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FOR YOUR BRAIN HEALTH

Brain fitness has become a very popular area of interest recently because scientists have discovered that the brain may actually be capable of making new cells and new connections, and also because people are living longer and wish to maintain their thinking and memory abilities. Now for you "youngsters" below the age of 65, this topic is really relevant to everyone! Studies have shown that such factors as chronic fatigue, depression, chronic stress, binge drinking and risk-taking resulting in head injury can all lead to problems in thinking, concentration and memory. The brain is the most active part of the body. There is a popular saying, "What is good for the body is good for the brain!" The lifestyle behaviors that promote good health also have benefits for the brain. The brain has 100 billion neuron cells that work in extremely complex ways, requiring support from the environment.

The Role of Diet and Genetics to Brain Health:

1. What kinds of food have benefits to brain health? The dietary factors that help control high blood pressure, diabetes and provide well-balanced nutrition are all in the interest of preserving good brain functioning too. The most important foods being investigated for brain health are those high in "anti-oxidants" that help to control cell destruction. Among the best foods are berries, oranges, raisins, dark green leafy vegetables, broccoli and carrots. Tomatoes are a potent source of dietary antioxidants. Interestingly, the potency may be increased by cooking the tomatoes (To the great delight of you pasta lovers!). Omega-3 polyunsaturated fats found in fatty fish are also thought to have antioxidant effects. Some of the highest sources are found in salmon, tuna, sardines, and mackerel.

2. What is the role of genetics in developing dementia? When a person has a family history of Alzheimer's- perhaps a brother, sister, or parent, this increases their risk somewhat of developing the disease. This risk is increased further if both parents were diagnosed with dementia. Scientists have a clearer picture of the genetic factors that contribute to "early onset dementia" (diagnosed before the age of 65 years). Genetic testing can be helpful in determining one's risk for this rare form of early dementia. There are also several genes that are being identified as contributing to the much more common "late-onset dementia" (diagnosed after the age of 65). However, even if a person is found to have a genetic risk factor for late-onset dementia, it does not necessarily lead to the development of the disease.

If you have concerns about your memory, concentration or thinking processes there are healthcare professionals who can evaluate your abilities and provide specific suggestions to help you make good lifestyle choices in the area of brain fitness. Many symptoms of apparent dementia are actually treatable when properly diagnosed.

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Wishing you good Brain Health and Total Fitness!

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JANUARY

“Cervical Health Awareness” Month

WOMEN CAN PROTECT THEMSELVES AGAINST CERVICAL CANCER

Women under age 26 who have no yet been sexually active can reduce their risk of developing cervical cancer by getting immunized against the human papillomavirus (HPV) strains that cause 70% of cervical cancers. All women who have already been sexually active, or who are older than 26, can reduce their risk of developing cervical cancer by not smoking or having multiple sex partners, and by having regular pelvic examinations and Pap tests to help find any abnormality in the cervix before it turns into an actual cancer or to detect cervical cancer early when it can be more easily treated.

The Medical Society of the State of New York reminds women that by taking these and other positive actions, they may reduce their risk of developing cervical cancer.

Cervical cancer develops when cells lining cervix- the part of the uterus or womb that connects with the vagina- become abnormal and begin to grow out of control. These cells can cause a mass or tumor. Malignant or cancerous tumors can spread to other parts of the body and be life threatening. Cervical can-

cer was once a common cause of cancer death in women in the United States, but widespread use of the Pap test has greatly reduced the number of women who die of the disease. According to the Cancer Research and Prevention Foundation, when cervical cancer is detected early, it is nearly 100% curable. Now the risk of developing cervical cancer in the first place is drastically reduced for those eligible for immunization with the new vaccine.

Risky Behaviors for Cervical Cancer

Women should be aware of the behaviors that put them at increased risk of contracting HPV and of developing cervical cancer. These include smoking; sexual intercourse, especially at a young age; having multiple sex partners, binge drinking leading to multiple sexual partners; and having a partner who has multiple sexual partners.

