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The Benefits of P-SARP Wellness Program

The P-SARP program, is designed for 60's to over-70's seniors and the goals are multi-faceted:

- 1 To discover a new, healthier way of eating, to lose weight, lower bad cholesterol, and combat certain medical issues like hypertension, diabetes type II, heart problems and certain cancers.
- 2 To learn moderate exercises (without the use of machines or weights) that will help in mobility, balance, well-being and longevity.
- 3 To take these new life-style lessons home and encourage their continuation, if desired, with the assistance of a personal physical fitness trainer, to live longer, better.

Investment in a P-SARP Wellness Program is rewarding on a long-term basis. The founder and executive director of P-SARP changed his own life nearly 20 years ago. He began running, attended fitness programs, and learned about proper nutrition management. He is now a certified personal fitness trainer, has run marathons, and regularly runs or walks several miles per week. Juan O'Callahan developed the P-SARP regimen to help seniors emulate his life-style.



Juan will be conducting 5-day P-SARP retreats at Mercy Center at Madison October 18-23 and October 25-30; \$896 all-inclusive; (spouse/partner 50% discount); for reservation call 860 234-5538 or 203 245-0401. www.mercybythesea.org/

Fear of the Fall

William Lynders, M.D.
Lecturer, P-SARP Wellness Weeks

We all fall, some more than others. A toddler discovering his newfound mobility falls frequently - rarely is there injury of consequence. When an older person falls, injury is more common. Sometimes the fall can be life-style altering. In this article, I will examine three questions:

Why do people fall?

What happens after the fall?

Can we prevent falls or minimize the injury?

Why do older people fall? As one ages, normal changes occur in the body. Several organ systems conspire to make us vulnerable. The neurologic system, comprised of the brain, nerves and sensory organs, suffers from slowed reflexes and reaction time, decreased proprioception, or the sense of joint position critical to balance, and poor vision - particularly in dark environments. In the muscular skeletal system, a partnership of bone and muscle, we see declines in muscle strength and bone density. These two system changes result in less agile coordination and reduced ability to compensate for sudden stress placed on the body. For example, the missed curb edge results in a fall. Weakened bone structure results in a fracture.

When illness impacts the older individual's organ systems they become even more impaired. Frequently, Emergency Department doctors find urinary tract infections, pneumonia, congestive heart failure, or poorly controlled diabetes as the inciting cause behind a fall. Medications used to treat disease can have unfortunate side effects or interactions with other medications. Drugs can impair cognition, balance or the cardiovascular system's ability to maintain proper blood pressure control. A sudden change of position can cause a drop of blood pressure to the brain resulting in dizziness and loss of muscle control.

RATE OF HOSPITALIZATION FOR HIP FRACTURES, 1996

		MEN	WOMEN
AGE	65-74	168.0	501.1
	75-84	682.1	1,620.3
	+85	2,256.2	3,958.3

Per 100,000 population
Source: National Center for Health Statistics, CDC

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CALL NOW

TO ENQUIRE:

860 234 5538

To learn more about the benefits of P-SARP's programs:

Visit us at www.p-sarp.com or contact us directly at juan@familink.com

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JOIN THE ASSOCIATION

Your Benefits Will Include

- * NEWSLETTERS
- * MEDICAL ADVISORIES
- * LOBBYING on ISSUES
- * NUTRITIONAL INFORMATION and RECIPES
- * WEIGHT REDUCTION MENUS
- * CHOLESTEROL CONTROL CONCEPTS
- * LIFE WELLNESS INFORMATION
- * REVITALIZATION REMINDERS

Membership \$15 annually per member

OUR PURPOSE...

