

Aging Well



Center for Healthy Aging Receives New Grant

We are pleased to announce that the Administration on Aging of the U.S. Department of Health and Human Services has awarded a grant of more than \$400,000 to the OHSU Center for Healthy Aging to continue the work of the Healthy Aging Demonstration Project for an additional year, and add a significant new study component. (See accompanying article.) Our thanks to the Administration on Aging for extending the demonstration project. Also, we appreciate the vote of confidence from Congressmen David Wu and Greg Walden and Senators Gordon Smith and Ron Wyden in supporting this important work. For more information about the Healthy Aging Project, check our Web site www.ohsu.edu/healthyaging or call us at 503 494-7757.

Healthy Aging Demonstration Project Reaches a Milestone

Dear Healthy Aging Project Participants:

It's hard to believe that nearly 18 months have passed since the Healthy Aging Project, a demonstration supported by the Administration on Aging, began. We would like to take this opportunity to express our sincere gratitude to all of our Healthy Aging participants. In allow-

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Be Prepared for the Sun



The sun is shining and the weather is sweet. This is the time of year that we Oregonians wait for, a time to emerge from the shadows and soak up some rays. But did you know that there is no such thing as a safe tan? A tan is the skin's response to injury from ultraviolet (UV) light. UV rays cause about 95 percent of all skin cancers in the United States.

Here are some sunscreen tips to help keep your skin safer in the sun:

- Sun Protection Factor (SPF) is the number that reflects a product's ability to block ultraviolet B (UVB) radiation, which affects the epidermis, or outermost layer of the skin.
- SPF does not indicate the level of ultraviolet A (UVA) protection. UVA rays penetrate the deeper layers of skin and can increase the damage of the UVB rays.
- A product with SPF 15 protects your skin from UVB rays 15 times longer than if you used no sunscreen. Things like altitude, distance from the equator and individual sun sensitivity will impact actual duration of protection.
- SPF 30 is not twice as protective as SPF 15. It provides an additional three percent of protection. Every little bit helps!
- Sunscreen should be applied 20 to 30 minutes before going out in the sun.
- To block UVA rays, use a sunscreen that contains Parsol 1789 (avobenzone). The product will be labeled "broad spectrum."

The American Cancer Society estimates that one in 75 people will develop malignant

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Pre-Diabetes — New Thoughts on an Old Disease

By Susan Schenk, A.N.P.,
Certified Diabetes Educator

Over 3500 years ago Greek physicians described the “sugar disease” we now know as diabetes. Today almost 16 million people in the United States are diagnosed with diabetes and four million require insulin injections. With diabetes the body can’t properly use the energy that comes from food. This problem is closely tied to how the body makes and uses the insulin that is created in the pancreas. There are at least two types of diabetes as well as the condition referred to as *pre-diabetes*. With Type 1 diabetes the body makes little or no insulin; this type, which has sometimes been called “childhood onset diabetes” most commonly appears in childhood or adolescence. Type 2 diabetes is caused by the inability of the cells in the body to use insulin made in the pancreas. This is called insulin resistance and over time the amount of insulin made gradually decreases.

Before people develop Type 2 diabetes, they almost always have pre-diabetes. At one time this was referred to as “borderline” diabetes. Pre-diabetes means that the sugar or glucose level in the blood is higher than normal but not yet high enough to be diagnosed as diabetes. Recent research has shown that some long-term damage to the body, especially the heart and circulatory system, may already be occurring during pre-diabetes.

Since pre-diabetes has no outward symptoms, how do people know if they have it? Current research evidence strongly recommends one of two blood tests for individuals over 45 years of age who are also overweight. These blood tests should be considered for everyone over 45 or those under 45 who also have a family member with diabetes of any kind. People with high blood pressure, elevated cholesterol levels, or ethnicity other than Caucasian are statistically at higher risk for pre-diabetes. People who are not overweight may also have pre-diabetes though it is less common.