Regular Screening Can Be a Life Saver

There are a number of screening methods available to help detect cervical cancer and associated HPV, but the traditional Pap test or smear is still the most recommended. To perform this simple, painless screening test, a physician collects cells from the cervix and transfers the cells to a slide for examination under a microscope.

- A woman should have her first cervical cancer screening at age 21 or approximately three years after she begins having sexual intercourse, whichever comes first.

- Experts recommend waiting approximately three years following the initiation of sexual activity because transient HPV infections and cervical cell changes that are not significant are common, and it takes years for a significant abnormality or cancer to develop. Cervical cancer is extremely rare in women under the age of 25.

- Women who are at higher than average risk of cervical cancer due to factors such as HIV infection should seek expert medical advice about when to begin screening, how often to be screened, and when they can discontinue cervical screenings.

- Women should have a Pap test at least once every three years.

- Women 65 to 70 years of age who have had at least three normal Pap tests and no abnormal Pap tests in the last 10 years may, upon consultation with their physician stop cervical cancer screening.

- Women who have had a total hysterectomy (removal of the uterus and cervix) do not need to undergo cervical cancer screenings, unless the surgery was done as a treatment for cervical precancer or cancer.

For further information about cervical cancer and cervical cancer screening, contact the National Cancer Institute's Cancer Information Service by calling 800-422-6237 (800-4CANCER) or logging onto www.nci.nih.gov/cancerinfo. The Gynecologic Cancer Foundation at www.sgo.org is another valuable resource.

This information is provided by the Medical Society of the State of New York (MSSNY). For more health-related information and referrals to physicians in your community, contact your local county medical society.

♥♥♥ HAPPY ♥♥♥
VALENTINE'S DAY!

FEBRUARY
"Heart Health Month"

WOMEN AND HEART DISEASE

Though awareness about heart disease and women is increasing, there is more work to do. Women are less likely to receive the same kind of routine medical care as much as men who have the same conditions (i.e., drugs such as ACE inhibitors for chronic heart failure, medications to lower cholesterol, etc.)

Part of the problem is the traditional belief that women don't get heart disease; men do. Wrong. Another issue is that women, when having a heart attack, may experience more subtle symptoms than men. They don't necessarily have chest pain, for example, and so they dismiss their symptoms as "no big deal."

Signs of heart disease in women

According to the Food and Drug Administration's Office of Women's Health, these are some symptoms to watch for:

- Feeling very tired despite getting enough sleep. This

is the primary sign.

- Difficulty breathing, with or without chest pain.
- Feeling a burning sensation in the chest.
- Feeling nauseous, light-headed, or breaking into a cold sweat.
- Pain in the back, between the shoulders.
- Pain above the belly button.
- New, or worse, headaches.
- Feeling scared or nervous.
- A feeling of heaviness, tightness or pressure in the chest.

Because these symptoms may signal a heart attack, women experiencing any of these symptoms should contact a doctor immediately.

Steps to lower risk

Medical experts agree that women can lower their risk of heart disease by becoming better informed and taking action steps such as:

- Finding out if heart disease runs in their families.
- Discussing their risk factors with a medical provider.
- Not smoking.
- Exercising regularly. Walking is especially helpful.
- Monitoring their blood pressure and taking prescribed medication, if needed.
- Eating a heart-healthy diet and avoiding added salt.
- Reducing stress.

Note: The FDA recommends that hormones for menopause should not be used to protect against heart attack.

For more information:

The National Heart, Lung, and Blood Institute

Phone: 301-592-8573

www.nhlbi.nih.gov/health

American Heart Association

Phone: 800-242-8721

www.americanheart.org

Mayo Clinic Medical Information

www.mayoclinic.com

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MARCH

“Diabetes Alert Day”

DIABETES: A DISEASE TO LOOK OUT FOR

Although not feared as much as cancer or publicized as much as heart disease, diabetes is the seventh leading cause of death in the US. The risk of death for people with diabetes is twice that of those without. Many more diabetics are still alive but suffering from debilitating complications from the disease. The total financial cost of treating diabetes in the US is estimated to be \$100 billion. These grim statistics affect approximately 7% of the US population, who have some form of diabetes, but don't even know it.

