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Gym membership has its privileges

Choosing the right exercise environment keeps you active and motivated.

Gyms can be intimidating with all the booming noise, young bodies, and high-tech machines. But for older adults, a gym membership can be one of the best means to maintain an active lifestyle.

“More than ever, gyms are developing programs that are tailored for seniors, such as chair and balance exercise classes, water aerobics, Zumba, yoga, and even meditation classes,” says Maija Sanna, MD, a specialist in geriatric medicine at UCLA.

In addition to helping seniors stay healthy, a gym can encourage more social activity. You can meet new friends and find like-minded people who can keep you engaged and motivated.

Finding the right gym

No two gyms are the same. There are many factors to consider when choosing the one that best fits your needs. Here are some items and questions you should consider before joining.

➔ **Location:** Choose a gym close to your home. The farther you have to travel, the less likely you are to go. Also, try to choose a gym near your regular destinations, like the grocery store and your favorite retail stores. “This way you are more likely to tag a workout along with your everyday outings and errands,” says Dr. Sanna.

Also, consider a gym that has more than one location. Some franchises allow their members to visit any of their locations, which can keep you from being bored with the same setting. Plus, this ensures you have access to a gym when you travel.



Today's gyms offer many programs designed specifically for seniors.

➔ **Hours of operation:**

When do you like to work out? Make sure the gym's hours of business and classes fit your schedule. Many gyms are now open 24 hours, while others open early and close late. Some have reduced hours on the weekends.

➔ **Members:** You cannot control who else joins a gym, but you should feel relaxed and comfortable in your exercise environment. Are there many people around your age—or do they cater to a younger demographic? Note the overhead music—it will likely be targeted to their main clientele.

➔ **Personal trainers:** Ask at potential gyms if they have personal trainers who specialize in older clients. “Make sure their trainers are certified by one of the nationally recognized agencies—National Academy of Sports Medicine, American College of Sports Medicine, National Strength and Conditioning Association, or American Council on Exercise,” says Dr. Sanna. Many of these also offer additional certifications in senior fitness. Inquire if any of the trainers have this kind of advanced training.

➔ **Cleanliness:** Are disposable towels available to wipe off the equipment after each use? Do they offer hand sanitizer dispensers? Are the locker rooms and showers clean and properly maintained?

➔ **Equipment:** Are there enough cardio machines to go around, or do members have to sign up to use them? Is there a time limit? Also, any out-of-order signs could be a red flag for outdated machines. Notice whether or not instructions and pictures are posted on the machines, or if staff is expected to assist you.

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your subscription, check your
account status, or contact a
customer service representative.**Diet soda linked to increased risk of heart attack and stroke**

A recent study from the University of Iowa says that drinking two or more diet drinks a day can raise the risk of heart disease in healthy postmenopausal women. The research analyzed the diet drinking habits of almost 60,000 women. It found that those who consumed a 12-ounce beverage twice a day were 30 percent more likely to have a cardiovascular event, such as heart disease, heart failure, heart attack, or stroke. Fifty percent were more likely to die from these conditions compared to women who drank only one to three diet sodas per month. The experts noted that there is only an association between the diet drinks and cardiovascular problems, and there may be other factors that may explain the connection. For instance, the diet soda drinkers in the study tended to have a higher prevalence of diabetes, high blood pressure, and higher body mass index. These findings complement another new study that found that consuming more diet soda is directly linked to greater abdominal obesity in adults age 65 and older. In this research, over the nine-year follow up, the waistlines of the daily diet soda drinkers increased 3.16 inches compared to just 0.80 inches for non-drinkers. One theory for this effect is that the artificial sweeteners in diet sodas trick the body into consuming more calories by blocking normal feedback mechanisms so the brain is slow to signal feelings of fullness, says lead researcher Ankur Vyas, MD, of the University of Iowa. This can lead to excessive weight gain and thus increase one's risk for cardiovascular problems. Dr. Vyas adds that it is too early to recommend people no longer drink diet sodas, but it could be a signal to at least curb your regular intake.

