





INDEPENDENT

The Newsletter of INDEPENDENT YOU Senior Care

Fall 2018 Vol. 3 Issue 4



Adult Vision: Over 60 Years of Age

ision changes occur as you get older, but these changes don't have to affect your lifestyle. Knowing what to expect and when to seek professional care can help you safeguard your vision.

As you reach your 60s and beyond, you need to be aware of the warning signs of age-related eye health problems that could cause vision loss. Many eye diseases have no early symptoms. They may develop painlessly, and you may not notice the changes to your vision until the condition is quite advanced. Wise lifestyle choices, regular eye exams and early detection of disease can significantly improve

your chances of maintaining good eye health and vision as you age.

You may not realize that health problems affecting other parts of your body can affect your vision as well. People with diabetes or hypertension (high blood pressure), or who are taking medications that have eye-related side effects, are at greatest risk for developing vision problems.

Regular eye exams are even more important as you reach your senior years. The American Optometric Association recommends annual eye examinations for everyone over age 60. See your doctor of optometry immediately if you notice any changes in your vision.

Age-related Eye and Vision Problems

In the years after you turn 60, a number of eye diseases may develop that can change your vision permanently. The earlier these problems are detected and treated, the more likely you can retain good vision.

The following are some vision disorders to be aware of:

Age-related macular degeneration (AMD) is an eye disease that affects the macula (the center of the light-sensitive retina at the back of the eye) and causes central vision loss. Although small, the macula is the part of the retina that allows us to see fine detail and colors. Activities like reading, driving, watching TV and recognizing faces all require good central vision provided by the macula. While macular degeneration decreases central vision, peripheral or side vision remains unaffected.

Cataracts are cloudy or opaque areas in the normally clear lens of the eye. Depending upon their size and location, they can interfere with normal vision. Usually cataracts develop in both eyes, but one may be worse than the other. Cataracts can cause blurry vision, decreased contrast sensitivity, dulling of colors and increased sensitivity to glare.

Diabetic retinopathy is a condition that occurs in people with diabetes. It is the result of progressive damage to the tiny blood vessels that nourish the retina. These damaged blood vessels leak blood and other flu-

Many eye diseases
have no early
symptoms. They
may develop painlessly, and you may not
notice the changes
to your vision until
the condition is quite
advanced.

ids that cause retinal tissue to swell and cloud vision. The condition usually affects both eyes. The longer a person has diabetes, the greater the risk for developing diabetic retinopathy. In addition, the instability of a person's glucose measurements over time can impact the development and/or severity of

the condition. At its most severe, diabetic retinopathy can cause blindness.

Dry eye is a condition in which a person produces too few or poor-quality tears. Tears maintain the health of the front surface of the eye and provide clear vision. Dry eye is a common and often chronic problem, particularly in older adults.

Glaucoma is a group of eye diseases characterized by damage to the optic nerve resulting in vision loss. People with a family history of glaucoma, African Americans and older adults have a higher risk of developing the disease. Glaucoma is often painless and can have no symptoms. Over time, it can take away peripheral (side) vision.

Retinal detachment is a tearing or separation of the retina from the underlying tissue. Retinal detachment most often occurs spontaneously due to changes to the gel-like vitreous fluid that fills the back of the eye. Other causes include trauma to the eye or head, health problems like advanced diabetes, and inflammatory eye disorders. If not treated promptly, it can cause permanent vision loss.

From American Optometric Association



raveling in the winter is fun, but it presents many challenges. When you use a wheelchair or walker, you may worry about finding accessible destinations once the weather gets cold, but there are many disability-friendly winter vacations you can take all over the world.

Prep For Your Winter Getaway

Here's a checklist for wheelchair accessible winter vacations. It's not that different from the list for general passengers, but you need to do a lot more research when planning your itinerary than the average traveler.

- Try to book direct flights when possible. Getting on and off connecting flights takes up a lot of time, and can leave you feeling tired and frustrated. Direct flights tend to be more expensive, but they prevent wear and tear on your health.
- Plan to ensure you receive the accommodations and assistance you need. Research accessibility options before booking. Planning will save you time when you arrive at your destination. You'll be more likely to avoid prob-

lems due to lack of accessible rooms or transportation.

- Be honest about your limitations. Make a list of where you want to go and what you want to do. While many tourist attractions are wheelchair accessible, the particular one you're interested in may not be suitable for disabled people. Replace it with another destination that's similar and accessible.
- Consider purchasing travel insurance to protect against accidents and medical problems. Check with your travel insurance company to learn more about their coverage for wheelchair users and people with pre-existing conditions.

