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 May and June of 2026,we continue our new feature by the director of the Stockton University Center on Successful Aging (SCOSA), Dr. Christine Ferri. Dr. Ferri will be offering insights and suggestions on how the region's seniors can stay connected and thrive, including an introduction to SCOSA's intergenerational gardening club.

We also continue another new feature…simple exercise tips for seniors of all ages—courtesy of Rich Crowell, the principal at one of South Jersey's most widely respected physical therapy firms. This time Rich discusses getting ready for the beach.

And we are pleased to introduce our newest regular contributor, tech guru Steve Lubetkin, who will be offering thoughts on how seniors of all ages can make the latest tech work for them. In his inaugural column, Steve suggests that one quick way to improve your tech skills is to watch how-to videos on YouTube, where countless tutorials are available. You can learn at your own pace and find solutions tailored to your specific needs.

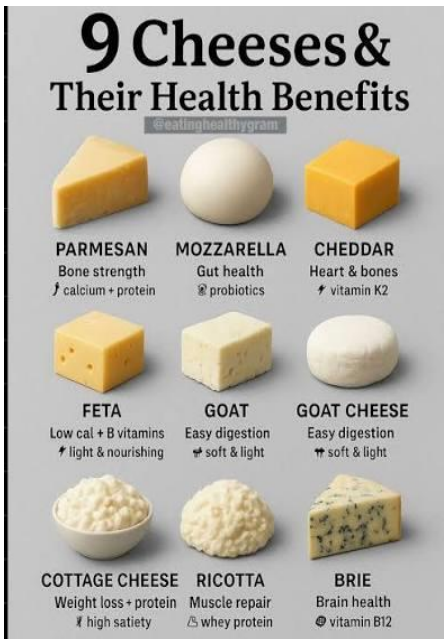
In addition, of course, we have our usual potpourri of information that we feel might make a difference to our senior friends across South Jersey, including notes on:

- How eating cheese may help stave off dementia,
- A mental trick to help you get to sleep,
- Why we take some meds on an empty stomach,
- The role Vitamin D plays in keeping you healthy, and
- Foods that will make you poop.

Your Ideas?
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.

And, 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 22,700 non profit organizations that serve our region.

Who Knew? Eating Lots of Cheese May Help Prevent Dementia
In the *Reader's Digest*'s feature "The World of Medicine," Kristine Gasbarre reports on a study in the journal *Neurology* that found that eating cheese could play a role in dementia prevention.



Researchers from Sweden's Lund University followed 28,000 Swedish residents over a 25 year period. More than 3,200 developed dementia during that time period; however, those who reported eating 1.7 ounces or more of high fat cheese (defined as having more than 20 percent fat, such as cheddar, Brie and Gouda) were 13 percent less likely to develop dementia than those who ate ½ ounce or less daily.

In contrast, there was no meaningful link with a lower risk of dementia for those eating low fat dairy.

"Unretired" Seniors Pick Up Gig Work
According to AARP, as reported by Cathy Bussewitz for the *Associated Press*, many seniors who have concluded careers at hospitals, universities and corporations are returning to work, finding gig jobs, or contract jobs, through apps or digital platforms.

They are working for a variety of reasons that include insufficient retirement savings, rising living costs, and a desire to stay active.

Retirees and employment experts point out gig work has both advantages—freedom to set hours and time involvement.

And down sides, such as limited job protections, and wages insufficient to cover job expenses.

Bussewitz identifies some factors to consider.
• *Stay Active but Know your Limits.* Barbara Baratta, 72, a retired pediatric nurse, signed up through a pet care app Rover to walk dogs and administer medication to

cats. "I get my steps in and do hill climbing," she notes, but steep and uneven terrain, to say nothing of inclement weather, can pose a challenge. She also advises that older walkers be careful about the size of the dogs they choose to walk. Rover keeps 20 percent of her earnings, but the income from the dog walking helps pay the bills, and she says through the work she has met a lot of great families.

