

Boomers, Elders, and More E-Newsletter

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<http://vanderbilt.edu/child-family-center/>

Message from the Coordinator

As Valentine's Day approaches and the thoughts of many people turn to cards, flowers and candy as expressions of love for that special someone, I want to take a moment to consider the daily manifestation of love as demonstrated in the lives of family caregivers.

Caregivers come in all shapes and sizes: spouses, family members and/or friends. Some assume the caregiver role gradually while others may find themselves suddenly thrust into the role as a family caregiver. Either way, the responses of caregivers initially focus on emotional attachments. A sense of love and devotion becomes the basis for the caregiving/ care receiving relationship; however, the dynamics of the ongoing relationship will be affected.

The changes in the caregiving relationship can cause the role as a family caregiver to become complicated. The complexity of caregiving is one reason why family caregivers deserve admiration. Caregiving is not an easy task, but you are learning to adapt as a family caregiver and adjust to all the responsibilities it entails.

This month, and every month, I want you to know you are appreciated.

Source: http://cumberlink.com/news/local/neighbors/elder_care/elder-care-the-love-of-a-caregiver/article_b62fd627-f8cb-50fb-9ab2-e02d37e4ae6b.html



News Highlight

Too few older adults tell doctors about memory loss: Study Experts believe it's often a taboo subject due to fears of dementia



Do you worry that forgetting names, or where you put your keys, might be a sign of impending dementia? If you're like most older Americans, you don't bring this up with your doctor, a new study shows.

Researchers who looked at federal government data on more than 10,000 people found that in 2011, only 1 in 4 adults aged 45 or older discussed memory problems with a health care professional during a routine checkup.

In fact, the likelihood that a person would admit to a memory problem in a doctor's office visit actually declined with advancing age, says a team lead by Mary Adams, of On Target Health Data in West Suffield, Conn.

"Routine checkups are a missed opportunity for assessing and discussing memory problems for the majority of older adults," Adams said in a journal news release.

Experts agreed that the stigma around memory loss and dementia may hold people back from discussing these issues with their physicians.

"Because dementia is unfortunately an all too common illness, older adults are quite familiar with its heralding signs and symptoms, which they have painfully observed in a long time neighbor or a family member," said Dr. Gisele Wolf-Klein, director of geriatric education at Northwell Health in New Hyde Park, N.Y.

"This reality leads to denial and avoidance, both on the part of the patient and the physician," she said. "As long as we don't mention it, maybe it's just normal aging."

But mentioning memory troubles is important, because it doesn't necessarily have to herald dementia. Wolf-Klein said. "Memory loss may well not be due to dementia, but another highly treatable condition, such as depression," she noted.

And if it is linked to dementia, recognizing that fact early is crucial, she said.

"Patients can promptly meet with family members and elder law advisers, who can best help them in making individualized decisions for their care, rather than rely on last-minute decisions completed by family members at a time when patients now lack capacity," Wolf-Klein said.

Dr. Bruce Polsky is chair of the department of medicine at Winthrop-University Hospital in Mineola, N.Y. He acknowledged that talking about "memory loss and the possibility of the early development of dementia is a difficult discussion for both the physician and patient, mostly because of the long-term implications."

But early diagnosis of dementia can be important, he said.

"Even mild memory loss associated with early Alzheimer's disease may be improved with some of the medicines now available, although these medications do not stop the progression of the disease," he said. "Lifestyle modifications, such as smoking cessation, may also be of value in some cases."

"Although it is difficult for individuals to assess whether their own subtle memory loss is 'normal' or not, open discussion with their physician and, in some cases, testing may result in answers that could potentially lead to treatment and improved functioning," according to Polsky.

Source: https://www.nlm.nih.gov/medlineplus/news/fullstory_156953.html

Tips for Organizing a Medical History

By Kathy Porter (from caregiver.com)

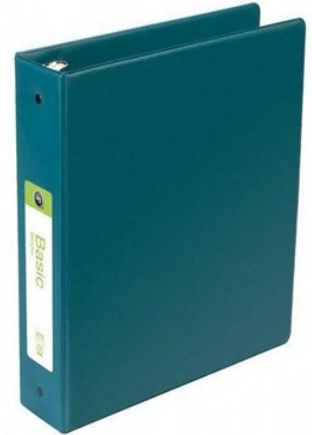
A trip to the emergency room made me realize why caregivers are advised to organize health information. Like many caregivers, I share the task of going with my loved one to appointments. My sister usually takes our mom to the dentist, audiologist and optometrist. I take Mom to her physician, dermatologist and podiatrist. We cover for each other when work or travel demands it.

I have a folder for paperwork that is portable and easy to maintain. It isn't just for emergencies. We take it to every doctor visit. Anyone who has the folder can see when Mom had her last flu shot and what medications she takes. We can all see when all medical appointments are scheduled. Even my brother, who lives at a distance, could answer medical questions if he had to take Mom to the doctor while visiting.

