

Elderly Expression

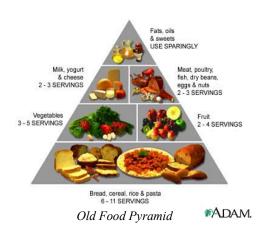
Paula J. Carter Center on Minority Health & Aging Lincoln University Cooperative Extension

SPRING 2005

A New Pyramid For Health

Have you noticed recently that the traditional food pyramid, citing what we should eat to be healthy, has literally been turned on its side by the U.S. Department of Agriculture? The new pyramid supports President Bush's HealthierUS initiative, which is designed to help Americans live longer, and healthier lives. Along with the graphic changes to the pyramid, the USDA has introduced

recommendations from





New Food Pyramid

the 2005 Dietary Guidelines for Americans. The new guidelines offer advice for people of all ages, as well as how food can reduce the risk of major chronic diseases. The pyramid was developed to carry the message of dietary guidelines and to make everyone aware of the benefits of improving nutrition and increasing physical activity.

As you can see, the lines in the old pyramid go across, forming a foundation. The new pyramid's lines go up and down, and maybe most importantly, they can be modified for each individual. There is also a man climbing stairs next to the pyramid to remind us of the importance of daily exercise. Like almost everything else in today's society, using the internet enhances the new

pyramid. The USDA website, MyPyramd.gov, gives you a chance to learn how to take control of your own diet by suggesting menus and portion sizes, and it even provides encouragement. The new technology makes it easier for all of us to play a significant role in our health. In the future, the USDA plans to include features that will allow visitors to ask questions about specific food choices, discuss portions and adjust those choices, when necessary, to meet their daily needs.

Take steps now to improve your health by visiting MyPyramid.gov.

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From the desk of Treaka Young...

My name is Treaka Young, and I am your new coordinator at the Paula J Carter Center on Minority Health and Aging. As an African American and living in the inner city, I had the opportunity to witness many disparities and health concerns that minorities are faced with first hand. Cancer claimed the lives of both of my parents and since then I have dedicated tireless hours to make sure Missourians are educated about the early signs and symptoms of the illnesses they may be facing. I moved to the Jefferson City area in 1986 to attend Lincoln University, since then I have received a Bachelor's Degree in Sociology with a minor in Social

Work. I also earned my Master's of Arts in Sociology and Criminal Justice, as well as a Master's of Education in Guidance and Counseling.

Most of my work experience consisted of working with people. I have always had a strong desire to help people. When I learned of the opportunity to be the Coordinator at the Paula J Carter Center on Minority Health and Aging, I knew it was one I was perfect for. All of my combined life experiences have prepared me for this position. When I speak of the area in which I was raised, the illnesses that claimed the lives of my parents, I say that to reiterate that I not only have the educational background, but the life experiences that have prepared me to lead this Center in the direction of our Mission which focuses on the aging population, minority disparities and health concerns. Our goal is to be a greater resource for you; however we need your help. We first ask that you contact the Paula J Carter Center; by telephone, email or the address that has been provided at the back of this newsletter and let us know how you feel about our past efforts and give us ideas about future topics you would like to see included in the next newsletter.

Now I put the challenge to you. Take the survey on the next page. Mail in your stories about your life, and some of the health challenges you, or someone you know are facing, good and bad. I am sure you are not alone. Let us know how you want to receive the newsletter, and send us the name of at least 5 individuals that you think would enjoy reading Elderly Expression as well. Our goal is to get a response, by June 15, 2005 from at least 100 people with ideas of topics and/or stories to include in the next newsletter. Future newsletters will feature stories and topics selected from your responses.

I look forward to hearing from you.

Treaka

Every quarter, we at the Paula J Carter Center on Minority Health and Aging, publish this newsletter. It's not something we want to do just for the sake of publishing a quarterly newsletter. We want you to be able to use the newsletter. Use it as a resource for information, for entertainment, for advice, or to learn of new advances in medical technology.