• *A Social Buzz.* Working part-time can help combat loneliness in retirement. Baruch Schwarts, 78, who drives for Uber and Lyft, derives satisfaction from being needed, and enjoys his conversations with the great variety of people he chauffeurs. For those who choose driving as their gig, long stints can be hard on your back and legs, and finding a restroom to use on the go can be challenging as well.

• *Flexibility at a Price*. While the gig work offers the freedom and flexibility to set your own hours, you don't make money on which you may depend on those days you choose not to or cannot work.

• *Make Sure the Work is Worth It.* Before taking on gig work as a driver or delivery person, research what percentage the company takes from workers' earnings. There are no workplace protections, so if you get injured on the job or have a car accident, for example, there is no recourse, notes Alexandrea Ravenelle, a sociologist and gig economy researcher at the University of North Carolina at Chapel Hill. Stu Goldberg who drives for Uber hit three nasty potholes in three weeks and lost money those weeks as he had to replace three tires. LisaKay Foyle, 64, maximizes her earnings on Poplin, an app which connects her with clients who need help with their laundry, by only choosing express orders, which pay the highest rate.

SCOSA Hosts Inaugural Intergenerational Community Design Competition.
The Stockton Center on Successful Aging (SCOSA) recently hosted the 2nd Biennial Mid-Atlantic Intergenerational Conference on its campus in Atlantic City, New Jersey. The three-day event brought together practitioners and researchers to share ideas about how to create systems and programs that create opportunities for intergenerational connection.

Special guests from the New Jersey Intergenerational Orchestra kicked off the conference, bringing both "beautiful music and touching stories" about the positive impact of the special relationships between the orchestra members, reports our Stockton connection, Dr. Christine Ferri.

Dr. Ferri noted that "we also celebrated the winners of the inaugural *Intergenerational Community Design Competition*, planned with the Penn State Hamer Center for Community Design.

"This competition sparked creativity and innovation in designing spaces that foster intergenerational community connection and inclusion.

"In 39 sessions over the three days, we showcased a variety of programs and organizations that are creating intergenerational solutions that benefit people of all ages," says Ferri.

Stockton's Intergenerational Gardening Club in Galloway

Dr. Ferri also reports that, according to *Generations United*, 66 percentof Americans would like to spend more time with people outside of their age group.

"How and where can you connect with new friends across different generations? This summer, SCOSA is continuing our intergenerational gardening club where students and community members volunteer together at the Stockton Sustainability Farm in Galloway, New Jersey.

"Do you know about intergenerational programs and opportunities in your community? Do you want to start one? Reach out to SCOSA to share your ideas at scosa@stockton.edu and help us make South Jersey a place where intergenerational relationships can thrive."

By the way, Stockton is New Jersey's only official "Age Friendly University." The school joined the AFU Global Network and endorsed the Network's Ten Principles in December, 2018.

How Seniors of Different Ages Approach Technology

Say hello to *SJS's* newest regular contributor, Steve Lubetkin (steve@LMediaCos.com, one of our region's true tech gurus.

Steve will be sharing thoughts on seniors and tech, so keep an eye out for his contributions in future issues.

In his inaugural column, Steve explains how he sees technology concerns and fears break down into four age buckets among older users:

1. *Younger boomers (age 55-65)* are often still working, and use technology for a combination of productivity, remote work, and financial management.

2. *People between 65-75* are moving into retirement and are using technology for leisure, health and staying connected with friends and family.

3. *Between 75-85*, seniors face increasing challenges with vision, hearing and manual dexterity, and try to avoid frequent changes in the technology or devices they use.

4. The older group of seniors, *from 85 to 95* or older, may only use basic functions, and could feel overwhelmed or excluded from digital life because of increased complexity.

One quick way to improve your tech skills, Steve advises, is to watch how-to videos on YouTube, where countless tutorials are available. You can learn at your own pace and find solutions tailored to your specific needs.

"Don't give up trying to learn these technologies. Despite the challenges, they are a powerful tool for connection, especially for older adults.