Modest, yet regular, workouts is beneficial to seniors new to exercise

If you are new to exercise, or returning after a long layoff, which is better: shorter, more intense exercise, or a longer, less intensive workout? For older adults, it may be the latter. The recommended amount of weekly exercise for adults is 30 minutes, five days a week (or 150 total minutes per week), which has been shown to reduce the average risk of death by 30 percent. A study from the European Society of Cardiology found that among 1,000 subjects age 65 and older, those who met or surpassed the 150 minutes per week had a 57 percent lower risk of death than those who exercised less. However, those who did low levels of physical activity—about the equivalent of the low end of brisk walking—during their 150 minutes had a 51 percent lower risk of death than those who did higher-intensity workouts. “Seniors may want to focus on putting in the time at first and not worry too much about whether they work hard enough,” says lead researcher David Hupin, MD. If you have trouble finding those 30 minutes per workout, Dr. Hupin recommends beginning with a simple target: at least 15 minutes, five days a week, and work up from there.

Some atrial fibrillation patients receive unnecessary blood thinners

Research in *JAMA Internal Medicine* (June 1, 2015) found that about one-quarter of all atrial fibrillation (AF) patients who were at the lowest risk of stroke received unnecessary blood thinners from cardiology specialists. AF is an abnormal heart rhythm characterized by rapid and irregular beating, and can increase one's risk of heart failure and stroke, according to the American Heart Association. AF patients who are at risk for thromboembolism—the formation of blood clots that break loose and plug blood vessels in the lung and/or brain—are often prescribed blood thinners like warfarin. However, because their use carries risk of bleeding, they often are not recommended for AF patients who are at a low risk for stroke. In the *JAMA* study, the researchers reviewed approximately 11,000 AF patients and discovered that about 25 percent of low-risk patients were prescribed blood thinners. In addition, older and overweight patients without stroke risk factors were more likely to be prescribed the drug. The experts were not able to determine the reason for this, but senior author Greg Marcus, MD, MAS, believes the physicians had good intentions and were aware of the downside of the blood thinners among these groups, but may have taken a better-safe-than-sorry approach. “We think the message to withhold blood thinners in these lower risk patients is just not well promulgated,” he says. ■

Music to your mind

Learning an instrument can reverse the aging effects on the brain.

Research has shown that learning to play a musical instrument, no matter your age or ability, can be one of the best (and perhaps most enjoyable) ways to sharpen declining cognitive skills.

“Playing music not only improves memory abilities, but can provide a mood boost as well. As you hear music, your brain gets flooded with pleasure-inducing dopamine that produces a calming effect,” says Gary Small, MD, of the UCLA Semel Institute and author of *2 Weeks to a Younger Brain*.

Musical notes

Learning any new skill can stimulate the thinking process, but a musical instrument simultaneously works multiple brain networks. At any one time, you have to engage memory and recall, hand-eye coordination, and listening skills—no matter if you tickle the piano keys, strum a guitar, or blow into a flute.

Here is a summary of the main benefits of playing music:

Improve memory and hearing:

Scientists from Northwestern University examined musicians age 45 to 65 and found that their auditory memory and ability to hear speech in noisy environments were better than those of non-musicians of the same age. The reason, say the researchers, is that music training “fine tunes” the nervous system as you become focused to play music, remember how you did it, and repeat the process.

“Music places a high demand on the sound processing centers of the brain, thus priming those areas for the perception of speech,” says lead researcher Nina Kraus, PhD. “Active engagement with music—that is, playing and performing music—is necessary to see these effects.” Just as watching sports cannot make you fit, listening to music cannot improve listening and memory skills.

Lower stress: It has been well documented that listening to music reduces anxiety and depression, but this effect can be even more profound if the music emanates from you, as it creates a jolt of instant gratification. “There is no comparison to the rush you feel when you hit the right key or note and say to yourself, ‘Hey, I made those sounds!’” says Dr. Small.

Research from the Mind-Body Wellness Center also has found that playing a musical instrument lowers stress more than other traditional relaxing activities, like reading.

Slow aging: Playing music may even curb the physical effects of aging. A five-year study showed that the level of human growth hormone, or HGH, increased 90 percent in seniors who were given keyboard lessons. HGH is an essential chemical that helps slow many aging conditions, like osteoporosis, loss of muscle mass, and aches and pains. HGH decreases with age and can drop by as much as 50 percent after age 40.