To get to where you want it to be, we need to know where the newsletter is right now. SO...

Are you reading the Elderly Expression Newsletter regularly? Y N What information are you getting from the Elderly Expression Newsletter?

What would you like to see in the Elderly Expression Newsletter?

How would you like to receive the Elderly Expression Newsletter?

By mail On-line By E-Mail

We know there are a variety of ways to send people information these days, so we would like to offer you a variety of ways to express your opinion about the newsletter.

YOU CAN:



Phone in your opinion

1-573-681-5527

Mail your opinion:

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ATTN: NEWSLETTER

Visit our Website at:

www.luce.lincolnu.edu/PJCCMHA.htm



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Helping You to Help Yourself

When it comes to fantastic programs for Missouri's Seniors Improving Access to Healthcare for Missouri's Underserved Minority Seniors (IAHMUMS) takes the cake. It provides people, aged 50 and older, information on health, nutrition, exercise, disease prevention as well as free health

screenings. Community Outreach Workers from the Paula J Carter Center on Minority Health and Aging are the foundation of the program. The Outreach Workers provide the information, arrange the health screenings, and work through Centers or even though home visits. Food preparation is just one of the educational subjects handled by the Outreach Workers. There are handouts, including this newsletter, as well as fact sheets that are all designed to improve the health of Missouri's underserved population. Currently, the IAHMUMS program is focusing on Callaway, Cole, Moniteau, Pemiscot Counties, and St. Louis City. Ollie Hall is the Outreach Worker for St. Louis

City. She can be reached at (314) 867-4915. Sandra Jones handles Pemiscot County in the Bootheel. Sandra can be reached at (573) 931-1232. Cole County Outreach Worker, Shirmere Singleton, can be reached through the Paula J Carter Center, (573) 681-5530. If you are interested in participating, or you know of a senior group that would be eligible, please call the Outreach Workers. The IAHMUMS program is free to all participants.

It is our special duty, that if anyone needs our help, we should give him such help to the utmost of our power.

Cicero

Philosopher

MIMA Cancelled

Another fantastic program in the state has been the Missouri Institute on Minority Aging (MIMA).

For 10 years, the Institute has provided the opportunity for professional care givers, students, and the general public to get together on pertinent issues affecting Missouri's aging minority population. Unfortunately, due to budget cuts, the year's MIMA has been cancelled. We at the Paula J Carter Center on Minority Health and Aging hope to begin plans for a future MIMA. We appreciate all your support, and we will keep you informed on future meetings. Thank you!

Take good care of yourself

Despite advances in both medicine and race relations, there is still plenty of room for improvement. Recent studies from the American Heart Association show that when it comes to heart health, African Americans and Hispanics are less likely to get the



newest treatments, know about prevention, or know the warning signs of heart disease. The AHA wants to bring a national focus to the problem, part of which is a scarcity of well trained specialists who are Hispanic or African American. One study showed that blacks with constricted cardiac blood flow were less like than whites to get the newest medications, less likely to be offered smoking cessation programs, and less likely to undergo catheterization or bypass surgery. What does this mean for you? If you are not satisfied with the answers you are getting from your doctor, keep asking questions. Take along a friend or family member and encourage them to ask questions as well. Read up on any diseases

Remember, if you ever need a helping hand, you'll find one at the end of your arm...

Audrey Hepburn Actress, Activist

your doctor says you suffer from. If you are not feeling relief from pain, or are not satisfied with your communication, seek the counsel of another doctor. It's your body, and no one knows you like you do.

...that includes your medicine!

