Tips to grandchild-proof your home
**Expert advice on living with diabetes**

More than 34 million Americans are living with diabetes, which means they have to monitor their nutrition, weight and behavior, take medication, work with a health care team and remain positive.

“I like people with diabetes to know there is hope,” said Dawn Noe, a registered dietitian nutritionist and certified diabetes care and education specialist at Cleveland Clinic.

Drastically increasing in the United States, diabetes often goes undetected. About 100 million people either have the disease but are undiagnosed or are prediabetic and at risk of developing it, said Dr. Robert Gabbay, chief scientific and medical officer at the American Diabetes Association.

A person can have type 2 diabetes for years without even knowing it and suffer long-term complications including heart disease or kidney disease, Gabbay said. Other serious health complications from diabetes include high blood pressure, vision loss and blindness, nerve damage, foot problems and amputation.

Many options exist for both managing and reversing type 2 diabetes, Noe said.

“Diabetes reversal/remission typically depends how long the person has lived with diabetes and if that person is still making their own insulin. We have seen diabetes reversal with weight loss surgery and now we have two studies each with two-year data to show that this can be done without surgery as well,” she said.

“It’s important to catch it early,” said Gabbay, who encouraged people to be screened for diabetes periodically. “It’s a simple blood test,” he said.

Visit diabetes.org to take a brief quiz to assess your personal risk.

Here are some tips for living with diabetes.

**A team approach**

Engage a health care team who you will be comfortable with for the long haul, Noe said. That may include endocrinologists or primary care doctors, nurse practitioners, physician assistants, and a diabetes care and education specialist.

“Diabetes care can change over time, so it’s very important to make sure you have a team of caregivers who listen to you and meet your needs. If they don’t, find one that does,” Noe said.

“Diabetes education can be as effective as a medication in terms of helping to manage blood sugar levels,” said Shannon Knapp, manager of diabetes care and education at Cleveland Clinic.

**Customize your nutrition**

“Managing blood sugar is about so much more than just food intake, but meal planning is certainly the most popular of the diabetes self-care behaviors,” Knapp said.

There is no one right meal plan that will work for everyone.

“Individualization is the key, because if you don’t like your eating pattern, it will be harder to stick with it,” she said.

“Meeting with a registered dietitian who is also a certified diabetes care and education specialist is an important step in finding the best meal plan for you.”

**Commit to fitness**

“Exercise is often as good or better than medication and can be used daily,” Noe said. “In fact, diabetes professionals always say if we could put it in a pill, we would.”

“Just like meal plans, the best activity plan is one you enjoy so you can stick with it,” Knapp said. “So if starting an activity plan is one of your goals, find an activity that you enjoy, start slowly and build as you go.”

**Connect with others**

It’s common for people to struggle with a diabetes diagnosis. About 30% report feeling depressed, Gabbay said.

“Reach out and connect with others. You are not the only one. Don’t hide the fact that you have diabetes,” he said.

“There is no right way to approach this change, and it’s absolutely normal to go through the stages of grief related to diagnosis of diabetes. However, seeking out specialists in diabetes care will give the person with diabetes tools and options,” said Noe, who recommends mental health care to all her patients: “It is equally as important as nutrition and exercise for diabetes.”
For many people, getting a good night’s sleep can be a challenge at the best of times. For people struggling with sleep issues like insomnia, the uncertainty of the pandemic is only making things worse.

Prioritizing sleep, sticking to a routine and cutting back on unhealthy habits can help stop the tossing and turning, said Dr. Vaughn McCall, chair of the Department of Psychiatry and Health Behavior at the Medical College of Georgia at Augusta University.

About 60% of people ages 30 to 64 report experiencing symptoms of insomnia, according to the National Sleep Foundation.

Those numbers may be increasing because of COVID-19, said McCall, who is researching the subject. Reports out of Asia and Europe, where the virus was first detected last year, show that seems to be the case, he said.

More than one-third of health care staff who responded to the outbreak in China during its peak suffered from insomnia as well as feelings of depression and anxiety, according to a first-of-its-kind study published in Frontiers in Psychiatry.

A good night’s sleep benefits a person in several ways. Most notably it gives the brain its ability to stay alert, process information and keep a person safe, McCall said.

It’s important to note the difference between insomnia and sleep deprivation, McCall said. Sleep deprivation occurs when a person literally does not have enough time to sleep, such as a someone who works back-to-back shifts but still has to take care of children when not working.

Insomnia is the problem of getting to sleep and staying asleep despite having ample opportunity to do so, McCall said.

“Stress and anxiety lead to insomnia, and there’s plenty of that going around,” he said.

Fear of catching the virus, financial constraints, concerns about loved ones and losing one’s job are just some of the stressors that can lead to insomnia, McCall said.

A psychiatrist or other health care professional can help a person manage stress and anxiety, which is beneficial because when anxiety is in overdrive it makes it more difficult to sleep.

“Anxiety does not present a solution to problems,” McCall said.