- Focused Lobbying on Specific Issues unique to 60s and over 70s Seniors
- Information and Advice on Fitness and Health Issues
- Newsletters and Correspondence dealing with the following
 - * WELLNESS and NUTRITION
 - * INSURANCE PROVIDERS and PLANS
 - * MEDICAL AWARENESS MATTERS
 - * EXERCISES for SENIORS

How to Join Visit www.p-sarp.com to sign up online, or email juan@familink.com, or call (860) 234-5538

Fear of the Fall, by William Lynders, M.D. cont'd from page 1

De-conditioning is the lingering effect of illness on the body which results in loss of muscle mass and reduced mobility of joints. A flu-like illness, for instance, that keeps you in bed for a couple of days may cause lingering changes to the muscular skeletal system that will take weeks to regain. Though your cough may have resolved, muscle strength and coordination are still recovering.

Let's not forget alcohol which is frequently a factor, alone or in combination with prescription drugs. The blunting of the neurologic system by alcohol consumption need not be at intoxication levels to cause falls. Accident analysis theory tells us that many factors lead up to adverse events. The more risk factors one has, the more likely the adverse event. One or two drinks on a good day may not cause problems of balance or coordination but when combined with recent illness, adverse environmental conditions, or prescription medication, the total affect could be dramatic.

What happens after the fall? Not all falls in older people result in serious injury - only five to 15%. The most common major injury by far are fractures, followed by head trauma. Hip fractures occur

The psychological impact of a fall should not be underestimated. The fear of falling again and a lack of self-confidence lead to unnecessary restrictions of activities followed by further decline.

Can we prevent falls or minimize the injury? Yes, you can do a lot. Physical activity is important. Failure to exercise regularly results in poor muscle tone, decreased strength and loss of bone mass and flexibility. Any exercise program that is regularly followed and challenges your endurance, strength and flexibility will reduce your risk of fall or improve your chance of avoiding serious injury.

Diet, of course, is important. The vitality of your muscles and bones depends on a well balanced diet. The progression of chronic illness clearly is impacted by what you eat. Diabetic and cardiovascular disease is particularly sensitive to poor compliance with diet.

Polypharmacy, the use of multiple medications, is increasingly common as we age and accumulate medical conditions. The more drugs taken the greater the chance for additive side effects and interactions. If you take several medications ask your doctor if some can be eliminated or dosage reduced, check for interactions with your pharmacist or run the list through a web based program yourself.

Falls will happen, but you can minimize your risk. Significant injury does not always occur and you can improve your chances for getting up and walking away.

Exercise, eat well, and you will be stronger and safer. □

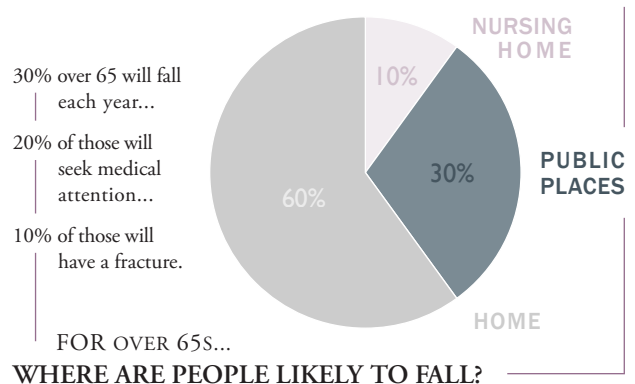
CONSEQUENCES OF FALLS

- **MORBIDITY**
 - Fractures
 - Head trauma
 - Soft tissue injuries
 - Joint sprains and dislocations
 - Loss of confidence - fear of falling
 - Restricted activity

- **MORTALITY**

In 1994, estimated fall-related injury cost was \$20.2 billion

in one to two percent of all falls. The consequences of hip fractures are significant. Hospitalization runs on average one week and 25% will require nursing home placement for an extended period of time. More than half will experience restricted mobility. Hip fracture survivors experience a 15% decrease in life expectancy and decline in quality of life.