"It's so much easier today for people to maintain relationships across distances. Sharing videos, photos, and messages with friends and family worldwide has changed how we communicate, making it easier to stay connected and engaged," says Steve.

[Steve is managing partner of The Lubetkin Media Companies, a video and podcast production company in Cherry Hill, NJ.

Since 1996, he has been the technology columnist for the *Jewish Community Voice of Southern New Jersey.*]

Trouble Getting to Sleep? Here's a Mental Trick to Help You Drift Off
If you can't fall asleep because your mind is racing and counting sheep just isn't working, sleep experts recommend a technique called "cognitive shuffling" that just might have you drifting off before you know it. It's a "mental exercise that gives your brain something neutral and mildly engaging to focus on, so it can drift toward sleep instead of churning," according to Angela Haupt writing for *Time.*

Once you go to bed, pick a word that doesn't have much meaning to you, is 5 to 12 letters long, and is emotionally neutral, not tied to stress or strong feelings. You "want to avoid words like money or deadline or anything that might trigger a worry chain," says Patricia B. Pedreira, a health psychologist and postdoctoral associate at Duke University Medical Center who specializes in behavioral sleep medicine. Her favorite words include: *blanket, garden, bedtime, and kitchen.*

Once you pick your word, go through it letter by letter, thinking of as many unrelated words starting with that letter that you can think of. Each time you name a word, briefly spend a few seconds visualizing it.

Keep going until you run out of words starting with that letter, then move on to the next letter in your chosen word. Ideally, you will fall asleep before you finish the whole word you've chosen, but if you are still wide awake, just choose another word and begin the exercise again.

"When your brain is busy reliving or processing what happened during the day, those thoughts can keep you stuck in an alert, problem-solving mode.

"Our job is to change the channel and refocus on something that's more likely to help you fall asleep," says Nina Kaiser, a psychologist in San Francisco who teaches cognitive shuffling to kids and adults she treats.

While cognitive shuffling is not a fix for everything that disrupts sleep, it works best for those who "are otherwise healthy sleepers, but bring stress to bed with them," Pedreira says. It is also effective with those who don't fall asleep instantly and the worry about that is keeping them up.

"That's exactly the window cognitive shuffling is built for: something low-key to do while the brain settles, instead of one more thing to stress about," according to Sarah Gray, a psychologist and instructor at Harvard Medical School who specializes in cognitive behavioral therapy for insomnia.

It's Beach Season, So Here Are Some Body Mechanics Tips from Our Favorite PT Pro, Rich Crowell

"With beach season in full swing, it's important to think about body mechanics when visiting the beach.

Classically, beach chairs are low to the ground and put us in a slouched, forward rounded position, which can be comfortable for a short period of time, but is not conducive to sitting on the beach all day," says Crowell.

"Here are a few tips to help you keep from feeling stiff or sore include getting up every 30 minutes to walk around for a minute or two and resetting your posture.

"One exercise that can help includes standing with your feet shoulder width apart, laterally leaning to one side while reaching with your arm up and over your head.

"Another exercise is standing with both arms bent at the elbow and palms facing upward, and then moving your hands out to the side while pinching your shoulder blades together.

"If you know you have difficulty getting up from a low chair, plan ahead and invest in a beach chair that is higher off the ground and has arms to push yourself up with. "

You can contact Rich at Romash & Crowell Physical Therapy, LLC, 76 Euclid Avenue East, Suite 100, Haddonfield, New Jersey 08033 or at 856-427-9311.

A Lifetime of "Cognitive Enrichment" Postpones Mild Cognitive Impairment and Alzheimer's Disease

Ariana Eunjung Chu writing for the *Washington Post* reports on the findings of a study published in *Neurology*, the journal of the American Academy of Neurology.

The study is "among the largest of its kind following 1,939 adults with an average age of 80 and tracing their cognitive trajectories alongside a lifetime of reported activities stretching back into childhood."

The study found that those who lived the most "cognitively enriched" lives developed Alzheimer's five years later (at an average age of 94) and mild cognitive impairment seven years later (at age 85) than those whose lives were the least cognitively enriched.

