It’s Not Too Late

25th Anniversary Maine Senior Games

All of the events listed to the right are open to new and returning male and female athletes from age 50 to 100. If you would like to participate, call ahead or send an email. Or, just show up! It costs only $35 for unlimited events for Maine residents and $40 for those from outside Maine. Call Jo Dill at 207-396-6519 or jddill@smaaa.org. Find more information at www.MaineSRGames.org or see Facebook for updates and photos. All athletes receive a t-shirt and a 25th anniversary commemorative tote bag.

Table Tennis
Friday, September 16, 9am
Pine Tree TMA, New Gloucester

Swimming
Saturday, September 17, 12:30pm
Greely HS, Cumberland

Cycling
Sunday, September 18, 9am (Rain date: Sept. 25)
Kennebunkport Bicycle Co., Kennebunkport

10K Road Race
Sunday, September 18, 9am, Portland Trails

Bowling Candlepin Singles/Doubles
Thursday, September 22, 10a/12p
Big 20, Scarborough

Racquetball
Saturday, September 24, 9am
Racquet & Fitness Center, Portland

Bowling 10 Pin Singles/Doubles
Sunday, September 25, 10am
Yankeelands, Portland

Archery
Sunday, October 2, 9am, Lakeside Archery

Medicare Update
The Affordable Care Act is delivering on its promise of better health care for people with Medicare. The average prescription drug premium will not increase in 2012. People who hit the donut hole are paying less for prescription drugs. People with Original Medicare can recommend preventive benefits and a new annual wellness visit without paying out of pocket.

Beneficiaries should still carefully compare their current plan’s coverage with what is being offered in 2012. Our staff and volunteer Medicare Resource Specialists will be trained on the latest developments and be ready for Open Enrollment, which runs from October 15 to December 7, 2011.

Call SMAA at 207-396-6500 or 1-800-427-7411 for an appointment to review your plans.

Your gift to the 2011 Annual Fund needed to provide critical operating support
I’d like to thank our 1,153 generous donors for your gifts to the 2011 Annual Fund. In just a few weeks at the end of September, SMAA’s 2011 fundraising year will close. If you are not among the many donors who have given this year, please consider doing so now!

One goal that we hope to reach is $127,000 for Meals on Wheels. We are now just $15,000 short of that goal. You can make the difference. Restrict your gift to Meals on Wheels and help us reach that goal. Or, if you prefer, make an unrestricted gift for general operating support. All gifts are deeply appreciated. Please send your gift to: Development Office, 136 US Route One, Scarborough, Maine 04074, or make your gift securely online by visiting our website at www.SMAAA.org.

Enjoy the final days of summer, or make your gift securely online by visiting our website at www.SMAAA.org.

Laurence W. Gross
Executive Director
IMPORTANT MEDICARE UPDATE
New Dates for Medicare Open Enrollment
October 15 to December 7, 2011
Call SMAA at 207-396-6500 or 1-800-427-7411 for an appointment to review your plans. We don’t sell insurance, so we offer unbiased health insurance counseling and assistance.

When I’m visiting a patient in their home, I feel like I get the broader picture of their everyday life and struggles.”
– Christie Blanchard RN

Restless Legs Syndrome (RLS)
Renamed Ekbom Disease

Dr. Regis Langelier will hold a free informational meeting on October 6 from 2:30 to 4:30 at the Southern Maine Agency on Aging to talk about the new understanding of RLS as a disease that usually involves more than the legs in many cases. Dr. Langelier says, “A neutral name, such as Ekbom Disease (EKD), will make it easier to discuss the full spectrum of the disorder from mild to severe.”

A recent program on RLS will be shown and handouts will be available to share with healthcare providers and family members.

Dr. Langelier is a volunteer leader and RLS Foundation Board Member and will discuss the reasons for the name change and provide an update on RLS from the June 2011 Sleep Conference in Minneapolis, Minnesota. This meeting will be a chance to get information that should help you be more hopeful about improving management of RLS and related sleep problems. Please RSVP by October 3 at 207-351-5352 so that enough snacks will be available. The meeting will be held at the SMAA office, 136 US Route One, Scarborough, Maine.

From the Mail

Dear Senior News Editor,

According to Archbishop Desmond Tutu, “The U.S. has allocated $185 billion dollars to augment its nuclear stockpile over the next decade, on top of its annual nuclear weapons budget of more than $50 billion.” Did you know that?

This means $53 billion, $500 million – ($58,500,000,000) annually of our tax dollars on a project that is anathema to world peace and in my opinion, totally immoral.

So how can we muster the necessary funds to maintain a well-run, transparent public health care program for all Americans? Phone or write our Representatives in Congress to drop $58 billion dollars from our nuclear program, and assign those needed funds to a one-payer Health Care Plan and for University scholarships for worthy achievers.