Dementia Onset and *ARICEPT*, the Alzheimer's Drug

Aricept (Donepezil) is a drug manufactured by the Eisai Pharmaceutical Company of Japan, marketed in the USA by Pfizer. It is being promoted in television ads as suitable for all phases of Alzheimer's disease (the manufacturer's brochure indicates it is "for the treatment of mild to moderate Alzheimer's").

Medicare does include Aricept in its coverage for the Part D Drug Prescription Program, as a "non-preferred brand" (i.e. no lower cost or generic status). In England, however, the UK National Health Service (NICE) does not cover Aricept's cost.

Aricept has been found by the University of Oxford, in a 2006 study, as having "results that show some improvement in global clinical state," in regards to Alzheimer's. However, it also concluded that "a variety of adverse effects were recorded... the debate on whether Donepezil is effective continues... There is no evidence that Donepezil delays the onset of Alzheimer's."

A second major study by the University of Oxford (2006), in regard to Aricept vis-a-vis Mild Cognitive Impairment (MCI), concluded that "there is no consensus on diagnostic criteria for MCI - [which] remains a vague term... there is no evidence to support the use of Donepezil for patients with MCI... there are significant adverse side effects."

Other studies have concluded that Aricept may be effective for two years only.

The pertinent question for seniors, and their relatives or mentors, is then: **When is the right time to take Aricept?**

Careful analysis should be made by the elderly person's primary care physician as to possible adverse interactions between Aricept and other prescription drugs being taken. For example, interactions between Aricept and Toprol may slow heart rate, between Aricept and Zolofit may affect liver function, and so forth.

With today's heavy advertising of blockbuster prescription drugs on television and elsewhere, with the often repeated phrase "ask your doctor if this drug is right for you," both the elderly and their doctors may be unknowingly bending to sales pressures, thus lowering the bar on accepting an attitude of a more-than-necessary intake of prescriptions drugs.

In "The Way We Age Now," *The New Yorker*, April 30, 2007, Dr. Atul Gawande points out, "The three primary risk factors for falling are poor balance, taking more than four prescription medications, and muscle weakness." Recent studies show that 350,000 Americans fall and break a hip each year.

Before accepting a new prescription drug such as Aricept from your neurologist and/or neuropsychologist specialists, a careful analysis and discussion between you and your primary care physician regarding all your medications may be a prudent procedure. □



P-SARP Morning Oatmeal Mix

Prepare the mix in large quantity and store in refrigerator.

- 6 cups Rolled or Cold Oats
- 1 cup Grits
- 1 cup Oat Bran
- 1 cup Flax seed
- 1 cup 'Platinum Performance Omega-3 Supplement'

For 2 servings, add 1/2 cup mix and 1 1/4 cups water to a pot and bring to a boil. Simmer for 2 minutes, stirring often. Optional: add 1 tbsp honey or agave nectar to sweeten, along with skim, soy or rice milk.

* *Platinum Performance* can be found in your local health food store.

HEALTHY RECIPES...

TODAY'S NUTRITION TIPS FOR TOMORROW

P-SARP Lemon-Garlic Chicken

serves 4

- 4 Chicken Breasts, no skin
- 4 cloves garlic
- 2 tbsp sliced almonds
- EVOO (Extra Virgin Olive Oil)
- One lemon, all but 1/4 sliced razor thin, seeds removed
- 2 tsp each fresh Oregano and Tarragon, chopped finely
- Pepper

Take 4 chicken breasts and carve on a slant into 1/2 inch thick slices, place the lemon slices to cover the chicken.

In a heavy (preferably cast-iron) pan, heat 2 Tbsp EVOO, add the sliced garlic and almonds and cook over med heat until golden. Add chicken slices with the lemon side down. Sear chicken, turning twice, until both sides are golden. Add fresh herbs and pepper, and take remaining 1/4 lemon and squeeze some juice over the chicken. Serve with steamed spinach drizzled with 1 tbsp EVOO, and roasted butternut squash.

Juan's wine recommendation: glass of 2004 Stag's Leap cabernet.