Never too late

You are never too old to take up a new instrument. Experts from the University of South Florida recently studied the impact of individual piano instruction on adults between the ages of 60 and 85. After six months,



No matter your age or ability, you can find an instrument that fits your lifestyle and interest.

WHAT YOU CAN DO

Take these steps before you make some music:

- **Choose** the right instrument. The best is the one you are excited to learn. Don't pick something you might regret after a few months.
- **Rent** or borrow at first. Music shops often rent instruments, or borrow from a musician friend before making a committed purchase.
- **Work** around your limits. A weak grip or arthritis may not work well with a guitar or violin, nor will a wind instrument if you have breathing issues.
- **Find** a teacher. Lessons can get you on the right path.
- **Have** fun. Don't focus on making perfect music. Instead, embrace the joy of making music no matter how it sounds.

those who had received piano lessons showed more robust gains in memory, verbal fluency, the speed at which they processed information, planning ability, and other cognitive functions, compared with those who had not received any lessons.

Did you take music lessons as a child? If you stuck with it for a while, there is a good chance your skills, and thus the benefits, can return if you take up an instrument again, according to another Northwestern University study.

Scientists measured the electrical activity in the auditory pathways of adults age 55 to 76 as they responded to the synthesized syllable “da.” Although none of the subjects had played a musical instrument in 40 years, those who had trained the longest when they were younger had the most efficient auditory function.

Humans have been making music since our cave-dwelling days. It is still one of the simplest and most rewarding pleasures that can strengthen both the mind and body. And it does not matter what you play, or even if you never come close to mastering it. In this case, the musical journey is the main destination. ■

The lowdown on low-carb diets

Cutting carbohydrates can fuel weight loss and other health benefits.

Carbohydrates tend to be seen as nutritional “evils” that should be avoided. Yet you need carbs. They are the main source of energy that runs your body’s systems and fuels every type of movement.

The problem is not carbs, but rather how many you consume. “Carbs are calories, and consuming too many without utilizing them is what leads to weight gain,” says Arlene Johns, RD, a dietitian with UCLA Health System.

This is why low-carb diets are so popular—and effective—for weight-loss. Cut the carbs and you lower your overall calorie intake.

“As we get older, we tend to be less active, and do not need as many calories,” says Johns. “In this way, low-carb diets are helpful for seniors who may battle weight-gain issues. Yet, the focus should be not on just lowering carbs, but also eating the right kinds.”

Good carbs, bad carbs

You want to replace simple carbs, like snack food, sweetened cereal, white pasta and rice, and fruit juice, for complex ones, like fruits and vegetables, beans and legumes, and whole grains. For instance, oatmeal for cereal, and quinoa for white rice.

A LOOK AT CARBOHYDRATES

Low-carb diets often limit carbs to 100 grams (g) per day.

Food	Serving Size	CARBS (g)
White or wheat	1 slice	15 g
Bagel	1 medium	60 g
Muffin	2 ounces	30 g
Rice (cooked)	1 cup	45 g
Oats (cooked)	½ cup	14 g
Corn	½ cup	45 g
Lentils and Beans	1 cup	40-45 g
Potato (baked)	1 small	15 g
Berries	1 cup	20 g
Apple	1 medium	25 g
Milk (whole, low-fat, skim)	1 cup	12 g



You need a certain amount of daily carbohydrates to support your body’s vital systems.

A low-carb diet also means you will likely increase your intake of protein, which helps seniors maintain declining muscle mass as they age. But just as with carbs your choice of protein matters, says Johns.

“Instead of animal protein, which includes high amounts of fat and cholesterol, opt for sources of vegetable protein like lentils and beans, such as black, kidney, and garbanzo.”

A downside to a low-carb diet is a possible lower intake of natural fiber. Constipation is common among seniors, so make sure to include plenty of high-fiber carb selections, like squash, sweet potatoes, broccoli, and carrots, says Johns.

More than weight loss

Low-carb diets offer other health benefits besides weight loss. For instance, research from the American College of Physicians found that low-carb diets had a positive effect on heart health, especially when compared with low-fat diets. After a year on a low-carb diet, obese men and women lost more weight, lowered their fat mass, and reduced their overall risk of cardiovascular disease compared to the low-fat diet group.