Loretta MacKinnon, Yarmouth, Maine

Use the following phone numbers or websites for email:

Rep. Chellie Pingree
1037 Longworth House Office Building
Washington, D.C. 20515
Phone: (207) 225-6116
Fax: (207) 225-5390
Website with a link for email: http://pingree.house.gov/

Senator Olympia Snowe
154 Russell Senate Office Building
Washington, D.C. 20510-0001
Phone: (207) 224-3344 or (800) 432-1599
Fax: (207) 224-1946
Website with a link for email: http://snowe.senate.gov/

Senator Susan Collins
413 Dirksen Senate Office Building
Washington, D.C. 20510
Phone: (202) 224-3523
Fax: (202) 224-2693
Website with a link for email: http://collins.senate.gov/

Rep. Michael Michaud, Bangor, ME
Phone: 942-6935
BOOK REVIEW

Elder Rage, or Take My Father... Please!
How to Survive Caring for Aging Parents
by Jacqueline Marcell
Review by Dr. Rudy Tanzi

A new study identifies the causes of Alzheimer’s disease for the past 30 years, I have been in frequent contact with many families afflicted with Alzheimer’s disease. I know how difficult it can be to deal with loved ones suffering from this terrible disease. This is why I can tell you that this Book-of-the-Month Club selection is a must-read for everyone with aging loved ones—and everyone who will eventually become one.

With brutal honesty, Marcell transports us into her parents’ dysfunctional home where her once-adoring father begins lashing out, yet acts normal in front of his doctors. What takes so long to uncover is that her father’s deeply engrained life-long behavior pattern of yelling to get his way (only to immediate family) is becoming intermittently distorted with the onset of dementia, specifically Alzheimer’s—yet, somehow, not one medical professional uncovers it for an entire year.

Woven into this page-turner is a wealth of practical information with creative solutions for effective medical, behavioral, social, legal, financial and emotional management of difficult elders who resist care—all punctuated with witty TV, movie and musical references which turn the hits into laugh-out-loud hilarity.

Through Marcell’s trials and eventual eldercare success, the captivated reader gains valuable knowledge on recognizing early signs of dementia, how to get an accurate diagnosis and treatment of Alzheimer’s, elder-proofing the home for safety, getting an obtinate elder to accept cleaning and caregiving help, see a new doctor, give up the car keys and driving, attend adult day care, bathe, dress and eat properly, and much more.

Marcell also includes a comprehensive and invaluable self-help section: 25 Questions & Answers, Long Term Care Insurance Guidelines, Valuable Resources, Recommended Reading, and an extensive Addendum on diagnosing and treating aggression in dementia by Rodman Shankle, MS, MD, former Medical Director of the UC Irvine Alzheimer’s Center, which helped make ‘Elder Rage’ required reading at numerous universities for courses in geriatric assessment and management.

‘Elder Rage’ has received more than 50 prestigious endorsements by more medical experts and celebrities than any book I have ever seen of this genre. I can highly recommend it too, as it delightfully entertains while masterfully educating everyone from the family to the physician.

Dr. Rudolph E. Tanzi, Joseph P. and Rose F. Kennedy Professor of Neurology, Harvard Medical School, Director of Genetics and Aging Research Unit, Massachusetts General Hospital, and Co-author of Decoding Darkness: The Search for the Genetic Causes of Alzheimer’s Disease. I can highly recommend it too, as it delightfully entertains while masterfully educating everyone from the family to the physician.

Jacqueline Marcell is an author, speaker, and radio host of “Coping with Caregiving.” Her book Elder Rage has been published by Impress Press.

To Avoid Fraud, Thoroughly Research Investment Tips
by Gerri Walsh, FINRA Investor Education Foundation

There’s nothing wrong with getting investment ideas from friends and acquaintances, but investors shouldn’t just rely on casual tips. Before handing over any money, you need to thoroughly research the investment and the person selling it.

It was a lesson that Carolyn and Ray Thompson of Brewer, Maine, learned the hard way. Friends of theirs told them about a new and exciting green energy opportunity involving windmills. They were sold on the windmills would be small enough to install on rooftops, Ray Thompson, 71, said. Shareholders could purchase exclusive territories and lease windmills to homeowners and businesses.

The Thompsons invested $30,000 and were to receive shares in the windmill company, three territories in which they could launch their business and three free windmills of their own. But after traveling to Las Vegas for the initial shareholder meeting in 2008, the Thompsons realized they had been scammed—there were no innovative new windmills. The Thompsons and about 200 other investors were shown a full-size windmill, still being set up in the middle of the Nevada desert.

“When I saw that windmill,” said Carolyn Thompson, 65, “I couldn’t stop the tears from rolling down my cheeks. It was nothing like what they were telling us.”

Con men regularly rely on word-of-mouth to bring in new victims. Or they make their pitches to groups, knowing that subtle social pressure brings in more money. Psychologists call it “social consensus,” and it is the foundation of affinity fraud. The thinking goes that if everyone is doing it, it must be okay. But the problem is that no one looks behind the curtain to question the man working the levers.