One of the blood tests available is a simple blood sugar, also called blood glucose. This can be done on a drop of blood when the person has not had anything to eat for at least 8 hours. Another test is an oral glucose tolerance test in which the individual drinks a highly concentrated sugar solution and a blood glucose test is done two hours later. If the blood glucose level is above normal in either of these blood tests, it is referred to as impaired glucose tolerance.

Because impaired glucose tolerance is a serious medical condition it is important to start treatment quickly. The recently completed

Diabetes Prevention Program study conclusively showed that people with pre-diabetes can often prevent the development of Type 2 diabetes by making changes in their diet and increasing their level of physical activity. They may even be able to return their blood glucose levels to the normal range. This study also showed that some medications might delay the development of diabetes but that diet and exercise worked better. Just 30 minutes a day of moderate physical activity, coupled with a 10 to 20 pound weight loss if the person was overweight, produced a 58 percent reduction in the number



of people who developed diabetes.

Exercise programs must be set up with a doctor or nurse practitioner to avoid aggravating other medical problems such as heart disease.

Diet changes include reducing the amount of high fat foods one eats. Fat interferes with the action of the insulin being made in the pancreas. Fried foods, like potato chips, French fries and donuts as well as ice cream, whole milk, candy bars, beef and sausage are some foods to avoid. Also simple sugars such as sugared soda pop, juices and sugared cereals will elevate

blood sugar levels when one has pre-diabetes or impaired glucose tolerance. Increasing the amount of vegetables and fruits to 5 servings a day as well as eating whole grain bread products and lower fat protein sources will take the place of some of the less healthy foods.

3,500 years ago only a few people developed the sugar disease but in the 21st century, our diet and reduced activity have made this an increasingly common problem. It's helpful to know that our own actions and decisions can prevent or delay diabetes.

Elderhostel: Learn and Live!

Researchers continue to discover more and more evidence to support the claim that social interaction and ongoing education are among the activities that keep aging bodies and minds strong and healthy. If you're looking for a way to learn new things and meet interesting people as you travel to exotic places, Elderhostel may be just the ticket.

Elderhostel is a not-for-profit organization that provides educational travel adventures to nearly 250,000 older adults each year. With more than 10,000 programs a year in over 100 countries, it is America's first and the world's largest organization of its kind for adults 55 and over.

With Elderhostel, opportunities abound to share educational and travel experiences with others. Programs range from learning to paint on Nantucket to hot air ballooning, joining a student orchestra, biking the rim of the Grand Canyon, conducting research to help protect endangered species, to name just a few.

Mary Lee Wooster, Healthy Aging participant and Elderhostel ambassador, first investigated the Elderhostel nearly 25 years ago. At the time, she and her husband thought it would be a great thing to do when they retired. Fourteen years ago, six months after her husband passed away, she went to her first Elderhostel. Mary hasn't looked back since. "I've been to at least 10 different Elderhostels. White water rafting in the Grand Canyon, sailing in the San Juan Islands, independent film study and even learning about Mozart from a concert pianist. The programs are outstanding, but the best part is the people." Mrs. Wooster's most recent Elderhostel experience was a class entitled 'Your Body – An Owner's Manual.' "It has changed the way I think about health." She is looking forward to 'Healing Ways – A Wonderful World of Health and Wellness' in October.

Elderhostel programs are all inclusive. In addition to accommodations, prices include all meals, lectures, field trips, cultural excursions, gratuities and medical or insurance coverage. Please refer to the Web site listed below for more details.

*Source: Elderhostel Web site at
www.elderhostel.org.*

Diabetes Facts and Myths

Diabetes causes fatigue.

Fact. Although the early stages of diabetes and pre-diabetes may not have any symptoms, as blood sugars remain elevated for longer periods of time, fatigue can become a problem.

Type 2 diabetes only happens to people who eat a lot of sugar.

Myth. At this time, it isn't known what causes diabetes but the illness causes an alteration in sensitivity to the insulin made in the pancreas. There is no evidence that sugar produces that insensitivity.

Diabetes can cause blurred vision.

Fact. When blood sugar has been elevated for several weeks it causes increased fluid in the central part of the eye. The excess fluid and pressure may produce blurred vision. This resolves as blood sugars return to normal level.