What Diabetes Is and Who Gets It

Diabetes is actually a group of diseases that develop into several forms. They are marked by high levels of blood glucose resulting from defects in insulin production, insulin action or both. Insulin is the hormone that the body needs to convert sugar, starches and other food into energy.

Complications of Diabetes — Why Detect and Treat It

If left untreated or not treated properly, diabetes can lead to debilitating complications in every organ of the body, including the eyes (retinopathy), heart (cardiovascular disease), nerve system (neuropathy), kidneys (nephropathy) and arteries (atherosclerosis). Diabetes is the leading cause of blindness, kidney failure and lower extremity amputation. It can lead to high blood pressure, periodontal disease, sexual dysfunction and coma. Babies of women with pre-existing diabetes can be born with congenital malformations or die before or shortly after birth.

Symptoms and Tests for Diabetes

Anyone with the following symptoms should visit their physician soon to be thoroughly examined and tested because early diagnosis and treatment are essential for avoiding serious complications of diabetes.

- Excessive thirst
- Frequent urination
- Unexplained weight loss
- Extreme Hunger
- Increased fatigue
- Irritability
- Blurry vision

Risk Factors - Who Gets Diabetes

People most likely to develop diabetes are those with the most genetic (unavoidable) and environmental (often preventable) risk factors. Having close relatives with diabetes and being obese are the strongest precursors. Others most likely to be diabetic for cultural or genetic reasons are: African American, Hispanic/Latino American, Native American, Asian American, and Native Hawaiian (and in NYS, Russian immigrant). Also more susceptible are those who are: overweight, physically inactive, smoke, consume a diet high in fat, gave birth to a baby weighing more than nine pounds and/or have high cholesterol, high blood pressure, thyroid disease or malfunctioning adrenal glands.

Additional Information about Diabetes and Alert Activities

Additional general information about diabetes can be found on the websites of the American Diabetic Association (<http://www.diabetes.org/home.jsp>) and the CDC (<http://www.cdc.gov/diabetes/faq/basics.htm>)

This information is provided by the Medical Society of the State of New York (MSSNY). For more health-related information and referrals to physicians in your community, contact your local county medical society.



Happy Saint Patrick's Day!

LAUGHTER IS THE BEST MEDICINE



My husband and I divorced over religious differences. He thought he was God and I didn't.

FDIC BANK INSURANCE: Take Care in Protecting Your Assets

With the stock market suffering substantial losses, there has been an interest in moving assets into insured bank accounts during this period of financial uncertainty.

The public has been informed and warned that there are certain limits to the amount an account will be insured by the Federal Deposit Insurance Corporation (FDIC).

The general rule, before Oct. 3, was that the basic amount of insurance was \$100,000 "per depositor, per insured bank."

On Oct. 3, this amount was changed to \$250,000 through Dec. 31, 2009. The FDIC tells us that, "Deposits maintained in different categories of legal ownership can be separately insured.

Therefore, it is possible to have deposits of more than \$250,000 [or \$100,000 after Dec. 31, 2009] at one insured bank and still be fully insured."

Following these guidelines, a family of two can have \$1,250,000 insured at a single bank, by dividing up the total amount into separate accounts as follows: husband; wife; husband in trust for (pay on death to); wife; wife in trust for husband; and lastly, husband and wife as joint tenants.

Often when there is no surviving spouse, a child is named as joint tenant. It is this last category that can give rise to serious problems.

* For example, under New York law, placing another person's name on a joint bank account creates a legal presumption that such person is actually being given one-half of the account and one-half of all future deposits into the account.

Even if such a gift was not intended, it then becomes the legal burden of the original sole owner to disapprove it.

In addition to the possible legal right to half of the account, the creation of a joint account also gives the

joint owner the power, rightfully or wrongfully, to withdraw the entire account.

With a joint tenancy, upon the death of one of the joint owners, the asset becomes the sole property of the remaining owner. When one of the joint owners dies, the account becomes the absolute property of the surviving owner. Winner takes all.