Insomnia is known to worsen mental health problems, and “is a potent risk factor for suicide,” he said.

To avoid the frustration and misery of insomnia, try to maintain a sleep-wake routine even if your work/home/life schedule has changed, McCall said. The loss of a job or working from home produces a laxity that can affect your sleep schedule, he said.

Avoid the use of excess alcohol, especially imbibing during the day.

Watch caffeine intake, which also affects sleep.

Get some exercise. “People who are fit sleep better,” McCall said.

If you have to wake during the night to use the bathroom, decrease fluids a couple hours before bed.

People affected by osteoarthritis should consult their doctor if pain is inhibiting sleep, McCall said. A non-narcotic pain medication may help.

“Make an effort to prioritize sleep, which is related to life expectancy,” McCall said. The sweet spot is about seven hours a night for adults, he added.
Caring for grandchildren can be joyful and exhausting, but it’s most certainly a responsibility. It’s easy to forget how to keep them safe from potentially dangerous, everyday household items like cleaning supplies.

“You often think about car seat safety, gates on stairs and how to prevent drowning or burns, but what about laundry room safety or storage of products used in the kitchen?” said Brian Sansoni, senior vice president of communication, outreach and membership at the American Cleaning Institute.

For those who normally don’t have children roaming the house, it can be easy to forget what necessary precautions should be in place where cleaning products are stored, including the kitchen, bathroom, garage and laundry room.
Accidents can happen quickly

“Although the laundry room is usually home to many cleaning products and can be one of the busiest spots in the house, it can easily go overlooked when it comes to safety,” Sansoni said.

Almost 70% of parents with children younger than 4 said their laundry room is accessible to their children, and more than 50% said they do laundry while their children are in the same room, according to a recent survey conducted by the American Cleaning Institute.

“Children are naturally curious and tend to explore with their hands and their mouths,” Sansoni said. “Accidental exposures to liquid laundry packets and other cleaning products can happen in a split-second, but can be easily prevented by practicing simple safety habits during the daily routine.”

The cleaning, household and hygiene products we depend on will do their jobs safely if stored and used properly, Sansoni said.

“All hygiene, cleaning and disinfecting products should be used as directed ... It is up to all of us to use them properly and store them safely to prevent unintended injuries. Staying healthy also means being safe,” he said.

Read the labels

A recent report by the Centers for Disease Control and Prevention found that about 1 in 3 adults used chemicals or disinfectants unsafely while trying to protect against COVID-19.

“Clearly there’s a lot of improvement we want to see here,” Sansoni said. “When using any cleaning product, you should always read and follow the label directions for effective results and to ensure safe handling.”

Store up and out of sight

One trend to avoid is storing cleaning products like laundry packets in clear containers or glass jars.

“While this can be tempting and aesthetically pleasing, it is vital to keep cleaning products stored in the original packaging with labels intact, so you have that information in the event of an emergency,” Sansoni said. “Product labels are designed with easy-to-use instructions and safety protocols that are quick to reference.”

All cleaning products should be stored up and out of sight and reach from young children, preferably in a cabinet with doors.

“If you don’t have a cabinet available, place all cleaning products in their original packaging into a larger bin and store them where those at risk won’t be able to see it,” Sansoni said.

Notice important safety instructions that could be useful to poison control centers should an accident occur, Sansoni said.

“Be sure to completely close and seal all cleaning products during and after use to avoid any accidental exposures,” he said.

Some other helpful safety tips include:

• When purchasing liquid laundry packets and household cleaners, have them bagged separately and put them away in their designated safe storage spot — out of sight and out of reach — as soon as you get home.

• Have the Poison Help Line (800-222-1222) handy and call immediately if an accidental exposure occurs.

• Conduct routine safety checks in the home to prevent accidents, particularly ahead of a visit from a grandchild or younger family members.

For more information, check out the American Cleaning Institute’s Packets Up! campaign, cleaninginstitute.org/liquidlaundrypacketsafety.

“All hygiene, cleaning and disinfecting products should be used as directed ... It is up to all of us to use them properly and store them safely to prevent unintended injuries. Staying healthy also means being safe.”

BRIAN SANSONI
he gender gap in cardiovascular health does not exist, according to a huge global study published in The Lancet, but experts at the American Heart Association say there’s more to it.

Women are less likely to have heart disease than men and are less likely to die from it, according to new research of more than 160,000 people in 21 countries. The study is the first to document people from the community, rather than just hospital patients, and examined the risk factors, use of treatment, incidence of heart attacks and strokes, and mortality in participants following them for an average of 10 years.

“Contrary to recent reports, our study based on a global population finds that current treatment practices in cardiovascular care do not lead to worse outcomes in women,” said Marjan Walli-Attaei, first author of the study and a research fellow at the Population Health Research Institute of McMaster University in Hamilton, Ontario, Canada.