People who take medication for their diabetes rarely need to make changes in the dose or type of medication.

Myth. There have been many new medications for diabetes in the past 5 years. These newer drugs often have fewer side effects and are more often used in combination to further reduce the blood sugar. In addition, changes in activity, diet and stress levels can alter the amount of both oral medication and insulin.

Diabetes is always inherited.

Myth. While having a family member with diabetes may increase your risk, diabetes does occur in people who have never heard of individuals in their family with diabetes.

People with elevated cholesterol and blood pressure are at a higher risk for developing diabetes.

Fact. These three factors are often seen together. When any one of these problems is diagnosed, evaluation should be done for the others.

Eating a diet to control your blood sugar requires purchasing special foods.

Myth. The same healthy diet that is recommended for the general population is also the best choice for people with diabetes. That diet encourages eating a variety of foods. The amount of food consumed each day will depend on the need to gain, lose or maintain weight. People who are more active will need more calories.

People with diabetes need to have at least three meals a day.

Fact. Spacing meals throughout the day seems to help maintain a healthy weight and get the vitamins and minerals needed. For those taking diabetes medication, regular meals help provide a continuous energy source and reduce episodes of low and very high blood sugars.

Signs and Symptoms of Diabetes

- Feeling tired
- Dry, itchy skin
- Numbness or tingling in hands or feet
- Frequent infections
- Increased urination
- Blurred vision
- Problems with sexual function
- Slow healing of cuts or sores
- Increased hunger and thirst

Milestone

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ing us to join you in your quest for better health you have taught us invaluable lessons about what it means to change and how we might facilitate the change process.

In response to those of you who have expressed an interest in knowing a little more about those who participated, here's a brief demographic synopsis:

- 374 participants: 239 women (64 percent), 135 men (36 percent)
- Mean age: 62.5 years (range 40-93)
- Over 60 percent married
- Average years of education: 16.5

In working with a personal nurse coach, many of you have made great strides toward individual health goals. It is our intention that your hard work will enhance not only your own health and our knowledge base, but will benefit others as well.

Thanks to the ongoing support of the Administration on Aging, the Healthy Aging Project will be extended for an additional year and expanded in new directions. All current participants are invited to continue in the project, whether they wish to pursue existing health goals or identify new ones to work on. If you are a current participant and have not received an invitation, please contact the Center for Healthy Aging at 503 494-7757.

We are also expanding the Healthy Aging Project with a new study group ("Phase Two"), that will focus on people with a chronic condition. Please call us for more information at 503 494-7757 if you are interested, or if you know someone who is interested and who meets the following criteria:

- 60 years of age or older;
- Has a diagnosis of at least one of the following conditions: diabetes, arthritis, heart disease, lung disease, neuromuscular disease and;
- Able to attend program activities.

Once again, we thank you for your interest in the Healthy Aging Project. It has been a great start, and we look forward with enthusiasm to the coming year.

Sincerely,
Healthy Aging Project Team

Dietary Folate Cuts Stroke Risk by 20 Percent

The May 3 issue of *Stroke* reports on the results of a 20-year prospective study that demonstrates a 20 percent reduction in risk of stroke in people who get recommended amounts of dietary folate. According to lead author Lydia A. Bazzano, Ph.D., the data support the current recommendation of consuming 400 mcg of folate daily. In addition, evidence suggests that physician screening of patients' dietary folate intake and encouragement to take in the recommended level may decrease patients' risk of stroke.

This study followed 9,764 men and women, aged 25-74 years, who had no cardiovascular (CV) disease when they enrolled in the National Health and Nutrition Examination Survey I Epidemiologic Follow-up Study (NHEFS). Over 21 years, from 1971-1992, subjects had 926 strokes and 3,758 CV events. Those who consumed at least 300 mcg of folate daily had a 20 percent lower risk of stroke and a 13 percent lower risk of CV disease, and had slightly lower average systolic blood pressure and lower average total cholesterol levels than those consuming less than 136 mcg of folate daily.