Information to collect

You probably have most of this information readily available. If not, begin with what you have and add information as you can. Useful information to collect includes:

- Health insurance cards, Medicare cards, and so on
- Appointment reminder cards from health care providers
- A list of medications including dosages, frequency, date started and reason
- A medical history
- A list of emergency contacts, relationship, addresses and all phone numbers
- A sheet for recording the date of visits, the provider and any tests performed or instructions
- Any special logs such as blood pressures readings, blood sugar levels or symptoms
- A copy of a healthy care proxy, advance directives or living will
- A power-of-attorney, if one is used



Easy organization

Our system has to be easy to update because, like most caregivers, my family is stretched pretty thin. Here are some tips for collecting and organizing information: Use a pocket folder or small three-ring binder that will hold several pages.

- Use a bold color for the cover, so that it is easy to distinguish from other papers
- Keep the folder in a handy location. Make sure every potential caregiver knows where it is kept
- Label the front boldly and clearly—EMERGENCY MEDICAL INFORMATION
- Use top loading, clear sheet protectors to hold papers. These make it easy to remove papers for photocopying or for handing to a healthcare worker
- Pick up a business card from each healthcare provider you see. Cards usually contain the name, specialty, address, phone and fax number. Slip business cards into vinyl page protectors meant to hold photos, baseball cards or disks.
- Each time you make an appointment, take the reminder card or jot the appointment details on a 3x5 card and slip into a page protector
- When you add any information to a document, put the date at the top of the page to show how current the data is
- List an out-of-state emergency contact to be used in case of a widespread disaster
- Photocopy important pages and cards and keep them elsewhere for extra protection
- Search the Internet. Many websites provide blank forms for medical history, medication and other health records.

What should you keep in a medical history?

- Names of all physicians
- Known allergies or reactions to medications
- Medications including over-the-counter medicines, vitamins and herbs
- Health conditions and date of diagnosis
- Dates of most recent exams, tests and immunizations
- Dates and reasons for hospitalizations
- Dates and details of surgeries
- Dates and length of major illnesses
- History of smoking and use of alcohol
- Location of living will or medical directives
- History of exposure to dangerous conditions or hazards
- Family history including illnesses or conditions of parents and siblings
- Cause of death of parents and siblings and their age at death

source: http://www.caregiver.com/articles/print/organizing_medical_history.htm

Caregiver Self-Care Tips

Being a caregiver can be a full-time job, and can take a toll on even the most resilient person. Taking care of yourself is just as important as taking care of your loved one and can help you better handle your caregiving responsibilities.

To avoid feeling overwhelmed, stressed or burned out, take these steps to preserve your own health and well-being.

Share the Care—The tasks a caregiver undertakes are wide ranging from grocery shopping and cooking to changing bandages, giving injections and calming an agitated person. Determine which responsibilities you can meet on your own, and which ones may require additional help. Ask family members, friends and neighbors for specific help.

Stay informed—Learn about your loved one's diagnosis and treatment to get a better idea of what to expect. Speak with a doctor, nurse practitioner or social worker who can recommend resources or organizations that offer support.

Be healthy—Your own health is extremely valuable. Keep up with your own healthcare-team appointments, checkups and screenings. Remember to take your medications. It is important not to neglect your daily health: stay physically active, eat a healthy diet and get enough sleep. Give yourself the gift of a walk in the fresh air every day.

Join a support group—Share your feelings in a supportive environment. Discussing the challenges and rewards of caregiving can help you feel less alone. Face-to-face, telephone or online support groups can offer advice and tips, and help you to build bonds with others who are in similar situations.

Stay connected—If you are spending a lot of time with a spouse or aging parent, it is easy to become isolated and perhaps depressed. If you experience any signs of depression, be sure to seek professional help. Employees of Vanderbilt can contact Work/Life Connection (EAP) at 936-1327.

Don't feel guilty if you need to get away. Give yourself credit - it can be difficult to be a caregiver. Reward your efforts by taking some time each day to do something you enjoy. Your health will thank you for it.

Source: <http://www.jfswm.org/elder-care/caregiver-self-care-tips-new>



Upcoming Events

Christy Horner with The Bill Wilkerson Center will address safety concerns related to the older driver. Topics will include aging and driving, warning signs, and specific methods for broaching this topic as a family *before and when* safety concerns arise. Horner will present evaluation services provided by the Bill Wilkerson Center's Driver Rehab Program and discuss ethical considerations that may arise when driving restrictions are recommended. She will also offer transportation alternatives. This month's Boomers, Elders, and More Lunchtime session will be held on Wednesday, February 17, 2016 from 12 p.m. to 1 p.m. in Medical Center East 8380A. Please feel free to bring your lunch.

Vanderbilt Family Resource Center's Caregiver Support group will be held on March 9, 2016 from 12 p.m. to 1 p.m. in Medical Center East Room 8380A. The caregiver support group is a time to share information and openly discuss your problems without judgment, to process your feelings, and to hear others talk about their experiences.

If you need information or resources to assist you in your caregiving role, the Vanderbilt Child & Family Center offers elder care resources to faculty and employees of Vanderbilt at no cost. For assistance, contact Stacey Bonner, Family Services Coordinator, at 936-1990 or stacey.l.bonner@vanderbilt.edu.

