older adult you may have specific needs during or after a disaster or emergency. One of the most important things to do prior to a disaster is to create a support network of family, friends and others who can assist you during an emergency. Make an emergency plan and practice it with them.

Make sure at least one person in your support network has an extra key to your home, knows

where you keep your emergency supplies and knows how to use lifesaving equipment or administer medicine.

If you undergo routine treatments administered by a clinic or hospital, find out their emergency plans and work with them to identify back-up service providers.

EMERGENCIES DO HAPPEN.









Know your neighbors. Plan together. Be ready.

Don't forget your pets or service animals. Not all shelters accept pets, so plan for alternatives. Consider asking loved ones or friends outside of your immediate area if they can help with your animals.

The Disaster Preparedness Guide for Older Adults can help you assess your needs, create a plan and engage your network. The guide provides easy-to-read, user-friendly worksheets that walk individuals and caregivers through a self-assessment to identify specific needs and checklists that create a personalized plan.

To print out a copy of the guide, go to https://ready.gov/older-adults.

National Survey Says Older Adults Are Deeply Dissatisfied With Healthcare

As millions of Baby Boomers transition into older adulthood, live longer than previous generations and seek ways to maintain wellness and independence as they age, a nationwide survey shows deep dissatisfaction among U.S. older adults aged 65+ with health care and the related systems and services that do not meet their needs and preferences.

Survey results show that older adults who live in rural areas and/or are women, people of color, those who are economically

disadvantaged or have limited functional health, are especially dissatisfied.



"Older adults are stuck in a health care system that is not responsive to their goals and preferences. Boomers want health care that maximizes their health and ability to function, and they want their providers to listen to them," said Terry Fulmer, president of The John A. Hartford Foundation.

"It is not too late to pivot to age-friendly care, which prioritizes the needs and desires of older adults in their care plan.



"There are many innovative approaches to help older adults live every year to its fullest, not just increase the number of years they live."

Four in five older adults (82 percent) say the U.S. health care system is not prepared for the growing and changing needs of America's aging population. Just one in 10 (11 percent) give the health care system an 'A' grade.

Instead of the status quo, older adults say they want solutions that will maximize their golden years, like interventions that make care more affordable,

innovations to reduce or prevent cognitive decline and health care providers who understand what matters most to them when assessing care options.

"The United States is on the brink of an age wave of unprecedented proportions, and American health care requires a radical and immediate rethink to match our health spans, or being able to live every year to its fullest, to our life spans," said international longevity and aging expert Ken Dychtwald, founder and CEO of Age Wave.

Today, America ranks 50th in terms of lifespan and 68th in the world in terms of health span, according to the Institute for Health Metrics.



Broken Heart Syndrome Is on The Rise

Broken heart syndrome, a life-threatening condition whose symptoms mimic a heart attack, is on the upswing, according to new research that shows the sharpest increases among women 50 and older.



The condition, also known as Takotsubo cardiomyopathy, has been studied for decades in Japan and elsewhere. But it wasn't well known internationally until 2005, when the New England Journal of Medicine published research on it.

Triggered by physical or emotional stress, broken heart syndrome causes the heart's main pumping chamber to temporarily enlarge and pump poorly. Patients experience chest pain and shortness of breath, symptoms similar to those of a heart attack.

If they survive the initial phase of the disease, people often can recover in days or weeks.

However, the longer-term effects are still being studied. Despite apparent recovery of heart muscle function, some studies show people who have had broken heart syndrome are at heightened risk for future cardiovascular events.

Recently published in the Journal of the American Heart Association, the study examined 135,463 cases of broken heart syndrome in U.S. hospitals from 2006 to 2017. It found a steady annual increase among both women and men, with women making up 88.3% of the cases.

Researchers were taken aback to find the rate of the condition was at least six to 12 times higher in women ages 50 to 74 than it was in men or in younger women.

More research is needed to understand the risks and reasons why broken heart syndrome seems to disproportionately affect middle-aged to older women.

Social Security Benefits While You're Working?

When you start receiving Social Security retirement benefits, the Social Security Administration (SSA) considers you retired. However, this doesn't mean you must stop working. It's vital to understand the current regulations because exceeding the income limits could result in a reduction of your Social Security benefits.

The SSA periodically reviews your earnings record and recalculates your benefit payments based on reported wages to ensure you receive the correct amount.

If your earnings exceed expectations, any increase in benefits will be paid retroactively to January of the following year. How are earnings deducted from benefits? If you're below full retirement age and your income surpasses the set limit, the SSA may reduce your benefits according to specific guidelines. This ensures that your benefits align with your reported earnings and the established thresholds.

Before reaching full retirement age, for every \$2 earned over the annual limit of \$23,400 in 2025, \$1 will be deducted from your benefit payments. This rule helps manage the balance between working income and retirement benefits, ensuring that the system remains fair and sustainable for all beneficiaries.