A recent study from Duke University compared a low-carb diet with the weight-loss drug orlistat among 146 obese people. Both approaches helped the subjects lose approximately 10 percent of their body weight, but 47 percent

WHAT YOU SHOULD KNOW

Check with your doctor before trying a low-carb diet, as it may have the following effects:

- **Increase** your risk of hypoglycemia if you take insulin or oral blood sugar medications.
- **Raise** your risk of a B-vitamin deficiency from cutting back on fortified grains.
- **Lead** to calcium loss in the urine from consuming high amounts of protein.

of the low-carb group were able to decrease or discontinue their blood pressure medication.

Manage your carbs

Carbohydrates should make up 45 to 65 percent of daily calories for adults, according to the Institute of Medicine. There are no adjustments for seniors, yet experts suggest older adults aim for the lower range if they are more sedentary and the higher range if they engage in regular physical activity.

Can you go too low? Johns says the average healthy senior should not dip below 45 percent. The exception would be if you have pre-diabetes or diabetes, in which case you could go as low as 40 percent carbs.

Besides making the switch to healthier carbs. One way to manage your carb intake is to limit them to about 100 grams per day. (See table, left, for food examples.)

The exception is when you exercise, in which case you should increase your daily amount by five to seven grams per kilogram of body weight. For instance, a 150-pound person would need 340 to 475 grams of carbs for general fitness that lasts less than an hour.

If tracking carbs is difficult, another option is to adjust your portions. “For example, have one slice of toast instead of two. Stick to only one serving of pasta, include more salads, and try open-faced sandwiches,” says Johns. “They are small changes, but they can easily add up and lower your overall carb intake without much effort.” ■

Thinkstock

The finer points of acupuncture

This ancient therapy can be a new way to manage pain.

For more than 2,000 years, acupuncture has been used in Traditional Chinese Medicine to treat all kinds of physical and mental ailments. As its popularity continues to grow in the West, seniors are finding that this simple therapy may be the best solution to long-term aches and pains.

“Acupuncture often works to address the source of the pain instead of just focusing on reducing the severity, which can be a temporary solution,” says Lawrence Taw, MD, of the UCLA Center for East-West Medicine. “In this way, it can be a natural therapy to manage and even eliminate common pain issues without the need for medication or invasive treatments.”

Opening the pathways

With acupuncture, hair-thin needles are inserted into specific points that fall on certain pathways in your body called meridians. This moves energy, or qi (pronounced “chee”), that may be blocked due to illness or other imbalances. When the energy flows freely, the body’s nervous, endocrine, digestive, and immune systems can function at optimum levels.

Traditional science has only begun to explore how acupuncture works, but most of the available research involves its role in pain management. Here are some of the highlights:

- ➔ **Chronic Pain:** One of the largest studies to date on acupuncture—a meta-analysis of 29 studies involving approximately 18,000 patients—found acupuncture effective for soothing chronic pain and is a reasonable alternative option to traditional treatment.
- ➔ **Osteoarthritis:** A 2014 review of 12 trials showed that acupuncture patients had significant pain reduction, greater functional mobility, and increased quality of life compared to a control group.

- ➔ **Migraines:** Patients who suffered from regular migraines reported reduced frequency, severity, and need of pain medication after 18 acupuncture sessions of 30 minutes each, according to a 2014 study in the *Journal of Alternative and Complementary Medicine*.
- ➔ **Peripheral Neuropathy (PN):** Eighty-two percent of people with PN—weakness, numbness, and pain in the hands and feet—reported improvement in their symptoms after six weekly sessions.

A gentle needle

During your initial visit, the acupuncturist will conduct an evaluation of your health history, including your current symptoms and lifestyle habits. He or she also will examine your tongue’s shape and color, and measure the rhythm and quality of your pulse.

The number of needles and locations during a treatment depend on the ailment. They stay in place from five to 30 minutes. The needles are so thin that most people do not feel them being inserted. Other times, you may feel an initial tingling or electrical sensation that quickly fades.

“Often the fear of the unknown is why people may initially resist acupuncture,” says Dr. Taw. “But after the first treatment they know what to expect and are usually fine.”

