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AUGUST 2022



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Changing Nutritional Needs

It's important to update your diet as you grow older.

The message is the same for seniors, even after the traditional food pyramid was updated for a new era: Focus on nutrient-dense options and more fluids, while getting plenty of exercise, in order to improve mental health and lengthen your life. The USDA breaks their recommendations down into three vital areas: Fiber, fluids and supplements.

FOCUS ON FIBER

Digestive health relies upon a recommended intake of fiber, which is found in wholegrain foods, dark-colored vegetables and brightly colored fruits. Experts recommend that we eat fresh as often as possible, but seniors should take advantage of frozen options, canned or dried vegetables and fruits needed in order to reach optimum intake levels. Canned and dried foods are also handy when traveling or in the event of a natural disaster that makes traveling to an area grocer impossible. Limit sodium, particularly if you have been diagnosed with hypertension.

FLUID INTAKE

Seniors should lower the risk of dehydration by drinking plenty of fluids. This is especially important, of course, when working or exer-

cising outdoors and in the hotter summer months. But staying hydrated is important even if you're not spending extended periods of time outside. Water is recommended, rather than sugary drinks or sodas, which may actually have the opposite effect since they're diuretics. Fluids can also be obtained by eating various foods with a high amount of water content like vegetables, soups and lettuce. The USDA says to gauge what's needed by listening to your body. If you're thirsty, that means you're not getting enough water.



SUPPLEMENTAL NEEDS

As we age, certain additional needs emerge, as calcium, vitamin B-12 and vitamin D supplements are recommended — in particular if your diet doesn't include enough of these vital nutrients. The World

Health Organization recommends that those over 50 get 1,200 milligrams of calcium a day, the equivalent of four cups of dairy or soy milk, or fortified orange juice.

Omega 3 fatty acids serve to reduce inflammation, helping to fight cancer, heart disease and arthritis. You'll find it in walnuts, flaxseed and certain fish. Consult with a physician about integrating supplements into your daily regimen. They may also have helpful tips on dietary updates you can make that might eliminate the need for additional vitamins.

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Avoiding Senior Scams

Here's how to keep yourself safe in the internet age.

Senior scams are an increasing problem, whether it's health care fraud, counterfeit prescriptions or extortion schemes. Here's how to guard against it, and what to do if it happens to you or someone you love.

HEALTH CARE FRAUD

Scam artists can easily target those over 65 for health care fraud, since all Americans and permanent residents of that age are eligible for Medicare. Information about the government-backed insurance program is also readily available, allowing them to pose as Medicare representatives while sounding completely knowledgeable. The National Council on Aging warns seniors to be wary of anyone seeking personal information on the phone or over the internet. Ask anyone who asks for confidential information for their credentials, then contact a local agency to confirm their identity.

FUNERAL SCAMS

Beware of those who try to upsell you on expensive caskets or package deals. The FTC confirms that there's no law requiring one. Neither are you forced to embalm your loved one, unless the body isn't buried or cremated within a certain timeframe. Scammers have also begun to take advantage of the grieving. They often extort money from relatives by claiming to hold fake debts, according to the Federal Bureau of Investigation. Some have been known to attend funeral services of strangers based on published obituaries in order to find unknowing victims.

COUNTERFEIT PRESCRIPTIONS

As seniors seek out better prices on their medications, online drug scams have become an increasing issue. The Food and Drug Administration now investigates dozens of cases per year, when there were only a handful annually a few decades ago. Seniors risk losing their precious savings to these scammers, and may also be at risk of serious health issues if they receive fraudulent or incorrect medications. Use trusted websites with long histories of sales when purchasing any medications. If you're unsure, consult your personal physician. They can help direct you to the safest online options.

WHAT TO DO

Have you or someone you know been the victim of a senior scam? Immediately report it via the toll-free number for the U.S. Department of Justice's National Elder Fraud Hotline at (833) 372-8311. The



AARP also hosts a Fraud Watch Network Helpline at (877) 908- 3360. You can also keep up with all of the latest news through the AARP Fraud Watch Network's scam-tracking map, which includes nationwide reports.



