

Planning the Care of Your Aging Parents

If your parents are in their golden years, keep in mind that even gold can lose some of its glow with the inevitable effects of old age — and sooner or later, older loved ones will need assistance.

"It's never too early to start planning for their future care," says Virginia Morris, author of *How to Care for Aging Parents*. "Many children of aging parents wait until there's a crisis, and then they're left scrambling for mediocre options. Everyone — especially those who live far away from their parents and work full time — can benefit from being prepared and planning far ahead."



Advance planning means:

- Making sure legal documents have been drawn up, including an up-to-date will, a durable power of attorney, a living will, and a health care proxy.
- Researching the housing options and services available in your parents' community.
- Discussing with your loved ones how you can help with their future housing, financial and medical-care needs.
- Asking them about growing old — "what are their concerns, their worries, what's important to them, how can you help them?" says Ms. Morris.

"Don't parent your parent," she urges. "The point isn't to control your parents' life, but to help them maintain control. Your role is to give them as much autonomy and independence as possible."

When it's time to act

One day, all the signs may point to the need for you to actively step in to assist your parents.

Telltale signs include:

- Your loved ones start losing weight.
- They stop washing their hair or clothing.
- They drink more alcohol.
- They leave piles of unpaid bills on their desk.
- They let food grow moldy in the refrigerator.
- They start walking unsteadily.

"Trust your instincts," Ms. Morris says. "Anything that strikes you as 'Hmmm, is this OK?' probably isn't OK."

Important first steps

Immediately open a line of communication with your parents' doctors so you can discuss your concerns. And if you live far away, obtain a copy of your parents' local phone book so you can contact care providers and other resources.

Defining your limits

Many adult children find their first steps into caregiving responsibilities are like walking into quicksand. If you don't manage your time well or haven't planned in advance, you can become mired in never-ending obligations, such as daily chores and care, handling legal or financial issues or lining up health-care providers.

"You need to set limits," says Ms. Morris. "Establishing limits doesn't mean you don't love your parents or that you can't take good care of them. But you're not going to be any good to them if you're depressed, angry or sick — you have to take care of yourself."

To do this, Ms. Morris suggests you:

- Decide what you can reasonably do to help, then stick with that plan. If you decide you'll visit your mother twice per week, help her manage her finances, and investigate local resources, then that's what you should do. Get help for other needs as they arise.
- Accept help early on — from relatives, friends, neighbors, churches and synagogues, senior centers or home-care agencies. "Set up a whole support network — don't be the only person doing this," says Ms. Morris.
- Take care of yourself. Get exercise, get enough sleep, pay attention to your diet, and go to support-group meetings for caregivers.

"People often push themselves until they become burnt out and angry at their siblings, and their work starts to suffer. I have seen several times where caregivers ended up in the hospital because they were so wiped out," says Ms. Morris. "This can be a consuming job — it's crucial to take care of yourself."

Krames Staywell

What You Can Do About Hand-Me-Down Genes



If you have a parent or sibling who has heart disease, cancer or some other serious ailment, does that mean you're doomed to the same fate?

Growing volumes of research underscore the role that genes — the inherited material that forms your body's blueprint — play in some diseases.

While inheriting certain genes might increase your chances of contracting a disease, experts say it's rarely a sure thing. Often, your lifestyle and environment — including what you eat and breathe — can join with disease-prone genes to make a potential disease a reality.

Avoiding risk factors

"For example, you might inherit an enzyme deficiency that could make you more prone to stroke," says Eric Raps, M.D., director of the Stroke Center at the University of Pennsylvania Medical Center. "Still, you're fine — until you start smoking, adding a strain that your subtly flawed genetic makeup can't handle."

Some people who smoke never suffer a stroke, of course. But smoking is the kind of risk factor that people with a family history of stroke — and sundry other ailments from heart disease to lung cancer — should steadfastly avoid.

Know your family history

"Being aware of your family history tells you about what diseases you may be at special risk for and gives you a chance to head them off or control them," explains Michael Thun, M.D., the American Cancer Society's director of analytical epidemiology.

Researchers think most cancers, for example, result from "two hits". You inherit one normal gene from one parent and one cancer gene from your other parent. There are two major types of cancer genes, oncogenes and tumor suppressor genes. You might have one type of cancer gene, but your normal gene protects you from cancer. If lifestyle and environmental factors knock out the normal gene, you can develop cancer from that one cell.

Dr. Thun likens the process to a slot machine. If you inherit one or more flawed genes, you begin life with one or more of the tumblers already set "at the right, or wrong, place," he says. "There's less involved in finding the rest of them."

Improving the odds

You can help your body's efforts to undo any genetic damage:

- Follow a low-fat diet.
- Get plenty of exercise.
- Don't smoke.
- Avoid or limit alcohol.

That's good advice for anyone, it's particularly true if you have a family history of certain ailments, such as heart disease, certain cancers, and diabetes. It's even more true if close relatives developed those diseases young.

Follow your doctor's recommendations for screenings that could pin down your risk and detect warning signs or the early stages of a disease. Some examples:

Heart disease

Researchers believe heart disease has its own as-yet-unidentified genetic component, but it's hard

to separate it from other inherited traits. Family histories of high cholesterol, diabetes, or high blood pressure are risk factors for heart disease.

You have a significant family history if your father or brother developed heart disease before age 55 or your mother before age 65.

To assess your risk, blood screenings look at cholesterol, triglycerides (the most common form of fat), and other factors. Blood pressure checks detect hypertension. Electrocardiograms and stress tests are checked if you are at higher risk for heart disease or if you are having symptoms.