In the Thompsons’ case, that man had a long history of alleged scams and was eventually convicted of fraud in a federal district court in California. “What we really feel bad about,” said Ray Thompson, “is that we talked to other people and got them into it, too. They lost $10,000 each. My losses are my fault, but when I bring other people into it, I’m really sorry about that.”

SaveAndInvest.org is a project of the FINRA Investor Education Foundation, in collaboration with the Maine Department of Professional and Financial Regulation Office of Securities, AARP Maine and the U.S. Securities and Exchange Commission.
Diamond Mining
By Lenora Trussell, RN, CHPN

I was less than a minute away from getting up after a four and a half hour dental procedure. My dental hygienist was putting some finishing touches on my temporary when I felt something hit the back of my throat.

I had inadvertently swallowed a diamond drill bit. We discussed going to the ER to have my stomach pumped. However, I opted to put my faith in the “this too shall pass” theory. Dutilfully, I went home and ate oatmeal, ground flax seed and wheat bran along with numerous prunes. I had the daunting task of careful inspection the next couple of days as I developed a ritual of diamond mining that I will not soon forget.

What transpired when I told my friends and co-workers and even a few carefully chosen patients was somewhat of a surprise to me. The response to my recounting this story was almost uncontrollable laughter. Several of my stories will be recounted along with this one of the diamond mining—a ritual to the ER to have my stomach pumped. However, I opted to put my faith in the “this too shall pass” theory.

Greatly relieved, on the third day of my fiber diet and inspection duties, the diamond bur made its appearance. Both it and I were none worse for the wear. Even in dire and stressful times, the gift of laughter is an appreciated remedy. When it is my time to go, I hope that many of my stories will be recounted along with this one of the diamond mining in the rougheage.

Lenora Trussell, RN, CHPN, is a writer and presenter of workshops about great expressions of laughter from almost everyone I told.

One of my hospice patients was having a hard time coming to terms that her life was coming to an end. Her sister who was also a nurse nearly fell out of her chair laughing so hard at my drill bit tale. She then shared a story of her sister, the patient, who was driving with her four young children and the car broke down. No one was stopping to help because she did not have anything white to hang from the antennae to alert passing drivers. Being a well-endowed woman, she removed her bra and hung it out with good effect. This story made all of us—including the patient—laugh, bringing the much-needed relief from the intensity of the visit.

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Off to Arizona
By Cecile Thompson

It was an “Oh, my gosh!” moment. We rounded a curve and suddenly there were the red rocks of Sedona, Arizona! Sedona, Arizona is 113 miles north of Phoenix and a whole other world away. We left the city and cactus-covered terrain behind and were now surrounded by breathtakingly beautiful buttes, rock formations and hillsides. The rust-colored, vivid red hills were intertwined with stucco homes, hotels, stores and malls—even an adobe McDonald’s!

While exploring the town, we enjoyed a leisurely brunch. From the restaurant’s balcony, we looked across a stream and pine-covered valley to a high rock formation called “Snoopy.” It really does resemble the Peanuts Snoopy character with his head, fat little tummy and feet, toes up, contentedly lying atop his dog house.

Sedona is a shopper’s and souvenir hunter’s paradise, with everything from expensive, locally made jewelry to the cheapest of cheap imports. You can find anything from sculptures to collectibles, made from copper, clay, native wood, silver and stone, and jewelry crafted of sterling silver and turquoise. We found tooled leather boots, purses, fringed jackets, and stunning rugs and blankets woven of locally grown wool. I recall seeing an 8’ x 10’ Navaho-woven rug of vivid red with a white and black center hanging on a shop wall, priced at thousands of dollars and worth every cent! The Sedona area is home to hundreds of artists, and provides a prime showcase for their wares.

To the northeast of Sedona is the famous Oak Creek Canyon. As suddenly as they had appeared, the red rocks soon disappeared. Just in time for lunch we found a welcoming little café at the Canyon’s base. Its open dining area was nestled among the trees and sat by a babbling brook, offering a pleasantly refreshing break in the middle of a hot, Arizona day! We then traveled up a winding, steep road alongside the canyon over a forested mountain overlooking a deep, green valley that was filled with lush pine and aspen.

No visit to central Arizona is complete unless you drive north to visit the Grand Canyon. It is a truly awesome experience! The vistas are stunning any time, but they are most impressive as the sun sets and brings to life layers of colored limestone, making the walls of the canyon sing with their beauty. The ever-mighty Colorado River continues to carve its way through the gorge as it has for what scientists estimate at least 17 million years. During our brief visit to the Canyon, we experienced a rare sighting of two adult California condors, each boasting an impressive wing span of almost 9’/feet!

Upon our return to Phoenix, we stopped to see a residential dwelling that had been carved into sandstone cliffs around 700 AD by the Sinagua Indians. It consisted of 20 rooms and was home to as many as 50 people. A carefully chosen site, it overlooks a lush meadow and small river that gave these native people what they needed to survive. These carefully preserved remains serve as just one example of the hundreds of early civilizations that at one time flourished throughout the southwest.

We had a plane to catch—it was time to go home and think about our next travel destination.