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Understanding Carotid Artery Disease

The carotid artery is a major artery in the body. It branches off the aorta of the heart, comes up from the chest into the neck and splits into the external carotid artery, which supplies blood to the face, and the internal carotid artery, which carries blood to the brain. But what happens when the internal carotid artery isn't healthy? Learn what carotid artery disease is and why diagnosis and treatment are so important.

WHAT IS CAROTID ARTERY DISEASE?

Carotid artery disease is when plaque builds up in the internal carotid artery. It more commonly occurs in people who have health problems such as high blood pressure, high cholesterol and diabetes or people who smoke cigarettes. Over time, this buildup causes narrowing. Blood clots can then easily form and either block off the artery or send blood clots downstream, preventing oxygen and nutrients from getting to the brain and resulting in a stroke.

HOW IS IT DIAGNOSED?

Unfortunately, carotid artery disease is most commonly diagnosed after a stroke occurs. However, it can be diagnosed through testing in preparation for surgery or if someone has one of the risk factors — having high blood pressure, having diabetes or smoking cigarettes. This of-

ten entails an ultrasound of the neck or a CT scan with contrast. However, the gold standard for determining how narrow the artery has become is through an angiogram, a procedure that places a catheter inside the beginning of the artery to inject contrast in that artery specifically and capture detailed pictures.

HOW IS IT TREATED?

Treating carotid artery disease depends heavily on how narrow the artery has become. The more narrow it is, the more risk there is for stroke. Fortunately, managing risk factors — lowering high blood pressure and cholesterol, controlling diabetes and stopping smoking — can stop the damage and even reverse it. When it becomes particularly narrow, there are several procedures that might be recommended.

The first step is an angiogram to confirm the artery's narrowing and determine the most appropriate course of treatment. An angioplasty can be performed, which uses a balloon or stent to clear the plaque and open up the artery. Another option is carotid endarterectomy, where a neurosurgeon or vascular surgeon makes an incision into the side of the neck and in the artery to clean it out. Through either approach, the goal is the same: to open the artery back up, preventing blood clots and in turn, preventing stroke.



Brendan Eby, MD, is an assistant professor with the departments of neurology, neurosurgery and radiology at Washington University School of Medicine and the stroke medical co-director at Barnes-Jewish St. Peters Hospital. For more information, call 636-928-WELL.

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‘Un-Retiring’ and Your Benefits

There’s a renewed sense of purpose, but also financial considerations.

Previous generations looked at retirement as a destination, but more recently seniors have begun returning to some form of work. These so-called “encore careers” take advantage of special skills and a long-term knowledge base to keep us active and engaged. But the money you make is subject to IRS-imposed rules and limits on benefits.

A GROWING TREND

As many as 40% of workers over 65 have recently reported retiring and then rejoining the workforce. Some are simply bored with sitting idly by, while others might have experienced a financial need.

In all, the number of seniors currently working or seeking employment has doubled in the last 30 years. But the extra income associated with these jobs can impact your Social Security and Medicare benefits, as well as pension payouts and other associated retirement accounts.



SOCIAL SECURITY

“Un-retiring” shouldn’t involve jobs with wages that jeopardize your benefits. Many choose to begin drawing on their Social Security at age 62, rather than the full retirement age — and that has a direct impact on how much you can earn in an encore career. Early retirees can only take home around \$19,500 before their benefits change. Social Security checks go down \$1 for every \$2 earned after that threshold is met. So a person who began drawing Social Security at 62 then got part-time job making \$25,000 a year will see their annual benefits reduced by \$2,720. If you wait until full retirement, which is 66 for those born before 1960, allowable outside earnings rise to around \$52,000. Benefits are only reduced \$1 for each \$3 earned.

MEDICARE AND PENSIONS

If you find lucrative work after age 65 but choose to keep Medicare, you might face surcharges by moving into a different income bracket. By law, high earners pay more for Part B and D coverage. Certain tax rules also apply to your pension or retirement accounts. Retirement accounts like 401(k)s and IRA require a minimum distribution of funds beginning at age 72, whether you “un-retire” or not. Those who don’t could incur a potential tax penalty of 50%. Roth IRAs are an exception. Some businesses suspend benefits if you return to work; check with the human-resources department at your former employer to find out more.