While the study does not prove having an "active" or "busy" mind prevents Alzheimer's, it does show a relationship. Overall, people with higher scores in lifetime enrichment had a 38 percent lower risk of Alzheimer's and a 36 percent lower risk of mild cognitive impairment.

The results, Chu reports "lend new momentum to a provocative proposition: that the texture of daily life—what we practice, who we see, how we fill an hour—may leave measurable imprint on the aging brain."

"The study's findings suggest that cognitive enrichment throughout one's life may strengthen neural connections, create a cognitive reserve, and give the brain more flexibility to compensate later in life, says Chu.

What the study shows is that "your cognitive engagement at certain times in your life course have big effects on your late-life cognitive performance," says Timothy Hofman, a professor at the Vanderbilt Memory and Alzheimer's Center.

"While the activities may have changed in the digital age, the importance for keeping your mind busy has not." As Andre Zammit, a study co-author and assistant professor at Rush University Medical Center in Chicago concluded "As long as you are constantly scouring for knowledge and looking to learn, that's what we see as important here."

What Does It Mean to Take Medication on an Empty Stomach?
Some medications work better when taken on an empty stomach. Common examples include thyroid medications, bisphosphonates, and oral semaglutide (Rybelsus, Ozempic pill, Wegovy pill).

The general rule of thumb is to take your medication either one hour before or two hours after a meal. But how long you should wait before eating or drinking can differ depending on the medication. As with all medications, 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.

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, says Kristianne Hannemann, PharmD, writing for *GoodRx*.

"Generally, there are a few reasons for taking medicine 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 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, 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.

Here are a few common "Empty stomach" examples from Hannemann:
1. Thyroid medications
2. Bisphosphonates
3. Sucralfate
4. Sildenafil (Viagra)
5. Oral semaglutide (Rybelsus, Ozempic, Wegovy)
6. Captopril
7. Bethanechol
8. Ampicillin
9. Zafirlukast
10. Proton pump inhibitors
11. Isoniazid

"It depends on the medication.," says Hannmenn. "Some medications should be taken on an empty stomach, meaning you should wait about 30 to 60 minutes before eating so your body can absorb the full dose. Others are meant to be taken with food to reduce stomach discomfort or improve absorption.

"And always follow the instructions on your prescription label or ask your prescriber or pharmacist if you're unsure."

Vitamin D: What It Does and What You Need to Know
Vitamin D is crucial for maintaining bone health and other essential functions. If you have low vitamin D levels, you may need a supplement such as vitamin D2 (ergocalciferol) or vitamin D3 (cholecalciferol).

Vitamin D supplements can interact with other medications. Examples of vitamin D interactions include atorvastatin (Lipitor), cholestyramine (Prevalite) and phenytoin (Dilantin, Phenytek). Other Vitamin D drug interactions include orlistat (Xenical, Alli), digoxin (Lanoxin), and hydrochlorothiazide (Microzide).

In most cases, you won't need to stop taking one of your medications because of a vitamin D interaction. But tell your prescriber your full medication regimen before starting vitamin D. This will help them check for interactions.

Vitamin D plays a significant role in maintaining healthy bones, explains Rosanna Sutherby, PharmD, writing for *Good Rx*. "It also helps regulate your muscular, nervous, and immune systems.

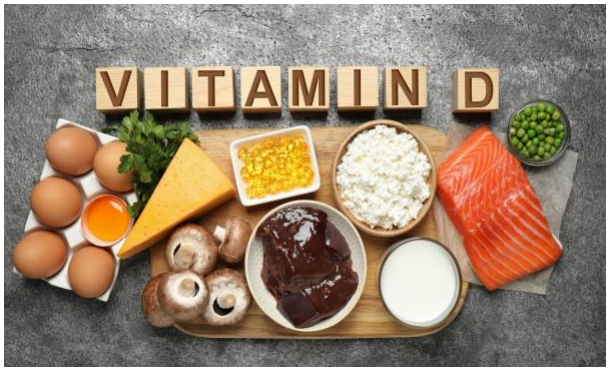
"Your body makes vitamin D when you're exposed to sunlight. You also get vitamin D from foods such as fatty fish, mushrooms, and vitamin D-fortified milk or cereal. Most people get enough vitamin D, but your healthcare team may check your levels if you're at high risk for vitamin D deficiency. If your vitamin D levels are low, they may recommend a vitamin D supplement.