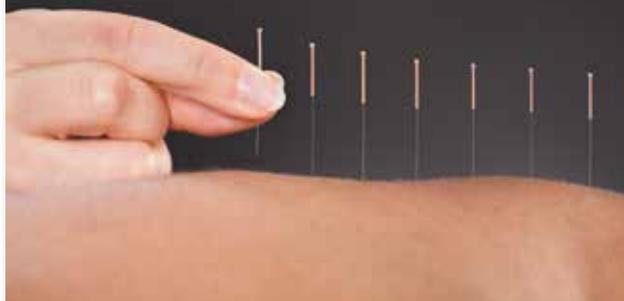
If you are hesitant about needles you can try “no needle” acupuncture where the points on the meridians are stimulated with manual pressure called acupressure. Another option is transcutaneous electrical nerve stimulation, or TENS, where electrodes are placed on the skin’s surface.

WHAT YOU CAN DO

Tips before your first appointment:

- **Check** your insurance: Many private insurers cover some of the cost. Medicare does not cover acupuncture.
- **Prepare** for out-of-pocket costs: Prices can range from \$60 to \$120 per session.
- **Look** for proper credentials: Make sure the acupuncturist is certified by the National Certification Commission for Acupuncture & Oriental Medicine (NCCAOM) and/or licensed by their state acupuncture board.
- **Find** an acupuncturist: Search at acufinder.com and aaaomonline.org.

Acupuncture uses hair-thin needles to stimulate points on the body in order to release blocked energy and promote healing.



The number of overall treatments can vary from one to two per week for one to several months. For acute problems, fewer visits are often needed. Reactions to acupuncture are diverse. Some people may experience significant relief after the first session, while others feel the effects after many weeks.

Acupuncture is well tolerated by most people, adds Dr. Taw, and has few, if any, side effects. Like with any other kind of medical treatment, though, it may not work for everyone.

Acupuncture is often used as a last resort when other treatments have failed, says Dr. Taw, but as the therapy becomes more mainstream, seniors should consider it earlier in their course of treatment. “They may be able to eliminate the need for regular medication, or even surgery.” ■

Choosing a home health care agency

Preparing before you need one can save time, effort, and money.

Eventually, you may need to enter the hospital for surgery or some other procedure that hinders your ability to take care of yourself at home right away.

You no doubt will be preoccupied about the surgery, so you may not think about what comes after. But this is when you have to consider your potential need for home health care.

“You may be in the hospital only for a few hours, or perhaps a rehab center for several days, and before you know it you will be home,” says Michele Eslami, MD, with the UCLA Geriatrics Program. “If you are not prepared for your recovery, complications or acute changes could arise, like infections and pneumonia, and you could be back in the hospital.”

Understanding home health care

Home health care is covered under Medicare part A and possibly private health insurance.

If you have Medicare your doctor can activate home health care as soon as you are discharged from the hospital or rehab center. It will begin within 48 hours and can continue up to 60 days. After that, you can request an extension, but it will require another evaluation and approval from your doctor.

The level of home health care depends on your condition and needs. Again, your doctor can outline the anticipated assistance you will need. An initial at-home evaluation with the home health care agency provides a detailed schedule of services for the 60-day period.

For example, home health care visits can range from 30 minutes to two hours, three days a week. Basic services may include bandage changing, checking blood pressure, monitoring tolerance for medication, and performing rehabilitation sessions, like physical and speech therapy.



Home health care professionals help manage your medications and perform therapy sessions.

Choosing an agency

Patients often think they do not have control over their home health care, but it ultimately is their decision on which agency to use. There are thousands of agencies in the country. Most offer the same services and can range from franchises to mom-and-pop operations. So how do you choose? Your doctor is the best source.

“He or she may not endorse a specific agency, but instead will offer suggestions based on previous experience,” says Dr. Eslami. “Since doctors work with agencies on an ongoing basis, they can tell you the ones they have had positive experiences with, and ones about which former patients have spoken highly.”

Still, the final decision is up to you. Here are some guidelines to follow when making your choice:

- Is the agency licensed by the state? Most states, but not all, require agencies to be licensed and reviewed regularly. Reviews might be available through your state health department.
- Is the agency certified by Medicare to meet federal requirements for health and safety? If not, ask why.
- Is the agency rating available? Find out at medicare.gov.