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The choice of a lawyer is an important decision and should not be based solely on advertisements.
Meetings with a lawyer will be by appointment only.

Keeping Safe as a Senior

There is help if you've become part of a growing statistic. As many as 5 million older Americans are abused annually, according to the National Council on Aging. That's one in 10 Americans over the age of 60. The good news is, a broad spectrum of advisors, caregivers and law-enforcement personnel stand ready to come to your aid.

DEFINING ELDER ABUSE

Elder abuse may be perpetrated by children, spouses or other family members, along with staff members at assisted living facilities, nursing homes or hospitals. It may include emotional or physical abuse, exploitation and neglect, sexual abuse or abandonment. The first steps in keeping safe as a senior involve self-care: Stay active and connected, since social isolation can put you at risk. Familiarize yourself with the rights you hold, and the resources at your disposal. There's help available, both locally and nationally, if you've been verbally assaulted, willfully deprived of needed assistance or financially exploited.

NATIONWIDE RESOURCES

Federal law enforcement agencies are designed to investigate, detect and apprehend alleged offenders, including those who have committed elder abuse. Find out more here: <https://ovc.ojp.gov/program/elder-fraud-abuse/overview>. The U.S. Department of Justice hosts a searchable index for helpful agencies in your area, along with special hotline numbers depending on the situation: <https://www.justice.gov/elder-justice/findsupport-elder-abuse>. The National Adult Protective Services Association provides a state-by-state map of care providers: <https://www.napsa-now.org/aps-program-list/>. Unsure of your rights? Head to the National Center on Law and Elder Rights to find out more: <https://ncler.acl.gov/>. The Elder Justice Coalition is also a valuable resource for those in need of help: <http://www.elderjusticecoalition.com/>.

FINDING LOCAL HELP

Area agencies on aging are designed to address a range of needs for those age 60 and older, providing services to help seniors remain at home into their golden years. Local domestic violence organizations focus on securing your safety, holding abusers accountable and promoting public awareness. Legal aid services provide courtroom assistance to those in need by offering advice and representing seniors in individual cases.

You may also be able to rely on local arms of national agencies meant to combat Medicaid fraud, sexual abuse and other issues specific to aging. Long-term care ombudsmen work as your advocate in finding a facility and getting the best care, but also in filing local complaints.



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Hip Fractures: A Growing Problem

Fall injuries can lead to serious problems down the road.

Many began to make jokes as a commercial ran for years where a woman cried out, “I’ve fallen and I can’t get up.” But it’s no laughing matter for those who’ve suffered a hip fracture. In fact, these injuries are associated with high rates of mortality among the elderly.

Thankfully, there are preventative measures and improved treatments for those at risk of this potentially debilitating injury.

WHO’S AT RISK

White women are the most susceptible to hip fractures, sustaining some three-quarters of these injuries. But age plays a huge role: Those 85 and older are up to 15 times more likely to suffer a hip fracture as those who are 60-to-65, according to the CDC. Osteoporosis is also a risk factor, since the disease weakens bones. More than 10 million Americans over the age of 50 already suffer from this disease, according to the National Osteoporosis Foundation — and 34 million more have risk factors.

SOARING NUMBERS

Hip fractures are projected to reach nearly 290,000 a year by 2030, according to the Centers for Disease Control and Prevention. More than 95% of these injuries involve falling, typically sideways

onto the hip. Depending on the injured person’s age and overall health, a hip fracture may result in longterm impairment, lengthier admissions to a nursing home or even death.

TREATMENT OPTIONS

Hip fractures typically involve hospitalization and surgery, with a one-week stay as the typical length of treatment. Many will then have to transfer to a rehabilitation center or nursing home in order to regain full mobility. As many as one in three seniors who were living independently end up spending at least a year in rehab, according to the Journal of the American Geriatrics Society. Deaths associated with hip fractures continue at a worrying pace. But better treatment options, including advances in hip replacement, have shortened recovery times and improved outcomes. Some 400,000 hip replacements are completed each year in the U.S.