In evaluating the findings, adjustments were made for history of diabetes, systolic blood

pressure, cholesterol levels, body mass index, recreational physical activity, educational level, alcohol consumption, and current cigarette smoking. Dietary folate was found to be significantly and inversely related to the risk of stroke and CV disease (higher dietary folate intake resulted in lower CV risk). This relationship was consistent between sexes and across levels of physical activity and tobacco use.

This study may actually underestimate the strength of the association between dietary folate and CV protection, as dietary folate intake was determined by questioning subjects about foods eaten during a single 24-hour period. The researchers endorse the American Heart Association's recommendation that adults take 400 mcg of folate daily and that pregnant women take 600 mcg daily.

"Further research is still needed to clarify the optimal amount of folic acid and identify which patients require additional supplementation," Scott E. Kasner, M.D., from the University of Pennsylvania Medical Center in Philadelphia, writes in an accompanying editorial. "In the meantime, we should recommend 300 to 400 micrograms of folic acid for people at risk for cerebrovascular and CV disease."

Healthy Aging Q & A:

Q: What is folic acid and why is it important for a healthy heart?

A: Several important studies have demonstrated a link between deficiencies in the B vitamins (folic acid, folate, B6, and B12) and elevated blood levels of an amino acid homocysteine, a possible risk factor for atherosclerosis. Folic acid is particularly potent in reducing homocysteine levels, and folate deficiencies are associated with a higher risk from heart disease. (Green vegetables and legumes, enriched cereals and grains, and orange juice are rich in folate). It is not yet clear if taking folate supplements and reducing homocysteine levels will protect

against heart disease. Major studies are under way and early results of small studies are promising.

Tea may have a very positive effect on the heart. Although it contains caffeine, it also is rich in flavonoids and other substances that offer protection against damaging forms of LDL cholesterol. Green tea is often cited for its health benefits but black tea may also be beneficial. In one study, higher intake of black tea, particularly by women, was associated with a reduced risk for severe coronary artery disease. Tea also contains folic acid, which reduces homocysteine levels, a possible factor in coronary artery disease.

Drink Up and Live Longer!

Whether you are lounging poolside, playing tennis or simply watching television at home, it is essential to consume plenty of fluids during summer heat waves.

On average, an adult's body weight is made up of about 10 to 12 gallons of water (about 55 to 75 percent of body weight). An elderly person's body weight is only about half water. But, when exposed to extremely high temperatures, your body requires even more water to maintain its normal temperature.

Extreme weakness and potential heatstroke may result if more than 10 percent of body weight is lost from dehydration or water loss. And the average adult loses about 2 1/2 quarts (about 10 cups) of water daily through perspiration, breathing and other body functions.

What are the signs of dehydration?

The effects of the body's loss of water are progressive: thirst, then fatigue, next weakness, followed by delirium and, finally, death. Though dehydration typically won't happen over the course of a single day, it is important to pay attention to signals of water loss and minimize risk of dehydration by drinking plenty of fluids throughout the day – before thirst sets in.

What to drink and how much?

Of course, the most important fluid to consume is plain water, at least 8 to 12 eight-ounce cups per day. If you are physically active, you should add one to three cups for each hour of activity. If you prefer a flavored beverage, try sports drinks or decaffeinated beverages (caffeine can act as a diuretic, causing water loss). Alcoholic beverages have a diuretic effect and promote water loss.

Final word

Overall, cool refreshing drinks can help lower your body's temperature. But remember, it's harder to cool down in hot, *humid* weather because perspiration doesn't evaporate as quickly as it does in hot, *dry* weather.

RESEARCH NEWS

Water Intake Inversely Related to Risk of Fatal Heart Disease Events

According to a report published in the May 1 issue of the *American Journal of Epidemiology*, people who drink five or more glasses of water per day are less likely to experience a fatal cardiac event than those who drink no more than two glasses per day.

Dehydration is known to increase whole blood viscosity, plasma viscosity, hematocrit, and fibrinogen concentration, all of which are directly related to the risk of coronary heart disease (CHD).

In the current study, Jacqueline Chan, M.D., and her team evaluated the relationship between fluid intake and the risk of fatal CHD. The study followed more than 20,000 adult subjects for 6 years. At the beginning of the study, none of the subjects had heart disease, stroke or diabetes. A total of 246 fatal CHD events occurred during the study.