Cecile Thompson can be reached at Crt1119@yahoo.com.
Since 1991, one day each year has been designated as National Depression Screening Day. This year, that day is October 6. There may be opportunities to have free screenings in the community on that day, or it may simply serve as a reminder of how important being screened for depression can be. But first, why all the fuss about depression, you ask?

According to the CDC, by 2020 Major Depressive Disorder will be the leading cause of disability in the world for women and children. Currently, women between the ages of 18 and 45 make up the largest proportion of people suffering from this treatable illness. Often, however, depression is unrecognized, undiagnosed and untreated, especially in older people. Part of the problem is that depression is still shrouded in stigma and misunderstanding and depression can take many forms.

Depression is not a normal part of aging, and it is not an unavoidable side effect of caregiving, and yet these are often assumptions people make. We assume depression means being sad, or down in the dumps. Depression can appear very differently, especially in older people. Often, depression in older people looks very much like dementia, creating confusion, memory problems, apathy, lack of appetite, sleep disturbances or delusional thinking. Undiagnosed depression may also cause physical symptoms including fatigue and general ached and pains. For caregivers, depression can create an additional burden. Feeling overwhelmed by responsibility, stress and worry can easily lead to depression. There are strategies to address the challenges of caregiving, and identifying them is the goal of the Family Caregiver Support Program. Learning about resources, and attending classes and support groups can greatly reduce the impact of caregiving, and relieve the stressors that create a depressive state. In addition, addressing any symptoms of depression is also vital for caregivers, as they need to care for themselves in order to care for anyone else.

Many myths surround depression. The fear of being labeled “mentally ill” or “crazy” can create roadblocks to care. Depression is a medical illness, which can be treated, no matter how old someone is, whether depression is labeled dementia, may be the perfect opportunity to gain the knowledge you need to manage your life and your health. For more information, see your doctor or go to http://www.mental-healthscreening.org or http://www.helpyourselfhelpothers.org/.

Are you assisting an older adult? Do you spend time helping with errands, household chores, finances, meals, health care or personal care? If so, then the Family Caregiver Support Program can help support you as you help someone else.

September 15, 22, 29, October 6, 13 and 20, 1-3PM: Savvy Caregiver. Westbrook Community Center. Contact Kate Cole Fallon at 1-800-427-7411 x 558 to pre-register (required).

September 20, 27, October 4, 11, 18 and 25, 6-8PM: Savvy Caregiver. Windham/Raymond Adult Education. Contact Ann O’Sullivan at 1-800-427-7411 x 541 to pre-register (required).

October 26, November 2, 9, 16, 23 and 30, 9:30-11:30AM: Savvy Caregiver. Southern Maine Agency on Aging, Scarborough. Contact Ann O’Sullivan at 1-800-427-7411 x 541 to pre-register (required).

November 1, 8, 15 and 22, 4-6PM: Putting the Puzzle Together: Getting Ready to Offer Support to Older Adult Family and Friends. Southern Maine Agency on Aging, Scarborough. Contact Ann O’Sullivan at 1-800-427-7411 x 541 to pre-register (required).

November 3, 6-30PM: Options for Older Drivers. Wells-Ogunquit Adult Community Education. Contact 646-4565 to register (required).

Please use the numbers listed to register. Feel free to call Kate Cole Fallon or Ann O’Sullivan at SMAA (1-800-427-7411) with questions.
The Physician’s Role in Evaluating Driving

Laurel Coleman, MD
Geographic Center of Maine Medical Center

O ne has heard that a politi-
cian talking about cut-
ting Medicare is the “third rail” of American politics. Discussing driving safety feels a lot like that for physicians. We know it is an important issue, but it is a dif-
cult one that always brings up strong emotional responses from pa-
tients and their families.

Normal aging can cause physi-
cal and mental changes that affect one’s ability to drive. Arthritis can cause stiffness and limitation of neck or leg movements. Slowed re-
ation times can impair a quick re-
sponse, and changes in eyesight can make night driving more difficult. Some specific medical problems cer-
tainly can affect driving ability, but often it is a combination of problems that create cause for concern about driving safety. Medications may be a source of problems, and any new medications should be monitored closely for impairing alertness or decision-making ability.

Most physicians do not routine-
ly ask their older patients about their driving, even though getting older does not necessarily mean that one’s ability to drive safely diminishes. However, it is the physician’s re-
sponsibility to discuss the issue and do some basic evaluation of driving safety if a person has a diagnosis of a seizure disorder, Alzheimer’s dis-
case or other dementia, serious heart problems, or if a patient uses daytime doses of sedatives or pain medications. If a family member is concerned about a patient’s driving safety and discloses it to the physician, then that should also trigger an office evaluation.