In the year you reach full retirement age, \$1 is deducted for every \$3 earned over the limit of \$62,160 in 2025. This deduction only applies to income earned before the month you reach full retirement age. Once you reach this milestone, your earnings no longer impact the amount of your Social Security benefits, regardless of how much you earn.

Additionally, the SSA adjusts your payment to compensate for months where reductions were applied due to excess earnings. This adjustment ensures that you receive the benefits you are entitled to, even if there were temporary reductions due to higher earnings in previous months.

If you're working while receiving retirement benefits, you can use the income test calculator available on the SSA's website. This tool allows you to assess how your earnings might affect your payments, enabling you to plan your finances more effectively and make informed decisions about your retirement strategy.

With this information, you can make better decisions about your retirement and optimize your income without risking your Social Security benefits.

How Seniors Can Help Prevent Crime—Some Common Sense Suggestions

Crime prevention is everyone's responsibility, not just a job for law enforcement. Seniors can learn how to protect themselves from crime by following these simple, common-sense, suggestions.

Share these tips with your neighbors and friends, too, and make it tough for criminals to work in your neighborhood:

- Always keep your doors and windows locked. Install dead-bolt locks on all doors.
- Keep your home well-lit at night, inside and out, and keep your curtains closed at night.
- Install a peephole in your front door so you can see callers without opening the door.
- Ask for proper identification from delivery men or strangers. Don't be afraid of asking if they are legitimate they won't mind.
- Never give your credit card, phone card, social security, or bank account number to anyone over the phone unless you've placed the call.
- If a stranger asks to use your telephone, offer to place the call for him/her yourself. Never let a stranger into your home.
- Do not leave notes on your door when you are gone, and do not hide your keys under the mat or in other conspicuous places.
- Never give out information over the phone indicating you are alone or that you won't be home at a certain time.
- When you are gone for more than a day, make sure your home looks and sounds occupied use automatic timers to turn on lights and a radio or television.



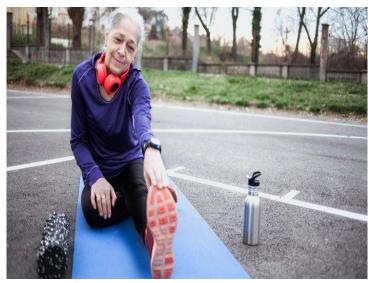
Dealing With Leg Pain After Exercise

It's not clear why people develop leg cramps. Theories include dehydration, electrolyte imbalances, and muscle fatique.

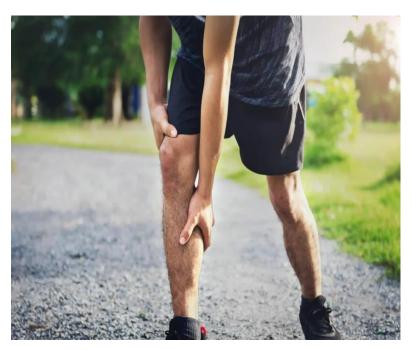
Some drinks can stop leg cramps when they start. These drinks include electrolyte drinks and coconut water. There's evidence that electrolyte drinks can prevent leg cramps, too, but there isn't a best electrolyte drink for leg cramps.

If you've ever experienced painful leg cramps during or after a workout, you might be wondering why your legs are

having spasms and what you can do to stop it.



Muscle cramps are sudden, painful muscle contractions or spasms. Normally, your muscles contract in unison when you need to move. A cramp or spasm occurs when your muscles contract when they shouldn't.



Sometimes, one muscle has a spasm. But often, it's a muscle group, like the muscles in your lower leg. Cramps can last for a few seconds or a few minutes.

It's not clear what causes leg cramps. But *Good Rx* reports that researchers believe some things can trigger cramps, such as:

- Dehydration
- Electrolyte imbalances
- Muscle fatigue.

If you're prone to leg cramps, here are four drinks to keep on hand the next time you're working out:

- 1. Gatorade
- 2. Powerade
- 3. Pedialyte
- 4. Coconut water

Researchers believe that drinking coconut water can give your muscles extra potassium before you start working out. So, when you drink coconut water, you're preventing electrolyte loss rather than replacing electrolyte loss. This can keep cramps from starting in the first place.

But talk with a healthcare professional if you have kidney disease or take medicines that affect your potassium levels. In these cases, coconut water might not be the safest option for you.

Bottom Line: Electrolyte-containing drinks may help with leg cramps, but there's no proof that they work for everyone. There's no best electrolyte drink for leg cramps. But sports drinks, oral rehydration solutions like Pedialyte, and coconut water may all help ease leg cramps by replacing electrolytes lost from sweat.







"Of course I've gained weight. That's why it's called growing older!"

Contact Us:

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