Keep in mind that you can always change agencies if you are not satisfied, says Dr. Eslami. “If after a week or so you are not happy with your

WHAT YOU SHOULD KNOW

There are three levels of assistance offered by home health care agencies:

- **Medical Professionals:** A nurse, physical therapist, or doctor who provides specific skilled care and medical services.
- **Home Health Aides:** People who have received formal training and have passed a competency test, like certified nursing assistants (CNAs) or personal care aides. They often are supervised by a nurse or other medical professional.
- **Home Care Aides:** Assist with household chores and personal care. There is no certification required, but many home care aides are employed by agencies and often supervised by a licensed nurse or social worker.

therapist or nurse, contact the agency and ask for a new person. If you do not like how the agency conducts business, recruit another one.”

Beyond basic service

Depending on your condition and length of recovery, you may need additional support. Patients are expected to be mobile before they are discharged from the hospital or rehab center, but you still may require assistance with daily chores like bathing and dressing, light housework, and running errands. Medicare does not cover these services, but many home health care agencies do at an extra cost.

What care you require depends on your situation and progress of recovery. For instance, a hip or knee replacement may hinder your mobility or ability to sit or stand for long periods. Heart surgery patients are often restricted from driving for several weeks.

“If you feel you may need these services, inquire about them before agreeing to an agency,” says Dr. Eslami. “This way you will know what they can offer and the cost beforehand and not run into any surprises.” If the prices do not fit into your budget, you should make arrangements with family and friends to help out where and when needed. ■

Food intolerance—or allergy?



Nearly everyone has eaten something that did not agree with them. But other times your reaction may be more severe and frequent, which may be a sign of a food intolerance or even an allergy. Here's how to tell the difference and what to do about it.

Food intolerance

This is a response from the digestive system. The body may lack a specific enzyme needed to properly digest a specific ingredient in certain foods. Examples are lactose in dairy and gluten in wheat. Common symptoms include the following:

- Nausea
- Gas, cramps, or bloating
- Stomach pain
- Vomiting
- Heartburn
- Diarrhea
- Headaches
- Irritability or nervousness

Food allergy

An allergic reaction occurs when the body mistakes a food ingredient—usually a protein—as harmful and defends itself using antibodies. The most common food allergies are shellfish, nuts, fish, eggs, and milk. Symptoms can range from mild to severe. They include:

- Rash or hives
- Nausea
- Cramping or stomach pain
- Diarrhea
- Swelling
- Shortness of breath

Even a tiny amount of food will trigger an allergic reaction. In contrast, intolerances are dose related—symptoms may not occur unless you eat a large portion or eat the food frequently.

Test taking

Most intolerances are identified through trial and error. For instance, record when symptoms appear and what you ate and then look for commonalities. Another method is an elimination diet. You remove any suspect foods until you are symptom-free. You then reintroduce the foods, one at a time, until symptoms reappear, with the goal to identify the problem food and the amount.

Skin or blood tests can confirm an allergy, as can elimination diets. If you suspect you may have a food intolerance or allergy see your doctor. ■

Senior gyms—cont. from page 1

➔ **Classes:** Review their schedule of classes. Do they offer senior-modified options, or senior-specific classes? To appeal to older clients, many gyms offer modified yoga, spinning, and Pilates classes with a lower intensity. Do they offer chairs and other props and supports for people with physical limitations. Also, are classes included with your membership?

➔ **Accessibility:** If you have any medical problems that affect your mobility in any way, look for a gym that offers easy access, like ramps or elevators, to all the workout areas.

Negotiating fees

Cost is probably the biggest deciding factor when selecting a gym. Seniors are eligible for many discounts, but you may have to ask.

If they don't offer a discount, try to negotiate one. The clubs want your business, and it's on them to make an effort to work with you. You may also be eligible for a discount through your insurance company, as many policies now offer a discount or reduced rate on premiums, or a direct rebate for joining certain clubs.

For instance, many Oxford Health Plans and Aetna participants are entitled to up to 30 to 40 percent off monthly dues at some national chains. Blue Cross Blue Shield provides fitness-related discounts with up to 60 percent savings in certain states. Silver Sneakers is a popular gym program for seniors, which is offered at many national fitness centers and bundled in Medicare-advantage plans.

Make sure to review the payment schedule before signing. Do you pay

each month, or do you have to commit yourself to an entire year? (You often get a discount if you sign an annual contract.) Can you cancel without penalty? Also, ask whether the senior discounts apply only to the initiation fee, or to the monthly membership dues.