However, there is no general agreement about exactly how a physician should evaluate driving skills. There is no specific test or procedure that a physician can do in the office that accurately predicts whether a patient is a safe driver. I believe that a physician should bring up the subject of driving safety and ask whether the patient has noted any recent incidents of get-
ting lost, minor accidents, or moving violations. If a family member ac-
companies the patient, it is wise to ask them if they have been a pas-
enger while the patient was driv-
ing and if any problems were no-
ticed. A physical exam can also pro-
vide warning signs of possible risks, with the physician’s attention fo-
cused on the patient’s vision, cogni-
tive ability, speed of processing in-
formation, visual-spatial ability, and overall mobility and strength. Sometimes a course of rehabilita-
tion services from physical and oc-
cupational therapists can address certain problems and improve over-

chronic illnesses often progress to the point where driving becomes less safe. In that case, I discuss the need to consider “driving retire-
ment.” Just as one ultimately re-
tires from the stresses of a daily job, at some point our physical body may no longer be able to perform the many necessary tasks involved in driving safely, and at that point “driving retirement” would be a very wise decision.

For all of us, driving is a privi-
lege, not a right. Physicians have a role in discussing safe driving skills with a patient and referring the pa-
tient for therapy or formal driving evaluation if problems are suspect-
ed or observed. Safe driving is not only a personal health issue but also a public health issue, because an unsafe driver risks both his own health and the health of others. Get-
ting older does not automatically make someone a bad driver, but everyone—physicians, patients and family members—can work to-
ther to insure that older adults contin-
ue to be safe drivers.

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Dr. Glen Knock

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Dr. Glen Knock

If you, a friend, or a loved one

wears dentures that spend much of the time either

floating around in the mouth or, even worse, sit-
ing in a glass, then there are many new solu-
tions to this problem. Many people wear their dentures for too

many years before they are re-
made or even relined. Sometimes this is due to the fact they weren’t
told to get them checked every year. Sometimes they just can’t afford to keep up with the mainte-
inance. A lot of the time, they just “get used to them” and forget to think about doing anything further about their dentures.

The American Dental Associ-
ation recommends that dentures be redone or relined every 3-4 years. The main reason is that the bone supporting the dentures will erode away if they don’t fit cor-
rectly, hence they get loose. When this happens simple biting becomes a chore and a hopeless feeling of ever being able to bite into an apple again takes place. Many people are fine with this feeling, but many others wish that something could be done about it.

One solution could be as sim-
ple as remaking the denture to the eroded ridges. Sometimes this will improve the bite tremendously.

Another solution could be to re-
line the inside of the denture to fit better. Most dentists are capable of doing these procedures, which are the least expensive.

To truly have “Tight Den-
tures” the placement of Mini Den-
tal Implants can be a Godsend. These tiny, FDA approved Titan-
um implants have revolutionized dentistry and have made thou-
sands of denture wearers able to “bite into that apple.” A Mini Dental Implant, once placed, can anchor an upper or lower denture and keep it from dislodging and “floating” around in the mouth.

No need for all that goopy den-
ture adhesive—it becomes a thing of the past. The upper denture can be so well anchored with “Mini” that it can be horseshoe shaped and not have plastic in the roof of the mouth! Most of the time, to do this, several implants have to be placed.

Another great advantage of the Mini Dental Implants is that they are one-third to one-half the cost of conventional implants. And most of the time they only require one visit! Next time we’ll talk about how Mini Implants can be used to replace one or more

missing teeth.

A nice benefit is that with Mini Dental Implants there is no need to cut or drill bone and then place an abutment to anchor the implant.

If you, a friend, or a loved one

wears dentures that spend much of the time either floating around in the mouth or, even worse, sitting in a glass, then there are many new solutions to this problem. Many people wear their dentures for too many years before they are remade or even relined. Sometimes this is due to the fact they weren’t told to get them checked every year. Sometimes they just can’t afford to keep up with the maintenance. A lot of the time, they just “get used to them” and forget about doing anything further about their dentures.

The American Dental Association recommends that dentures be redone or relined every 3-4 years. The main reason is that the bone supporting the dentures will erode away if they don’t fit correctly, hence they get loose. When this happens simple biting becomes a chore and a hopeless feeling of ever being able to bite into an apple again takes place. Many people are fine with this feeling, but many others wish that something could be done about it.

One solution could be as simple as remaking the denture to the eroded ridges. Sometimes this will improve the bite tremendously. Another solution could be to rel ine the inside of the denture to fit better. Most dentists are capable of doing these procedures, which are the least expensive.

To truly have “Tight Dentures” the placement of Mini Dental Implants can be a Godsend. These tiny, FDA approved Titanium implants have revolutionized dentistry and have made thousands of denture wearers able to “bite into that apple.” A Mini Dental Implant, once placed, can anchor an upper or lower denture and keep it from dislodging and “floating” around in the mouth.

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Glen C. Knock, DDS
Falmouth Dental Arts
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KnockOutSmiles.com or PortlandMaineDentists.com

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Jason Wilson, MSB, CFE

PortlandMaineDentists.com

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These tiny, FDA approved Titanium implants have revolutionized dentistry and have made thousands of denture wearers able to “bite into that apple.” A Mini Dental Implant, once placed, can anchor an upper or lower denture and keep it from dislodging and “floating” around in the mouth.