"I get asked, 'Why bother to try to better define what your risk is?'" says Daniel Rader, M.D., director of preventive cardiology at the University of Pennsylvania Health System. "But for heart disease, if you know your risk there are so many things you can do to prevent it."

For a healthier heart, lower your cholesterol, exercise, and reduce your fat intake to maintain your ideal weight, seek treatment for hypertension or diabetes, and control your stress. If you smoke, stop.

Cancer

Rule of thumb for many cancers: The younger your parents or siblings were when they developed the cancer, and the more members of your family who have contracted the cancer, the greater your risk.

Colorectal cancer: Familial adenomatous polyposis (FAP), which causes colon polyps by the hundreds, accounts for only about 1 percent of colorectal cancer. But FAP almost invariably leads to colorectal cancer by the 40s. For a person who has relatives with FAP, your doctor may recommend screening as early as the age of 10. If you test positive for the genetic test, having your colon surgically removed is recommended.

Breast cancer: If either your mother or sister has had breast cancer, your risk increases two to three times, or up to six times if both have had it. And if a woman carries one genetic mutation (the BRCA1 or BRCA2 genes) recent studies show her risk of breast cancer by age 70 is more than 50 percent, compared with 7 percent for the general population. Nonetheless, only about 5 to 10 percent of breast cancers seem to be caused by genetic mutations. If you have a family background, talk to your doctor about early screening.

Prostate cancer: Some investigators believe as many as 50 to 70 percent of all men over 80 have at least microscopic traces of prostate cancer. You need to be particularly on guard, however, if a close relative died of prostate cancer before age 60.

The American Cancer Society says a low-fat diet that includes five servings of fruit and vegetables, especially tomatoes, may help prevent prostate cancer.

Diabetes

If one identical twin has type 1 (or insulin-dependent) diabetes, chances are 30 to 50 percent the other twin will develop it. If one twin gets type 2 diabetes (which usually occurs after age 40 and

can sometimes be controlled without insulin) there's a better than 50 percent chance the other twin will follow.

If you have a parent or non-twin sibling with type 1 diabetes, your chances of joining them are no higher than 5 percent. But if your parent or non-twin sibling has type 2 diabetes, your chances of joining them are double that (anywhere from 7 to 15 percent).

Tackle risk factors you can do something about: obesity and a sedentary lifestyle.

Blood tests can help

It's not too fanciful to envision the day when a simple blood test can probe deeply into your genetic makeup, predicting your future health. With near certainty, you'll know the diseases you'll get or face higher risk of getting.

Already, tests can identify carriers of inherited diseases that require defective genes from both parents, such as sickle-cell anemia and Tay-Sachs disease. Amniocentesis (an analysis of the amniotic fluid surrounding a fetus) can uncover such defects as Down syndrome.

As a 15-year effort to map the body's genetic structure continues to pinpoint genes responsible for diseases, the possibility of identifying persons at risk — and perhaps developing gene therapy to eliminate risk — rises.

But that's tomorrow. For now, the multitude of genetic, lifestyle and environmental factors believed to cause many of the major diseases resist simple genetic testing.

"Gene therapy is a long way away," says Bernard J. Gersh, M.D., chairman of the American Heart Association's Council of Clinical Cardiology. "To what extent genetic testing becomes standard practice, and when, remains to be seen."

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Become a Communication Pro



Being a good communicator doesn't just involve good speaking skills; it's about being a good listener, too. In order to communicate better in all areas of your life, use the following tips to help you develop your abilities and connect with others more effectively.

In the office setting, you can be a more effective communicator with fellow employees by:

Showing people they can trust you by not embarrassing anyone.

Avoiding judgment and sticking to the facts.

Giving praise and feedback regularly.

Asking for clarity when you're confused: "I want to make sure I've understood you correctly. Do you have an example of what you're speaking about?"

Restating the person's point to check for understanding: "What I've heard you say is that you're..."

Use body language to show you're listening (eye contact, nodding your head, etc.).

Ask for Responses

It's important to leave time and space available so that you can allow others to share. By asking for others' opinions and thoughts, you'll show that you care about their feelings. As a result, colleagues and others may come to you more often about concerns or ideas. Ask the following questions to show your interest:

"What do you think about that?"

"Was that easy to understand?"

"Do you feel ok about this?"

Communication Basics

Whether you're communicating one-on-one or within a group:

Try not to make assumptions around what the other person already knows. Make sure the person knows all the information and has a basic understanding of what you are speaking of.

Use appropriate language when speaking to another person. The person you are speaking to will have a unique background, skill set, age, and level of experience. Try to make it so he or she can best understand you by using clear, direct language that takes these characteristics into consideration.

Pick a quiet and appropriate place to converse. If the conversation is about a personal matter, make sure the place is private.

When you're speaking to someone, it's not just your words that they are observing. Think about the messages you are sending through tone of voice and body language:

Tone of voice:

Are you making eye contact?

Does your voice sound urgent or hesitant?

Are your arms folded?

Do you sound nervous or are you stammering?

Are you leaning forward aggressively or looking relaxed?

Do you sound light-hearted or belligerent?

Are you fidgeting or obviously distracted?

Body language:

If your body language and tone of voice send a different message than your words, try to find out why. Are you really saying what you mean?

Active Listening

Respond to the person who is talking by giving active feedback like, “Uh-huh,” or “Please, go on.”

A small nod of your head while a person is talking also reaffirms that you are listening.

Practice the tips above to help develop your listening and speaking skills. Communication skills take time and practice, but the more you work at it, the more effective you’ll be.

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