Air Travel

The Air Carrier Access Act (ACAA) covers air travel rules for people with disabilities. It spells what airlines must provide. The act states that airlines may not refuse passengers with disabilities, require that they travel with a companion, or keep a passenger out of a particular seat due to a disability. Airlines may ask for up to 48 hours' notice for respirator hookup and other accommodations that require preparation time.

Let the TSA know ahead of time if you can't walk through the metal detector. You'll be wanded and receive a manual pat-down instead. The TSA website has a drop-down menu with information on security procedures for travelers with medical conditions.

Hotels

The hotel industry lacks standard accessibility rules, so you'll need to call in advance to determine if an establishment has a room right for your needs.

The Americans with Disabilities Act of 1990 states that hotels with over 50 rooms need to have one room with a roll-in shower and at least three accessible rooms without a roll-in shower. Larger hotel chains tend to renovate every ten to fifteen years so that they will have more rooms up to standard than smaller hotels.

Although large chains like Marriott, Sheraton, and Hilton claim that all of their hotels offer accessible accommodations, remember that service will vary from hotel to hotel. Always call or email to make sure they have accessible rooms available before booking.

A hotel should have the following accommodations for disabled patrons:

- Accessible parking near the entrance
- Automated doors
- Elevator to upper floors
- Level or ramped access to public areas
- Wide entry doors to room and bathroom
- Grab bars in bathtub
- Lever door handles
- · Low-hanging closet
- Roll-in shower

Staying in a hotel without all or most of these features may be doable if you have a friend or family member traveling with you. Solo travelers should take time to find an accessible hotel room, even if it means making a lot of phone calls and sending several emails.

Taxis, Uber and Specialty Transportation

When you arrive at your location, will you rent a wheelchair accessible car or be dependent on taxis, Uber, and local shuttle services? Uber offers Uber WAV for people with mobility disabilities. Ask your hotel concierge about accessible private and public shuttle services.

Public Transportation

Most city and suburban bus and subway lines can accommodate passengers with wheelchairs. Find out more by checking your destination city's office for disabled people or "accessible city" page.

For example, some cities such as Chicago, provide information that makes this process much easier, see the Mayor's Office for People with Disabilities. London, England provides one of the best guides I've seen to date, check it out at Visit London.com.

Many organizations can help you with planning trips. Some, like Challenge Aspen, provide for disabled travelers going to a specific location. Wilderness Inquiry offers outdoor adventure travel packages all over North America to people with disabilities.

Others offer help for individuals with specific disabilities. Trips Inc. offers supervised vacation packages throughout the US with people with mental or physical developmental disabilities.

Contact Accessible Journeys for international trips. This group is affiliated with the Access Network, a group of operators that handle tours for the disabled. Accessible Journeys offers tours to Amsterdam at Christmas, Israel in November and Antarctica.

From Movement Advisor.com



ur parents always asked that we listen to them, but what happens when they refuse to listen to us? Some adult children are finding that their parents don't always know best when it comes to their diet, driving, housing, medication and more.

Learn more about what to do when your aging parents aren't listening to you.

Dad or Mom Won't Take Your Advice: Now What?

Research out of Penn State University, the New Jersey Institute for Successful Aging and the Rowan University School of Osteopathic Medicine, found that 77% of adult children believe their parents are stubborn about taking their advice or getting help with daily problems.

Mary Heitger-Marek, a 46-yearold program analyst from Annapolis, Maryland, could write the book on parental stubbornness. Her parents were living in a condo in Florida with ongoing health problems and steep stairs. She begged them to move near

her to a housing community with support. Instead, they bought a home in Florida with a pool and yard. They also acquired a pet. Several falls (some from walking their new dog) and multiple surgeries ensued. They refused to hire help for either themselves or their house.

Instead, they moved into an independent living community near Heitger-Marek, again refusing a professional caregiver. Then their situation changed rapidly. Her dad passed suddenly and since then, her mother has been hospitalized four times. Now she's in rehab but plans to move in with her daughter, Heitger-Marek. She is still vowing not to have outside help.

"My parents' life decisions have greatly impacted me and I am very resentful," says Heitger-Marek. "I love my mother, but I am at my wit's end. I can't even begin to tell you how many times my husband and I have suggested options to improve my parents' quality of life and they have turned us down. I feel like we could open a

senior care business because of all the programs, aid and other things we have looked into for them.

What to Do When Your Aging Parents Won't Listen

We asked experts for their advice on what to do in situations like this and unlike some parents, we did, in fact, listen.

Experts recommend:

1. Accept the situation.

You may want your mantra to be "It is what it is." Said another way, "you can take a horse to water, but you can't make them drink." Suzanne Modigliani, a Boston-based geriatric care manager with a social work background, points out, "they are adults with the right to make decision even poor ones."