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The Blessings Of Hospice Care

By Linda Sprague-Lambert

Christmas Eve 2006 gave me my most dreaded news. Dad had colon cancer that had spread to his liver and lungs. I was devastated. I couldn’t bear to tell my dad or the rest of the family. The doctor said six months to a year to live, probably closer to the lesser amount. I wanted dad to live the rest of his life with the dignity that had always been his lifestyle. Caring for someone I loved who had a terminal illness was scary. I started my research with a meeting at my church on death and dying. The word HOSPICE came into my realm of understanding. I had my support network.

Hospice is a philosophy of care that is designed to help reduce both the physical pain and emotional suffering of patients during the final stages of illness. Contrary to what many people think, hospice is not a physical place. (However, there are Hospice houses that provide care when a patient is close to passing and the family needs that extra level of support.) Hospice is a service that comes to wherever people live, whether it’s an assisted living facility, a skilled nursing facility, a hospital or a home. The fundamental belief of hospice is that every person deserves to die pain free and with dignity and that families deserve care and support as well.

Hospice is prescribed through the patient’s physician when he or she has:

• Progressive declining health, despite treatment
• Increased or uncontrollable pain
• Frequent hospitalizations
• Repeated or multiple infections
• Progressive or profound weakness or fatigue
• Shortness of breath with or without oxygen
• Decreased ability to perform regular activities of daily living
• Alterations in mental status
• Exhausted patient and family or caregivers
• The desire of the patient and family to stop aggressive treatments

I contacted my dad’s primary care physician and requested that he make a referral to Beacon Hospice. Within 24 hours, I got a call and a meeting was set up to meet dad, mom and the family, to make a medical assessment and plan for his care.

The care group included a home health aide who came to help Dad with daily tasks such as showering, shaving and dressing. He had a nurse who provided the care and support he needed so he would be comfortable and pain free. We were able to get adaptive equipment through Medicare to make daily life easier. The family also received the support of a trained minister, a social worker, a respite volunteer and also grief support.

Dad passed at home surrounded by his family thanks to hospice care. It’s a wonderful service. My mom is receiving the same service today making it easier for us all.

Linda Sprague-Lambert is a SMAA Medicare Specialist with office hours at the MacArthur Library in Biddeford. She can be reached at 207-776-4759.
Planning for the long-term care of a loved one with special needs requires thought and preparation. The fact is, when it comes to the future needs of a family member with a disability, the possibility that they may outlive you is something that must be considered, especially when the individual is a minor or adult child. Preparations include estimating possible future caregiving costs, as well as making sure all assets are managed properly to best benefit your loved one.

Protection when you need it most

Sometimes families neglect inheritance issues for special needs family members because they assume siblings or other related caregivers will simply step in and take over the caregiving duties should the need arise. Even if families have reached an agreement on caregiving responsibilities, it is still important to address the management and division of assets and to have your preferences clearly and legally defined. You also want to be sure you understand all of the legal guidelines so that your loved one with special needs does not lose benefits from government sources. For instance, many people are not aware that with Supplemental Security Income (SSI), a single disabled person cannot own more than $2,000 in assets. One component you might consider when setting up your long-term financial plan is the establishment of a “Special Needs Trust” funded with a form of life insurance.

A “Special Needs Trust” is established to ensure that the disabled individual’s inheritance will supplement, not replace, any government assistance programs they may be eligible for. Aspects of a “Special Needs Trust” include:
- Appointing someone to take care of your loved one’s property and money.
- Designating a guardian for children less than 18 years of age.
- Integrating the wishes spelled out in the trust with the remainder of the parent’s estate plan.

Get the help you need now for future peace of mind

A “Special Needs Trust” is just one tool that can help you address financial issues making life much easier for your loved one and their future caregivers. With proper planning, your love—and your money—will be set to go the distance. For additional information on “Special Needs Trusts” it’s important to consult with an attorney in your state of residence who specializes in special needs estate planning.
Osteoporosis Healthcare Network
National Osteoporosis Foundation of Southern Maine Support Group

By Deb Smith & Joanne Lannin

Ann Murphy had no idea she had osteoporosis until she took a fall in 1990 and broke several bones. As Murphy has since learned, that’s the typical way most people discover they have osteoporosis, which is a progressive decrease in bone mass that leads to fragile bones, much more prone to fractures. “I was shocked when they told me,” she recalls. “At the time, they didn’t do much for osteoporosis. They told me to drink more milk and take calcium.” The research, medicines and bone density testing have changed drastically for the better,” she says.

While drinking milk and taking calcium are still advised, a lot has changed in terms of diagnosis and treatment, as well as support for people with osteoporosis. In 1996, Dr. Ann Babbitt, an orthopedic surgeon at Greater Portland Bone and Joint Specialists in South Portland founded the Osteoporosis Healthcare Network with the mission of increasing awareness and education about osteoporosis and to establish a support group for people with osteoporosis and their friends and families. Murphy, who is a member, says she has learned a lot about her condition since she began attending the group 15 years ago.