"Examples include vitamin D2 (ergocalciferol) and vitamin D3 (cholecalciferol). These supplements are available over the counter (OTC). But some forms and doses of vitamin D are available only by prescription.

"Not getting enough vitamin D can lead to vitamin D deficiency. This can cause several health issues, including osteoporosis (weakened bones). So vitamin D supplements may be important to your overall health. But some medications interact with vitamin D. This increases your risk of side effects," says Sutherby.

Here are seven possible vitamin D drug interactions:
1. Some statins, such as atorvastatin
2. Bile acid sequestrants, such as cholestyramine
3. Some antibiotics, such as rifampin and isoniazid
4. Some seizure medications, such as phenytoin
5. Orlistan
6. Digoxin
7. Thiazide diuretics, such as hydrochlorothiazide

The bottom line, says Sutherby, is that vitamin D helps you maintain strong bones and supports your overall health.



"The best way to get vitamin D is from sun exposure. You can also get it from foods. But if you have low vitamin D levels, a healthcare professional may recommend a vitamin D supplement.

"Give your healthcare team a list of all the medications you take before taking vitamin D. They can check for vitamin D interactions and determine if you need to make changes to your medication regimen," Surtherby advises.

What Does a Ministroke Feel Like? Six Early Warning Signs of a Transient Ischemic Attack (TIA)
Ministrokes (transient ischemic attacks) are caused by blocked blood flow to a specific area of the brain.

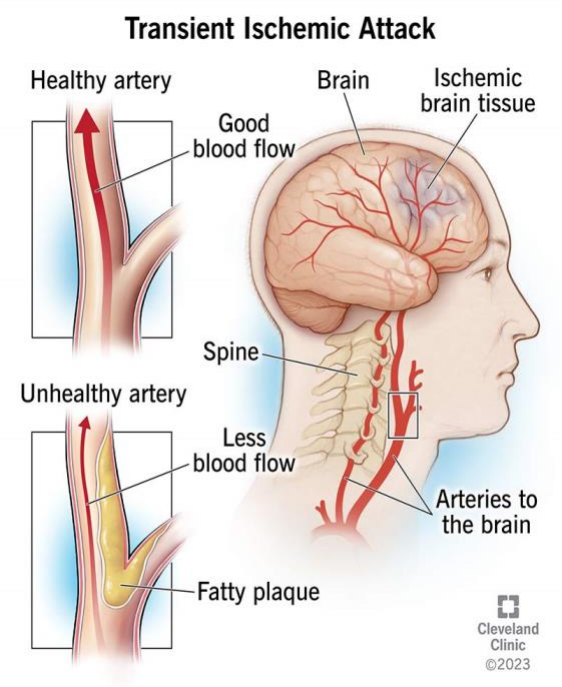
According to Dr. Amy Walsh, early warning signs of a ministroke include one-sided weakness, speech problems, vision loss, and balance problems. Of course, Dr. Walsh advises that you seek medical care immediately if you're experiencing symptoms of a ministroke.

In an article for *Good Rx*, she describes ministrokes as "brief episodes of low blood flow to the brain that resolve on their own. They're also called transient ischemic attacks (TIAs). TIAs resolve on their own within 5 to 10 minutes. But they can also last as long as 24 hours.

"Ministrokes don't cause lasting damage to the brain. But they're an important warning that you're 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. That's because you could actually be having a stroke. Here are six early warning signs of a ministroke you don't want to miss. Symptoms of a ministroke—or TIA—come on all of a sudden."