2. Blame it on the kids (that would be you) or the grandkids.

If Mom isn't willing to change her behavior for herself, would she do it for a loved one? Robert Kane, M.D., author of "The Good Caregiver," Director of the Center on Aging at the University of Minnesota and a professor in its School of Public Health, says his mother quit smoking after his sister argued the second hand smoke was a risk to the grandchildren. Another approach is to say to your parent, "You don't want me to worry, right? This (fill in the blank) will give me enormous peace of mind. Please do it for me!"

3. Decide how important the matter is.

Is it a safety issue or something that is just irritating but inconsequential? As the saying goes, pick your battles.

4. Don't beat yourself up.

Roseann Vanella, 50, of Marlton, New Jersey, happens to be a family mediator. But even with her professional training, she has been unable to reason with her parents. Her father, 84, has dementia and her mother, 75, has a rare blood disorder. Still, her mother insisted on taking her husband

to Sicily on vacation. Vanella told her, "I can't stop you so at least get medical jet insurance." She said she would. Soon after arriving in Italy, her mother's disease kicked up, she needed a blood transfusion and to come home. She admitted she never purchased insurance. Vanella and her brother were on the next plane. "After that I said, 'she's never going to take him to Europe,' but she did," says Vanella. "I told her how bad it was for my dad since his dementia had progressed." Again, Vanella had to go to Italy and bring them back. "The hardest part is knowing something could have been averted but wasn't," she notes. "My advice is not to hit your head against the wall too hard. There isn't a lot we can do sometimes but stand by, watch closely and be able to jump in when needed."

5. Find an outside outlet for your feelings.

If you're angry or resentful that Dad's not with the program, confide in, strategize with or vent to, a friend, geriatric care manager, geriatrician, online support group, sibling or therapist rather than your parents.

6. Think ahead.

Is there a milestone they want to be around for, such as an anniversary, graduation or wedding? Then bring it up!

7. Treat them like the adults they are.

Dr. Kane warns about infantilizing parents. "Dealing with a stubborn parent is not the same as dealing with a stubborn child. Older people should be autonomous."

8. Try to understand the motivation behind their behavior.

Modigliani says to ask yourself: Are they acting this way out of habit, to assert independence, or because they're depressed or confused? What are they afraid of?

Sally Abrahms Posted On 26 Jul 2017 Dear Mary Beth and Team,

 $Iwant to {\it express\,my\,deepest\,gratitude\,to\,Independent\,You\,for\,the\,superlational continuous and the conti$ tive care you provided for Mom over the past few years. We started out with just a couple of afternoons of companionship, with Mominsisting that she "didn't need anyone" and then not wanting the caregiver to leave at the end

Over the next few years, we moved to fulltime daytime care and then to round the clock care as Mom aged. We also stepped up from companionof her shift. ship to light nursing care. When Mom needed hospice services in the last few weeks of her life, Independent You's nurses and caregivers worked seamlessly with Capital Caring to ensure that Momwas comfortable and well-cared for at home, as she wanted.

I couldn't have asked for more and in fact Independent You always went above and beyond. We felt that we were part of the IY family. IY's $care givers we athered {\it power outages with Mom, doctor's appoint ments and}$ $much more.\ They shared\ stories, took\ her to\ church\ and\ to\ concerts,\ and\ just$ out and about. Mom's quality of life was very good, largely due to IY. She was close to 97 when she passed away, peacefully at home, as she wanted.

Mary Saunders (daughter of Kitty Howard) Thank you.

t's been said that 'Laughter IS the Best Medicine.' Nothing works faster or is more dependable to bring your mind and body back into balance than a good laugh. Humor lightens your burdens, inspires hopes, connects you to others, and keeps you grounded, focused, and alert.

So here's to living a longer and healthier life. We hope you enjoy the following senior citizen jokes:

A guy is reading his paper when his wife walks up behind him and smacks him on the back of the head with a frying pan. He asks, "What was that for?" She says, "I found a piece of paper in your pocket with 'Betty Sue' written on it." He says, "Jeez, honey, remember last week when I went to the track? 'Betty Sue' was the name of the horse I went there to bet on." She shrugs and walks away.

Three days later he's reading his paper when she walks up behind him and smacks him on the back of the head again with the frying pan. He asks, "What was that for?" She answers, "Your horse called."

Senior citizens have taken to texting with gusto. They even have their own vocabulary:

BFF: Best Friend Fainted BYOT: Bring Your Own Teeth CBM: Covered by Medicare FWB: Friend with Beta-blockers LMDO: Laughing My Dentures Out

GGPBL: Gotta Go, Pacemaker Battery Low!



703-999-3006 or vist us online at independentyou.net

