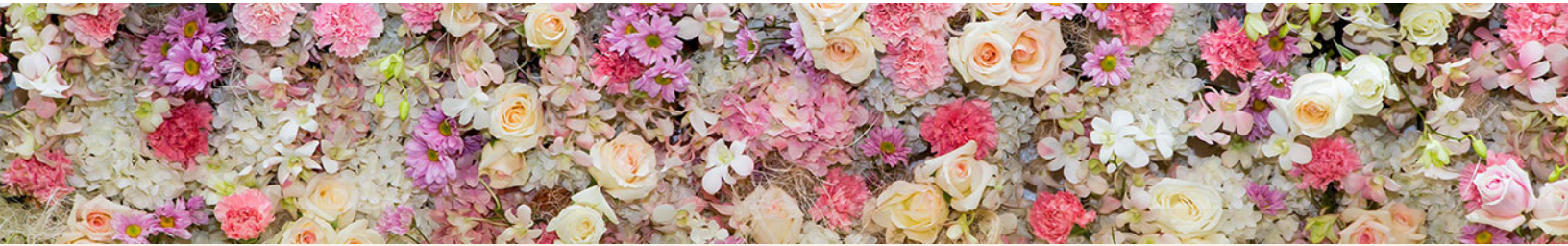


The Empowered Care Partner

Together With You on Your Ceresti-Care Partner Journey



FEATURED ARTICLE

May is National Stroke Awareness Month

A little awareness can make a huge difference!

May is *National Stroke Awareness Month* in the U.S. Increasing awareness helps us learn about the risks so we can do everything in our power to reduce them.

The National Institutes of Health reports that a stroke occurs every forty seconds in the U.S. and every four minutes, someone loses their life to a stroke, making it a leading cause of death and disability.

Stroke is caused by a lack of blood and nutrients to the brain. This causes brain cells to begin dying within minutes. That's why it's so important to seek treatment right away to minimize brain damage and other complications.

The signs of stroke can be more easily remembered by using the acronym **FAST**.

- **F**ace drooping
- **A**rm weakness
- **S**lurring of speech
- **T**ime to call 911

These symptoms can also indicate that a *Transient Ischemic Attack (TIA)* has occurred. A TIA - some may refer to this as a

mini-stroke - is caused by smaller, more temporary interruptions of blood flow that may or may not leave lasting brain damage and loss of function or skills. It is still a medical emergency so immediate medical attention is essential.

Some risk factors for stroke can't be controlled, but it's important to know what they are:

- **Age** – The risk for having a stroke increases with age, doubling each decade over age 55.
- **Genes** – If an immediate family member had a stroke, your risk may be higher.
- **Race** – The risk of stroke is higher among African Americans. This may be because of a higher incidence of contributing risk factors like diabetes, high cholesterol and obesity.
- **Gender** – Women have more strokes and are more likely to have more serious complications than men. This could be because a woman's life expectancy is longer, therefore a stroke is likely to happen at an older age. Other gender-related factors that increase risk of stroke for women include pregnancy and oral contraceptive use (especially when combined with smoking).

FEATURED ARTICLE

Continued from Page 1

- **Prior history of stroke or TIA** – A person who has had a stroke or TIA before is about ten times more likely to have another.
- **Previous heart attack** – A previous heart attack means that there may be a buildup of plaque within the blood vessels of the heart. That same type of plaque can also block the blood vessels leading to the brain, causing a stroke.

The good news is, there are lifestyle modifications that we can adjust to reduce the risks for stroke. The American Heart Association recommends:

- Don't smoke
- Exercise regularly
- Eat a healthy diet

The bottom line: *Do your best to maintain a healthy weight, cholesterol levels, blood pressure and blood sugar levels.*

Stay aware of your own risks for stroke and empower yourself by modifying your lifestyle choices so you can reduce your risks and stay brain-healthy.

To learn more about stroke and other fascinating facts about the brain, go to Ceresti's **Brain Health Education Portal** at brainhealth.ceresti.com. If this is your first time, use the code **GIVECARE** to register.

By Marilyn Abrahamson - Brain-Health Education Specialist at Ceresti Health.



Recognizing When Falls Become More Frequent

The ability to *recognize change* in your loved one's condition is a skill we take seriously at Ceresti. That's because sharpening this skill is crucial for helping you to help your loved one stay safe and well every day.

If they're having more difficulty than usual with balance and walking, it's important to be able to recognize and acknowledge this change in their condition. Problems like this could increase their risk for *falls* – with almost 35% of older adults experiencing a serious fall each year.

Why are falls more common in older people?

Anyone of any age can slip and fall, and there are many reasons why your loved one may be falling more often. Some of the most significant reasons for more frequent falls are:

- **Changes in vision and hearing** - If your loved one doesn't see clearly, it not only affects balance, but they're also less likely to be able to avoid tripping over or bumping into something in their path.

A decline in hearing means your loved one may not hear your verbal warning that they are in danger of tripping.