Find additional savings

Keep in mind that it's often more economical to join a gym at the end of the month when fitness centers are trying to reach monthly membership goals. Different times of the year are better than others, too. The winter months are the busiest time for new memberships as people move indoors to exercise. So the end of the summer may be the best time to get a deal.

It is also worth checking out smaller facilities since they have to compete with the fitness giants and thus may offer more substantial discounts. "Also inquire with your local parks and recreation center, which may offer significant discounts for seniors to participate in their programs," says Dr. Sanna. ■

Doctor's call

While seniors who have chronic medical problems, such as heart disease, COPD, diabetes, and peripheral vascular disease, will benefit from physical activity, it is important they check with their doctors before beginning any exercise program. "Your doctor

will guide you on what exercises will be best for your health and how to best approach an exercise program," says Dr. Sanna.



Editor-in-Chief
Bruce A. Ferrell,
MD, Professor of
Medicine and
Geriatrics

Q I've heard that the average American senior is dangerously low in magnesium. What makes this mineral so important?

A Magnesium is about as critical as a nutrient can be, with roles played in hundreds of chemical processes in the body. It serves in nerve, muscle, and bone function, protein synthesis, energy production, and blood pressure, to name only a few. After age 50, women need approximately 320 milligrams (mg) and men 420 mg every day. Unfortunately, our ability to fully absorb dietary magnesium decreases as we age. Also, medications such as antibiotics, diuretics, proton pump inhibitors, and osteoporosis drugs can interfere with magnesium absorption. In addition, the excretion of magnesium begins to increase with health issues, such as diabetes and gastrointestinal problems. High intake of alcohol also interferes with the body's magnesium absorption. Deficiencies of this mineral can result in serious health issues, like stroke, heart attacks, atherosclerosis, and kidney disease. Talk with your doctor about magnesium supplements, limit your alcohol intake, and add more magnesium to your diet. Top magnesium-rich foods include spinach and other dark green leafy vegetables, squash, seeds (pumpkin, sesame, and sunflower), brown rice, and beans like black, navy, and pinto.

Q Recently, I have become preoccupied with worries, even about the smallest things. Sometimes I feel so upset my heart pounds and my palms sweat. Is this normal?

A Unless you have reasonable and specific reasons for your concerns (a traumatic event, money troubles, discord with family and/or friends, etc.) you should confer with your doctor as soon as possible. An accurate diagnosis would require more information, but what you describe sounds like an anxiety or panic disorder, which is NOT a natural part of aging. Studies estimate that anxiety or panic disorders affect between three and 14 percent of older adults in a given year and tend to strike more women than

men. Chronic health problems, depression, and change in marital status (divorce, widowhood) are all common triggers for short-term distress as well as anxiety disorders. In addition, as we age, our brain processes information differently than when we were younger, so even common aspects of daily life that never before bothered you may now cause great stress. Do not try to play down or ignore your symptoms. Seek assistance from your doctor or a mental health therapist who can help you discern whether your feelings are justified by a recent event and are likely short-term, or if you have indeed developed an anxiety disorder.

Q I have heard about biologic drugs. What are they and what conditions do they usually treat?

A Biologic drugs, biologic response modifiers, or just "biologics" are genetically engineered drugs that use live cultures to diagnose, fight, and/or prevent specific diseases. Polio and measles vaccines are good examples of biologics, which use either live, dead, or portion samples of the bacteria or virus itself to create antigens necessary for the immune system to fight the disease. Other common uses for biologics are allergy shots, treatments for psoriasis, Crohn's disease, and ulcerative colitis. Most pertinent to seniors is the assistance biologics can provide aging and weakened immune systems. Biologics are now commonly used to interrupt the immune system response that causes the painful inflammation of rheumatoid arthritis. You may have heard such treatment referred to as immunotherapy. Another form of this is the use of biologics in cancer treatments. Some cancers have the ability to suppress the body's immune system or even slip past it unnoticed. Genetically engineered biologics can enlist the immune system by awakening it to the presence of these invading cells. As with many drugs, biologics can produce a host of side effects, such as flu-like symptoms, skin rashes, blurry vision, muscle weakness, weight loss, and shortness of breath. ■

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