The following are common early symptoms of a TIA, according to Dr. Walsh:
1. One-sided weakness: Low blood flow to the brain causes weakness on one side of the face and/or body (like the arm or leg). You may notice weakness in just your face, arm, or leg — or all three. You may also notice numbness on one side of your body. This can feel like pins and needles along one side of your body. You may also feel completely numb.



2. Speech changes: You can experience speech changes if you develop a blockage in one of the blood vessels that goes to the speech center of your brain. Speech changes vary from person to person. Some people are unable to speak at all or form any sounds when they experience a ministroke.

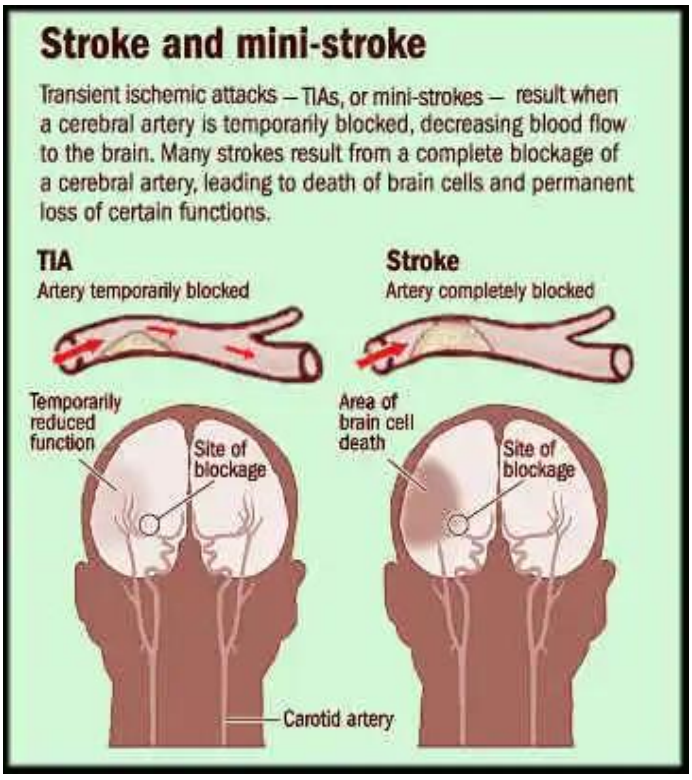
3. Confusion: You can also experience confusion if you have a blockage in a blood vessel that leads to your speech center. This affects your ability to understand language. People experiencing a ministroke may have trouble understanding what others are saying to them. This can make them seem confused and disoriented. Keep in mind that people may not be able to describe what they're experiencing because of

confusion. If you notice that a loved one suddenly seems disoriented, it could be a sign of a ministroke.

4. Vision changes: People can develop vision changes because of a ministroke. This happens when a blood vessel that leads to the vision center of the brain gets blocked. People might also develop double vision if there's less blood flow to the part of the brain that coordinates eye movement. These vision changes can develop in one or both eyes. They usually start all of a sudden and aren't painful.

5. Dizziness or balance problems: Dizziness and balance problems can develop when there's less blood flow to the coordination center of the brain. As a result, people can't sense where they are or how their body is moving through space. People describe feeling dizzy or like the room is spinning around them. They may also walk into walls or doorways. Many people have trouble walking in a straight line or standing up straight. Some people aren't able to hold their trunk steady when they're sitting down.

6. Headache: Up to one in three people experiencing a TIA develop headaches. But keep in mind that headaches are very common and can be triggered by many different things. A headache on its own is unlikely to be from a ministroke. Most people with TIAs will have other symptoms along with a headache.



Ministrokes develop when blood flow to the brain gets blocked. This usually happens because a blood clot partially blocks a blood vessel (artery). In a TIA, the blood clot dissolves or moves on from where it was blocking blood flow.

Some medical conditions increase the risk of developing a ministroke, including atrial fibrillation, high blood pressure, high cholesterol, and diabetes.

Smoking can also increase your risk of developing a ministroke because smoking injures blood vessels.