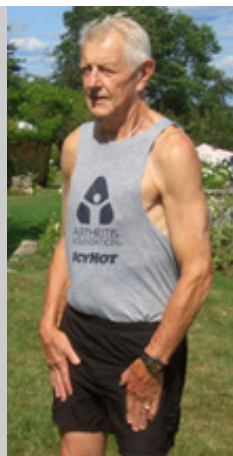
Juan O'Callahan's unique P-SARP exercises are based on slow, deliberate motion and self-controlled elastic pressure and tension sets. The 32 exercises are divided into 4 theatres:

P-SARP SELF-ELASTO EXERCISES for the CORE and BALANCE

- CORE** Waist and Hips* (help with lower back pain)
- LOWER** Legs* (help with balance)
- UPPER** Arms and Shoulders
- EGG** Neck and Head

* CORE and LOWER exercises focus on improving balance.

In this Edition...



QUAD PRESS

Hands on upper-quads
Press and hold
Slowly rotate
Hold 10 seconds to the left
Hold 10 seconds to the right
Rest 10 seconds at center
3 full rotations (1 minute)
2 sets
(Strengthens abs, pecs, neck, quads, triceps, biceps)



HAMSTRING ELASTO PULL

One-third to half squat,
Hands on back of upper hamstrings
Grip hams, tense hams and PULL up
Rotate 5 degrees side-to-side in a SLOW motion
5 full rotations (10 seconds for each full rotation)
3 sets
(Strengthens quads, biceps)

P-SARP

TESTIMONIALS...

John Teets, Maine

Former CEO of 3 companies in California

"One of the most valuable things I got during the program was the information from the medical lecture on falling. It opened my eyes and I have been much more aware of situations that are riskier. That was very valuable. I think the lifestyle medical lectures will be just as valuable as the the diet and exercises' [part of the program] to most people.
... also, the ability to customize the program to individual needs increases the value to most P-SARP Wellness Program participants."

Frederic W. Frost, Connecticut

Former VP of a Fortune 500 company
Retired Lt. Col., USMC

"... a great pleasure to be introduced to your unique and comprehensive exercise, nutrition and total wellness program; it was gratifying to learn of the additional opportunities to improve and maintain well-being as we are aging.
It is very encouraging to know that good nutrition and the complimentary exercise can be so beneficial without pain.
The moderate yet challenging exercise, tailored to our individual needs and abilities, was invigorating. We are encouraged to continue the program on our own, and a nice aspect is that no special equipment is needed.
The medical lectures on health and related topics were very interesting and added to the feeling that there is much we can do to maintain a healthy mind, body and spirit.
We left feeling vibrant, strong and rejuvenated."

DID YOU KNOW?

A September 2006 survey by the well-known research firm, J.D. Powers & Associates, identified significant consumer satisfaction by seniors with the new Medicare Part D Prescription Drug Program. The survey covered 3,400 subscribers in three western states. The clear favorite and number one ranked insurer in terms of customer satisfaction and consumer response was **Humana**, followed by **Wellcare**, then **AARP MedRx** and **Pacificare**.

The overall scores are shown below:

RANKING	INSURER	POINTS
1	HUMANA	2498
2	WELLCARE	2488
3	UNITED HEALTH (AARP MED RX)	2486
4	PACIFICARE	2485
5	BCBS	2481
6	AETNA	2392

* From a survey of 3400 PART D USERS in 3 states, 9/19/06 Report

The information in this P-SARP Newsletter is not meant for diagnosing or treating a health problem, recommending any medication (or otherwise), or to replace the diagnosis and/or advice of the readers' primary care physicians and/or specialists. The opinions and narrative materials in this P-SARP Newsletter are those of the Post-70's Association of Revitalized People (P-SARP) which is solely responsible for its content. ©2009 P-SARP All Rights Reserved

To learn more about the benefits of P-SARP's programs:

Visit us at www.p-sarp.com or contact us directly at juan@familink.com

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