Men and women who drank five or more glasses of water per day were 54 percent and 41

percent less likely, respectively, to experience a fatal event than those who drank no more than two glasses per day. In contrast, men and women who reported high intake of non-water fluids including juice, coffee, tea, and soft drinks, were about 1.5 and 2.5 times more likely, respectively, to experience a fatal event than their those who reported low intake.

It is not known why intake of non-water fluids may increase the risk of fatal CHD events. The authors hypothesize that "higher intake of diuretic and high energy beverages results in more frequent and larger exposure to conditions that increase the risk of thrombosis and atherosclerosis."

Further studies are needed to determine whether a cause and effect relationship exists between water intake and fatal cardiac events.

American Journal of Epidemiology, 2002;
155:827-833

Preparing for the Sun

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melanoma, the most lethal form of skin cancer, in their lifetime. But skin cancer caught in the early stages has an almost 100 percent cure rate.

Here's a brief summary of the three types of skin cancer that can result from sun exposure and what to look for in order to intervene as quickly and appropriately as possible:

- **Basal Cell Carcinoma** – This is the most common form of skin cancer. It looks like a clear spot or a small bump that usually forms on the head, neck or hand. Size can vary and it often bleeds easily.
- **Squamous Cell Carcinoma** – Can start as nodules or as a red, scaly area, often on the lips, face or ears.

- **Malignant Melanoma** – Least common but most serious. The ABCD rule applies to melanomas:

- **A**symmetry: One half of the lesion looks different than the other half.
- **B**order irregularity: The edges of the lesion are irregular, ragged, notched or blurred.
- **C**olor: The color is inconsistent over the lesion; may be different shades of brown or black from one part of the lesion to the other, and may have patches of red, white or blue.
- **D**iameter: The lesion is greater than 6 millimeters (around the size of a pencil eraser), or is growing larger.

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Mark Your Calendar

HAP Participant Social

Tuesday, August 13th, 1:30 – 3 p.m.
OHSU School of Nursing, Room 602
For more information, please call 503 494-7757

We would like to invite you and a friend to join us for an afternoon of healthy conversation and support. We get together every other month to enjoy the company of fellow participants and learn about a topic that relates to healthy aging. Admission is free and refreshments will be served.

Oregon Geriatric Education Center's Summer Institute

OHSU Casey Eye Institute
August 20, 21, 22

We are pleased to announce the 13th Annual OGEC Summer Institute titled "Geriatric Perspectives" on August 20, 21 and 22. Topics have been selected to better inform health care professionals regarding care of

older people but interested lay persons are welcome as well. This year the institute will focus on the following topics: *Women and Aging*, *Dimensions of Assessment*, and *Complementary and Alternative Medicine for Aging People*.

The Summer Institute will be held at the Casey Eye Institute at the Oregon Health & Sciences University. Parking is easy and is included in the registration. The registration fee is \$75 per day or \$200 for all three days. Continuing education credits are available. For more information or to request a brochure, please visit the OGEC Web site at www.ohsu.edu/aa-ogec or call 503 494-7757.

OHSU includes four schools; two hospitals; numerous primary care and specialty clinics; multiple research institutes; and several outreach and community service units.

*OHSU is an equal opportunity, affirmative action institution.
7/02(20)*

BEGINNING THIS FALL!

Living Well with Chronic Conditions

The Healthy Aging Project will offer a six-week program for individuals with chronic illnesses such as heart disease and diabetes.

Kate Lorig, M.D., developed this program at Stanford University Patient Education Research Center and it has been attended by thousands of people throughout the United States, Canada and England. Those taking the class have reported an increased feeling of control over their illness and improvement in their health behaviors. Family and friends of individuals in the class are also welcome to attend and participate.

These classes will also be offered around the state of Oregon through the Oregon Department of Human Services. Exact dates and times will be available later in the summer. Watch the Web site of the Center for Healthy Aging for more information: www.ohsu.edu/healthyaging.