There may be a couple of reasons for this problem, but in the end, none of them are good for Missouri's Senior citizens. A recent survey has found that two out of every

five senior citizens are not following their doctors' orders when it comes to taking their prescription medicines. The survey shows that part of the problem may be cost, another part inconvenience. The survey also found that the multiple prescriptions that many seniors are given make it difficult for them. Despite new programs offering seniors affordable medicines, about one quarter of the respondents to a recent survey reported foregoing drugs because of high costs. That cost situation is part of the background that led to changes in both state and federal programs for senior's medications. Another factor is medical side-effects. Many respondents claimed the medicines made them feel worse, and weren't helping. Some felt they were taking too many pills. If you feel you are being over-prescribed, talk to your doctor. If you feel the medicine is not helping, talk to your doctor. If you feel you can't afford your medicine, there are several programs available, including the Senior Rx program from the state, programs through Medicare and Medicaid on the federal level, and there are numerous independent pharmacies and drug companies offering programs. In the end, despite any justifications, medicine should be taken as prescribed by your doctor.

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Brain Cells

Another Alzheimer Advance?

There is continued news in the ongoing effort to cure Alzheimer's disease. The first attempt at gene therapy appears to delay the worsening of the disease in some of the people in a recent test. More research is needed to see whether the experimental treatment, which requires surgery on the brain, actually helps. Doctors took skin cells from patients in the early stages of Alzheimer's and modified genes to secrete a protein found in healthy brains called nerve growth factor, or NGF. Through the surgery, the NGF producing cells were attached directly to the Alzheimer's-injured spots. During the test, one

patient died from internal bleeding on the brain. The brain tissue of the participant who died actually had new growth protruding from the Alzheimer's-injured cells. Doctors remain cautiously optimistic about the results, clearly stating it would never be practical to perform brain surgery on millions of

patients. If the gene therapy approach works, the study says interest could be revived in finding easier methods of attaching the NGF cells. Already 4.5 million Americans have Alzheimer's, and the projections are as high as a staggering 14 million Americans suffering by 2050.

No More Tears

When it comes to popular vegetables, the onion may not be the most well-liked, but it could be seeing a increase in desirability. According to new research, onions may help

prevent osteoporosis. In terms of medicine, onions have already been recognized for their health benefits as the richest source of a potent antioxidant which helps fight heart disease and cancer. The study will be published next month, but researches at

the University of Bern, Switzerland have found that onions may prevent the loss of bone density. Past studies have shown that the nutritional recommendation to fight osteoporosis was limited to taking calcium and vitamin D. This new study, along with some other recent studies, suggests that there are benefits from also eating more fruits and vegetables.

It is hard to imagine civilization without onions!

Julia Child Chef

It Really Is The Coffee Keeping Us Up!

We may have already suspected it, but that cup of coffee in the evening may be keeping us from a good nights sleep. Researchers at the University of Texas Southwestern Medical Center have found that caffeine blocks a compound that triggers brain cells to sleep. The compound, adenosine, is released by



the brain after prolonged activity, then spreads outward from the brain, causing neural activity to slow down. However, caffeine interrupts the process of spreading. This breakdown can also leave people awake when they don't want to be. Sleep is a needed activity, and gives the body, and the brain, a chance to rest and stay fit. Insomnia can cause problems during the day, such as sleepiness, fatigue, difficulty concentrating, and irritability. Insomnia tends to increase with age and affects about 40 percent of women and 30 percent of

men. SO, give up the afternoon and evening cups of tea and coffee, have a glass of water...and a good night's

sleep.



Sleeplessness Can Lead To Falls

A recent study from the University of Michigan, Ann Arbor shows that senior citizens There is a time for many words, and there is also a time for sleep.

Homer
Author, Philosopher

with insomnia have an increased risk of falling. The study was done with elderly nursing home patients from 437 facilities in Michigan. Of the more than 34 thousand participants, 43 percent fell during the 6

month study. 2.5 percent sustained hip fractures. Analysis of the data shows that seniors with untreated insomnia were 55 percent more likely to have future falls. Those with treated insomnia, despite taking sleeping pills, had a 32 per cent higher risk. The research is calling for further studies to confirm the findings and determine whether appropriate insomnia treatment can protect against future falls.

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