“You learn something at every meeting,” agrees Cathy Masterson, another member of the group. (As a result) you change your life and what you do.”

Masterson was diagnosed with osteopenia, which many health care providers consider a precursor to osteoporosis, 12 years ago when she was 49. That’s when she began attending the support group. From the meetings, Masterson has learned a lot about her disease, including the value of exercise as one strategy to help keep her condition from advancing. Her latest plan, she says, calls for 150 minutes of active exercise each week, with half of that being vigorous exercise. To accomplish it, she walks three miles a day, lifts weights and is trying to add 20-30 minutes of daily swimming this summer.

“The support group provides so much knowledge about health care,” Masterson says, “from physical therapy to heart disease, diabetes, nutrition, exercise, eye care…we learn how inter-related these issues can be and how they relate to osteoporosis. People don’t realize how progressive this disease is and how quickly it can change what you are able to do.”

The Osteoporosis Support Group is facilitated by Mary Menard, a Licensed Alcohol and Drug Counselor. Dr. Babbitt often attends meetings to speak about various health considerations and to provide updates about osteoporosis. Other guest speakers have included a heart specialist, nutrition-al expert, foot doctor, lawyer and physical therapist.

“Speakers are experts in their fields and can impart a lot of knowledge,” says Dr. Babbitt. We’d really like more people to join us and take advantage of the great speakers we have. Anyone who is interested in the topics, as well as friends and family of people with osteoporosis, are welcome to attend.”

The support group meets the first Tuesday of each month at 800 Main Street in South Portland. The meetings are free.

There is a monthly emailed newsletter available to anyone interested in learning more about osteoporosis. You can call Greater Portland Bone and Joint Specialists office at 828-1133 to get on the email list and to get more information about the support group.

Upcoming meetings are:
October 4, Osteoporosis Update, Speaker: Ann Babbitt MD, OHN, Greater Portland Bone & Joint Specialists
November 1, Can You Hear Me Now!, Speaker: Marty Layne, Au D, Marty Layne Associates

The speaker schedule for 2012 will be available November 1, 2011.

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Members of the local Osteoporosis Support Group, Anne Murphy and Cathy Masterson.

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Mary Keefe,
Senior Care Specialist
Phone and Fax: 207-282-4975
mary@elderlivingsolutionsllc.com
www.elderlivingsolutionsllc.com
The 2010 report, “Dietary Guidelines for Americans,” explains how to eat for good health including food safety, dining out, weight control and eating on a budget. Every five years the US Department of Agriculture (USDA) and Health and Human Services (HHS) are mandated to update the report’s advice. The recent revisions were carefully planned based on scientific research to provide accurate and useful information to help the general public achieve wellness through good nutrition and physical activity.

Evidence shows that we can reduce or prevent diet-related chronic diseases by keeping our weight appropriate and making the most of what we eat. That’s far from a news flash, right? The 2010 Guidelines offer practical suggestions to help make nutrient-rich foods the basis of our daily diets.

The “My Plate” icon shown here is a visual tool for planning to get the most beneficial nutrients from all the food groups in the recommended proportions. Note that the largest segment of the plate is devoted to fruits and vegetables. One of the top segments represents whole grains and the other is for lean protein. Low-fat dairy such as milk and yogurt is featured separately on the side. This division clearly emphasizes fruits and vegetables that are high in nutrients and low in calories. The plate highlights whole grains vs. processed food choices and leaner meat or meat alternatives instead of their high saturated-fat counterparts such as bacon, hamburger, sausage, steak and the like.

On a mission to help all Americans improve their health, the Dietary Guidelines offer ways to enhance food choices and develop meal patterns to include more whole foods and less processed foods. Label reading is highly recommended when searching for the healthiest choices. Comparing products to find a cereal with half the sugar, bread with half the salt, or cheese with half the fat can make all the difference! Why fill up on foods that don’t offer any benefits?

Less is more! The fewer ingredients in a product, often the healthier it is. Even better, make your own low-fat yogurt smoothies, low-sodium bean soup, or low-fat spinach and blueberry salad!

Take advantage of the free nutrition services at Hannaford, such as the Healthy Living Store Tours where you’ll learn which items in the store are best for you! Also pick up delicious recipe ideas and helpful coupons, too!

For a free email subscription to our Eye Health Updates, visit us at www.eyecaremed.com.
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Athletes walk onto Hadlock Field for the Opening Ceremonies of the 2011 Maine Senior Games.

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Athletes walk onto Hadlock Field for the Opening Ceremonies of the 2011 Maine Senior Games.
On Sunday July 31 the excitement was palpable among the athletes who had gathered at Hadlock Field for the 2011 Opening Ceremony for the 25th annual Maine Senior Games. Athletes ranging from age 50 to 90 had gathered with banners and signs to walk onto the field accompanied by the City of Portland’s Mayor, Nick Mavodones.