The account will automatically pass to the living joint owner upon death of the other, even if a Will generally leaves everything to someone other than the surviving joint owner.

The issues I have raised about a joint account are not in and of themselves bad.

They may well be consistent with the wishes of parties and can have certain benefits such as passing property at death with minimum expense and delay.

It is very important, however, to understand the full legal effects of such a form of ownership.

If, after careful analysis, joint ownership with right of survivorship is not what is desired, it should be avoided. If the FDIC limit has been reached at a certain bank, open another (non-joint) account in another bank.

* Since laws may vary in each state, please check with a local attorney.

Donald Hecht, Esq, is a Special Needs and Elder Law attorney, with more than 35 years experience in the areas of Trust, Estate, Financial, Disability, and Health Care Planning for the elderly, persons with disabilities, and their families. Mr. Hecht is a law columnist for "Able Newspaper for the Disabled." As a parent of and a care-giver for a child with multiple disabilities, he has a special sensitivity, on a personal level, to the concerns and special legal needs of people with disabilities. He may be reached in Garden City, NY at (516) 794-7400.

UNDERSTANDING FALL PREVENTION

Older adults, the frail and disabled have many well-being issues to consider and then find solutions for achieving their best daily quality of life. Statistics from the Center for Disease Control and Prevention, as well as the National Institute on Aging, list falls as the leading cause of hospital admission. A staggering one third adults over 65 experience a fall. Those adults who have fallen previously are now, unfortunately, 2-3 times more prone to falling again in the following year.

There are many contributing factors that put falls in the top ten health and mortality risk list. We know that it all starts with BALANCE. This is a learned skill that we develop as toddlers. Your balance directly affects your MOBILITY. If you are not carrying yourself by standing straight and moving correctly, it does create joint issues which are commonly felt in our back, hips and knees. This usually means that we eventually resort to some type of medication to seek relief from joint discomfort and aches. These medications interact with other medications prescribed for various conditions as we age and this can alter the adjustment of our BLOOD PRESSURE. Blood pressure, whether high or low, can interfere with coordination, which tampers with our balance abilities. Now add in any SENSORY DEFICITS, whether it's your vision, ear problems, foot pain, discomfort or loss of sensation from circulatory problems or diabetes, and you are further vulnerable to your immediate environment. Add to this mix HOME HAZARDS, such as loose rugs, moved furniture, clutter of "to do", stacks of books, mail, magazines, laundry, family pets dodging our steps and wet slippery bathtubs, etc. and marvel that we are as sure-footed as we manage to be!

Total prevention of falling is unrealistic. However, we can train ourselves to help prevent a fall. We can walk with more caution, exercise to maintain strength

and flexibility, so that if we do fall, we recover quicker and easier. Furthermore, we can try to maintain a clutter free environment (that includes cords/wires, rugs and furnishings), better lighting indoors and outside, clarity to paths, stairway visibility with each step edged with contrast paint and double handrails, and bathrooms with grab bars, shower chairs and non-slip surfaces. We must also always be aware of medication interaction and the risk this carries for creating falls. Assistance is always available with a Personal Emergency Response System (PERS) that provides with a push of a button, the ability to summon a neighbor or relative listed for simple help, or 911 for a serious crisis.

Stephanie Pachiano, is Director of Community Relations for United Lifeline & United Home Services, a 25 year, not for profit, medical alert provider. For more information call 1-800-345-457 or visit www.unit-edlifeline.com.

A Testimonial about a Utopia Caregiver

"Thank you for sending "an angel" to help me get back on my feet. Sarah is excellent in every aspect of home health care. I especially appreciate the extra time she has taken to offer encouragement and support. I really believe that I would not have made the progress I have made, if it were not for Sarah."

Sincerely, L.B.

UTOPIA HOME CARE EMPLOYMENT OPPORTUNITIES in Home Health Care for Certified Home Health Aides, Nurses, Therapists, and Social Workers. **FREE TRAINING** to become a Certified Home Health Aide on Long Island, in New York City and in Connecticut. EOE
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