It didn’t matter if women had or didn’t have a previous heart attack or stroke. It also didn’t matter where women lived around the world or their economic status. The main result of the study may seem surprising, but not when considered in light of the study’s other findings, Walli-Attaei said.

“Women have healthier lifestyle habits and are more likely to undertake primary prevention strategies,” she said. The results are surprising to Dr. Suzanne Steinbaum, American Heart Association volunteer medical expert and Go Red for Women spokeswoman. Cardiovascular disease is the No. 1 killer of women annually in the United States, she said.

“Cardiovascular disease has long been thought of as a man’s disease. Women have been largely overlooked when it comes to understanding how cardiovascular disease and stroke may impact them differently. Today we know more: Women may not have the same cardiac event symptoms as men do. There is considerably more understanding of the differences between men and women, including disease progression and treatment response. While strides have been made to close gender and racial disparities in research, women and minorities continue to be underrepresented in the U.S. and globally,” Steinbaum said.

Women are more likely to use prevention strategies to reduce their chances of getting heart disease such as controlling blood pressure, eating a healthy diet and maintaining weight, the study found. Invasive strategies such as procedures to open a blocked coronary artery or bypass surgery are more often used for men, the study found. This can partly be explained by the fact that fewer women than men have the type of extensive atherosclerosis, a chronic inflammatory vascular disease, that requires medical interventions.

As opposed to a gender bias, this likely reflects differences in health care needs and is appropriate, Walli-Attaei said.

The typical “Hollywood heart attack” symptoms, such as gripping chest pain, are not always accurate for women, Steinbaum said. Signs and symptoms of a heart attack include:

- Uncomfortable pressure, squeezing, fullness or pain in the center of the chest lasting more than a few minutes or going away and returning.
- Pain or discomfort in one or both arms, the back, neck, jaw or stomach.
- Shortness of breath with or without chest discomfort.
- Breaking out in a cold sweat, nausea or lightheadedness.

Regardless of gender, take heart health seriously. “Improving cardiovascular disease prevention and treatment should be vigorously pursued in both women and men,” Walli-Attaei said.
In the future a simple eye test may be able to screen for Alzheimer’s disease before symptoms appear.

Researchers are in clinical trials in several locations in the United States and around the world testing different devices to develop more accurate and earlier diagnostic tools, said Maya Koronyo-Hamaoui, associate professor of neurosurgery and biomedical sciences at Cedars-Sinai in Los Angeles.

The leading cause of dementia, the presently incurable Alzheimer’s disease is characterized by a severe decline in memory and mental ability serious enough to affect daily life. On the rise in the United States, Alzheimer’s affects more than 5.5 million people including about 10% of adults 65 or older, according to the Alzheimer’s Association.

While current treatments can’t prevent, stop or reverse Alzheimer’s, an early diagnosis can help lessen symptoms like memory loss, allow people to participate in clinical trials and prioritize their health.

At Cedars-Sinai researchers found three abnormalities within tiny blood vessels in their retinas: high death rates for pericytes, a type of cell that lines the vessels; low levels of PDGFR, a protein receptor that promotes development and growth of cells; and accumulation of toxic amyloid-beta forms. Among many functions, pericytes help regulate blood flow and maintain the barrier that protects the brain from toxins in the blood.

To catch Alzheimer’s early, a noninvasive test would scan the eye’s retina, which is tissue located at the back of the eye that is directly connected to the brain.

“Researchers are regarding the retina as a window into the brain. The retina shows changes similar to those in the brain during Alzheimer’s disease,” said Swati More, an associate professor at the Center for Drug Design, College of Pharmacy, University of Minnesota.

Researchers at the Center for Drug Design developed a retinal imaging technique for detection of early changes caused by Alzheimer’s disease. Originally designed as a screening tool for early Alzheimer’s therapeutics, the hyperspectral imaging-based method could follow the disease progression in the retina of mice with Alzheimer’s and later in human patients.

Blood vessel defects and the accumulation of amyloid-beta deposits are changes linked to Alzheimer’s, which emerge in the eye before occurring in the brain, Koronyo-Hamaoui said. They can be detected decades before symptoms of dementia occur, she said.

Looking at the retina is incredibly easier and less invasive than looking at other parts of the central nervous system because it isn’t shielded by bone, Koronyo-Hamaoui said.

Current methods for detection of Alzheimer’s are invasive and expensive. These tests include PET and MRI scans and/or lumbar puncture and cost between $6,000 and $12,000.

“Our eye test could be conducted in fraction of that cost, in hundreds rather than thousands, but these calculations won’t be conducted until the method is approved for clinical use,” said Bob Vince, director of the Center for Drug Design.

The exam uses a specialized low power microscope with a camera just like the ones routinely used by ophthalmologists. It will take about five to 10 minutes and have no side effects.

“We hope that this test will be a part of a routine eye exam in the upcoming years,” More said.

In addition to helping identify at-risk individuals, the test will allow opportunity for lifestyle changes and therapeutic intervention, if available, Vince said.
Community Wellness Program

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