Falls that occur as a result of vision and/or hearing changes can be difficult topics to talk about. Many older people are reluctant to admit that their hearing or vision has worsened. If you suspect your loved one has had declining vision or hearing, especially if you believe it could be contributing to more frequent falls, begin by making sure eyeglass and hearing aid prescriptions are up to date. If you're not sure, consult with a vision and/or hearing specialist to assess your loved one.

- **Declining health** – It's natural for certain physical changes to take place with age, but for some, those changes mean reduced bone mass and decreased muscle strength. Both of these problems significantly contribute to trouble with balance and walking.
- **Medications** - Declining health can also increase the number of medications your loved one will be taking. Prescription medication, over-the-counter medicines, and even some dietary supplements can have side effects that can increase the risk for falling. This is particularly true for medications used for sleep problems, depression and cardiovascular issues. Side effects such as drowsiness, dizziness and low blood pressure can increase the risks for falling.

If you believe your loved one's falls may be a result of declining health or medications they are taking, make an appointment with their primary care physician. Ask the doctor to review their medications and assess whether other problems such as fatigue, sleep issues, or muscle weakness could be affecting their balance and safety.

Additional causes of falls include:

- Health conditions that cause muscle weakness, such as stroke, MS, or Parkinson's disease
- Vertigo/dizziness
- Cognitive issues
- The need for a walker, cane or other assistive device
- History of problems with balance
- Living in a cluttered or poorly lit environment

Prevention is key.

Falls can result in a wide variety of injuries that range from minor bumps and bruises to catastrophic injuries. If your loved one has not experienced a fall, but has been walking more cautiously, holding onto furniture, or navigating with more fear and uncertainty, it's a good idea to get proactive and think about fall-prevention strategies such as:

- Decluttering floors and staircases to remove tripping hazards
- Avoiding the use of throw rugs. If they must be used, be sure to more tightly secure them to the floor, especially around edges and corners
- Using wall-to-wall carpeting on slippery floors
- Placing non-skid decals on floors in the bathroom, showers and tubs
- Improving lighting on staircases and in dark areas of the home
- Adding handrails by all level-changes throughout the home, as well as on staircases and in bathrooms
- Ensuring your loved one is wearing the right shoes. Pain, poorly fitting footwear, slippery soles, or even heels that are too high can impact safety. The safest shoes are those with sensible heel-height that are well-fitting, slip-resistant, and non-skid.
- Addressing fear of falling caused by a prior fall. Often, an older person will withdraw from activities after a fall for fear of falling again. This can result in lack of activity, causing loss of muscle strength impacting balance – which can increase the risk for a fall.
- Encouraging your loved one to exercise or engage in training that increases strength, coordination and balance. Activities such as yoga, Tai Chi, and swimming can help your loved one stay more active for improved balance and strength for walking safely.

CERESTI COACH CHRONICLES

THREE TIPS FOR COMMUNICATING WITH FACILITY STAFF



Written by: Your Ceresti Coach, Cheryl Laux

Hello dear friends!

In this month's *Ceresti Coach Chronicles*, I'll be talking to you about a difficult subject you may have experienced, or may experience in the future; **placing your loved one in a nursing care or assisted living facility.**

This is an emotionally-charged topic that can often be associated with feelings of immense responsibility, overwhelm, and sometimes even guilt and inadequacy, making it one of the most difficult decisions you, as a care partner, may ever have to make.

The emotional burden you experience may even carry-over after your loved one has moved into their new home and you help them settle in. Knowing you're doing everything you can to help them feel more safe and secure in this process may help alleviate some of your feelings and emotions.

Fortunately, there are things you can do to make sure your loved one is provided the best care possible. Here are three tips to make things easier for both you and your loved one:

1. Communicate honestly and often with facility staff - From day one, this is *the most important thing you do*. To facilitate an easier transition, arm the staff with information about your loved one's likes, dislikes, and abilities. A written document with your loved one's daily routine is most helpful, with information about:

- When your loved one wakes up
- When and how they prefer to bathe

- When and what they like for meals and snacks
- If and when they enjoy a nap
- Your loved one's socialization style, with information on games or activities they enjoy
- What time they usually go to bed

2. Make yourself known to the staff! Smile and say hello to the facility staff, learn their names and thank them for their work with your loved one. Walk around the facility with your loved one so the staff sees you and knows you are involved. It will be easier to discuss a concern with them if they know you and trust that you are a partner in your loved one's care.

3. Attend Care Conferences - These conferences should be offered quarterly and give you the opportunity to sit down with the different disciplines involved with your loved one's care. They typically involve social services, nursing, dietary and activities. Sometimes, they will even involve direct caregivers, if time allows. This is the best time for you to get direct feedback from the staff. Prepare for this meeting ahead of time by creating a list of questions and concerns you want to address.

Here's what is important

Always feel free to address your questions or concerns at any time, as follows:

- If you have a direct care question, ask the nursing assistant as he or she is the one who is with your loved one most often.
- For medical questions, talk to the floor nurse or charge nurse.
- For issues that are not resolved, you should always contact the social worker, Director of Nursing or the Administrator for assistance. They will gladly make time to discuss the issue and can assist in resolving such.

Most importantly, remember that timely communication with facility staff is the key to feeling confident that your loved one is receiving the highest quality and most personalized care possible.