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

It's impossible to tell if you're having a ministroke or stroke based on just your symptoms. If you're having a stroke, you need to get care right away because strokes are life-threatening.

If a loved one develops symptoms of a ministroke, get help right away. Don't wait to see if their symptoms get better or go away.

Healthcare professionals can get imaging studies, which will show if someone is having a stroke or a ministroke. They can also do other tests to see if your symptoms are from another medical condition.

A ministroke will get better on its own. But a ministroke is a sign that you're at higher risk for developing a stroke in the future. In fact, one in five people who experience a ministroke develop a stroke within 90 days. If you're having a ministroke, you'll likely need other specialized tests to check the health of the blood vessels in your brain. Your healthcare team can help you find the right treatments to lower your risk of developing a stroke in the future," says Dr. Walsh.

"I'm looking for an Uber driver who can take me back to 1964!"

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

From Nuts to Beans: Foods That Help You Poop

Constipation isn't always easy to talk about, but almost everyone has experienced it at one point or another.

Writing for *Good Rx*, Dr. Anne Jacobson suggests that "many things affect how well your gut is working, including the foods you eat.

Some foods are much better than others for preventing or relieving constipation and helping you poop.

"Along with getting regular exercise and drinking plenty of water, eating high-fiber foods can help you poop regularly.

"Most adults should aim to eat 22 g to 34 g of fiber each day through a variety of foods," says Dr. Jacobson.

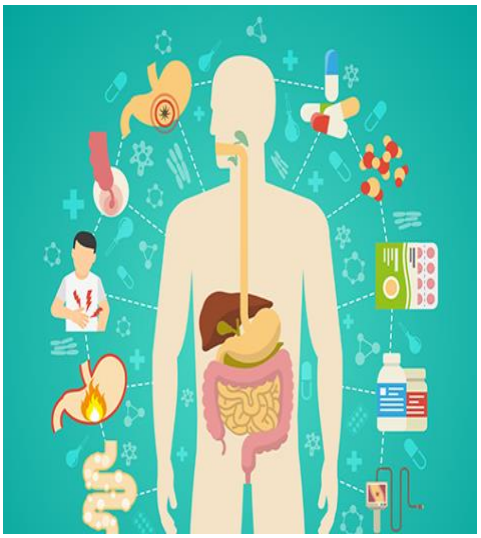
Fiber comes from plants, so if you're looking to add more high-fiber foods, focus on these food groups:
1. Fruits
2. Vegetables
3. Legumes
4. Nuts and seeds
5. Whole grains

High-fiber foods aren't the only foods that make you poop. Some foods support regular bowel movements in other ways., including:
1. Yogurt with probiotics
2. Coffee
3. Olive oil and flaxseed oil
4. Gum and foods with sorbitol (sugar alcohol)

In addition to helping you poop, a diet high in fiber will help with managing weight, managing blood glucose (blood sugar) levels, and lowering cholesterol.

"If you're aiming to eat more fiber, start slowly and drink plenty of fluids. Adding too much fiber too quickly can lead to bloating and gas, especially if your body isn't used to foods with fiber, "says Dr. Jacobson.

"Try to eat a variety of high-fiber foods so you can get both soluble and insoluble fiber. This provides the most benefits for your digestive system and overall health.



When your body is even a little dehydrated, your stool can become harder and your intestines can't do their job as well.

"There's no hard-and-fast rule for how much water you need to drink every day. Hydration needs vary from person to person. But many adults benefit from drinking eight to ten cups (2L to 2.5L) of fluids per day.

"Constipation is also a side effect of some medications.

"But even without these conditions or medications, many people still don't have regular bowel movements.

"These medications work in different ways, so talk with a healthcare professional about what's best for you.

"It's important to get medical care if you:
- See blood in your stool,
- Have abdominal pain or vomiting,
- Notice a sudden or significant change in your regular bowel habits.

Contact Us:
Remember that if you have story ideas, comments, or criticisms, you can e-mail us at *savvyjerseyseniors.com.*

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