AVOIDING FALLS

Daily exercise improves balance and increases leg strength, both of which factor into fall injuries.

Have your doctor review your prescriptions if you are having problems with drowsiness or experiencing dizzy spells. These side effects only increase the risk of a fall. Your diet should include the recommended amount of vitamin D and calcium.

Financial Planning

It's never too late to create a road map for your future.

Protecting and growing your assets in retirement is an ongoing process. Some wait too long to begin planning for the future. But even those who felt they had a handle on these things as a career person will find that financial planning changes as we grow older. Life events, volatile markets, medical issues and updates in benefits packages come into play. That's why it's best to regularly reevaluate your plan.

GET ORGANIZED

Most people retire with various savings plans, mutual or stock fund, retirement account and other benefit packages. Start any financial planning journey by getting all of these things in order. A consolidated portfolio gives you the best understanding of where you stand. You'll also be in a better position to stay on top of changes in the market which can have a huge impact on any 401(k) benefits.



ASKING TOUGH QUESTIONS

A customized, updated financial plan has to take into account exactly where you are in retirement — that means where you are in life. How active will you continue to be? How is your overall health? Can you foresee serious issues arising in the near future? Will you work part-time and if so, for how long? Do you have plans to travel, or have you begun to stick closer to home? Do you foresee yourself downsizing, or moving into a shared-living environment? How will you disperse your estate? Discuss all of the options, while focusing on how changing your stock plan or portfolio will impact your financial future.

COMMON ISSUES

The goal is to save enough money in order to live comfortably into your golden years. If you made a comprehensive plan as a younger person, you may enter retirement with a sense of confidence. But life can throw you a curve ball, even during a period that's supposed to be about taking it easy after a lifetime of work. Continue working closely with a trusted financial advisor to make sure that the money you've saved is being smartly invested. Discuss options that will better protect you should an emergency happen. If you choose to continue working after drawing Social Security or Medicare benefits, discuss the tax implications.

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How To 'Age In Place'

Some of us have already found our forever homes. Seeking independence, even later in life? Changes can be made now to ensure that you'll always remain in the place where you've lived and loved.

WHAT DOES IT MEAN?

The U.S. Centers for Disease Control and Prevention defines "aging in place" as living in "one's own home and community safely, independently and comfortably, regardless of age, income or ability level." If you want to extend your independence, rather than moving in with family members or shifting to a care facility, you'll need to ready the house now with senior-focused remodeling projects meant to ease the worries that accompany growing older. The National Association of Home Builders recommend that you focus on the kitchen and laundry areas, the general floor plan, exterior of the home and the bathroom.

KITCHEN AND LAUNDRY

Consider installing pulldown shelving in the easiest-to-reach upper cabinets in your home, in order to make food, dishes and other stored goods more accessible as you age. Roll-out trays or a Lazy Susan should also be placed in base cabinets. Side-by-side refrigerators limit the amount of bending that must be done when retrieving things. The same goes for your washer and dryer configuration, where you should also switch to a top-loading option.

EXERIOR IDEAS

Switch to low-maintenance siding, which doesn't require the same kind of regular attention as natural woods like cedar. Shift your outdoor plantings to shrubs and bushes that do not need continual pruning or shaping, rather than flowering options.

Natural landscaping can limit, or even eliminate the need for regular lawn care. If you're downsizing anyway, consider a one-story home in order to avoid using stairs in your daily activities. Brick homes are also very low maintenance.

BATHROOM PROJECTS

Surveys say almost 90% of seniors want to remain at home as they age.

Unfortunately, the bathroom can become one of the most dangerous places in the home. Install additional bracing and handle bars around the shower, toilet and tub. Consider purchasing a shower seat, to limit the amount of time standing. Replace the toilet with a height-adjustable model, or the taller versions that make sitting and standing easier. Proof the area against falling with rubber matting in the shower, and bathroom flooring that's slip resistant.



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