Supporters and athletes were welcomed with applause and cheers from Sea Dogs fans and supporters of the Maine Senior Games. This ceremony was a great way to acknowledge the accomplished and dedicated athletes who deserve a bit of limelight for what they do to maintain fitness and friendships through Maine Senior Games. The torch was lit by Deb Smith, an advisory board member and Laurence (Larry) Gross, Executive Director of the Southern Maine Agency on Aging, threw out the first pitch.
Go Out for Lunch in Hiram!

The Sacopee Rescue Barn’s dining room is the new location for noontime dinners on the 2nd and 4th Tuesday of every month. The suggested donation is $3.50 per person or $5 for special, catered or holiday meals. If you are younger than age 60, suggested donations are $6.75 and $8. To make reservations or for upcoming menus at the Community Café made possible by the Southern Maine Agency on Aging, please call Connie Reed at 625-4057 a full 48 hours before the 2nd or 4th Tuesday.

For more locations and a complete schedule of Community Cafés, visit www.smaaa.org or call 1-800-400-6325.

The Meals on Wheels distribution center for the residents of Baldwin, Cornish, Hiram, Kezar Falls, Limerick, Limington, Newfield and Parsonsfield recently moved from Kezar Falls to the Sacopee Rescue Barn in South Hiram. “The Rescue Barn is a well-organized space for Meals on Wheels,” said Jo Ann McPhee, Nutrition Manager for the Southern Maine Agency on Aging. Connie Reed has been SMAA’s coordinator in the area for the past six years and can be reached at 625-4057.

If you or someone you know lives in Maine and could use the convenience of Meals on Wheels, call statewide, toll free 1-877-353-3771. A volunteer will deliver meals within a few days if the following applies:

• Age 60 or older (there are a limited number of spots available for people under age 60 and disabled);
• Primarily home bound (get out with difficulty);
• Unable to regularly prepare nutritious meals;
• Without consistent daytime help to prepare meals; and,
• Able to accept meals during the delivery time frame.

Do you have a short-term need? Sometimes a temporary health problem is all it takes to disrupt the normal cooking routine—just when good nutrition is necessary to heal and recover from surgery or illness. Meals on Wheels can help, even on a short-term basis.

Special thanks to Calista Cross who submitted the photo for this article.

New Location for SMAA Programs

Volunteer Sherry Campbell (on left) works with Connie Reed of SMAA to offer community lunches twice a month and to prepare Meals on Wheels deliveries west of Standish all the way to the New Hampshire border.

said Jo Ann McPhee, Nutrition Manager for the Southern Maine Agency on Aging. Connie Reed has been SMAA’s coordinator in the area for the past six years and can be reached at 625-4057.

Picture from the locations are, back row: Suzanne Ryder (Sanford), Sherry Campbell (Volunteer, Kezar Falls), Donna Lachance, (Scarborough Office), Virginia Billings (Windham), Deb Garcia (S. Portland), Maureen Moran (Kennebunk), Connie Reed (Kezar Falls), Ann MacAvoyland (Assessor-York County), Cheryl Coonin (Naples), Jeannette Newton (Yarmouth), Andi Winslow (Assessor-Cumberland County) and Laurie McFaren (Portland/Westbrook). Front row: Liz Engel (S. Portland), Patty Graves (Kittery), Elaine Plaisted (Kittery), Lilly Lavarie-Sirois (Biddeford) and Deb Folsom (Sanford). Each location listed serves its surrounding towns and cities. Missing from photo: Alan Martell (Biddeford), Alice Alexander (Portland/Westbrook) and Deborah Strachan (Yarmouth).

LOOSE DENTURES?

New FDA Clearance for State of the Art Implants at 1/3 the Cost!

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What are MDI Implants?

The MDI System consists of a miniature implant that acts like the root of your tooth and the retaining fixture that is incorporated into the base of your denture. The head of the implant is shaped like a ball, and the retaining fixture acts like a socket that contains a rubber O-ring. The O-ring snaps over the ball when the denture is seated and holds the denture at a predetermined level of force. When seated, the denture gently rests on the gum tissue. The implant fixture allows for micro-mobility while withstanding natural lifting forces.

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I n Part I of this series we dis-
cussed what happens when a per-
son dies without a will. In this
case, the estate—all the real and
personal property and any assets—
passes to his or her heirs through
the laws of “intestate succession.” If
you are a Maine resident and you
don’t have a will when you die, the
laws of Maine will determine who
will inherit your estate. In a nut-
shell, this depends on which of your
relatives outlives you.

If you don’t want state law to
decide who gets what, you should
execute a will. There are many ex-
cellent attorneys in Maine who can
give you sound legal advice about
executing a will and planning your
estate. I would strongly
suggest that you contact
an attorney for advice if
you have a home or other
significant assets.

That being said, there are also low-cost
ways to execute a will in
Maine. One low-cost option is to
contact your local county probate
court and request a copy of the
“Maine Statutory Will” form. In
Cumberland County the charge for
this will form is $1. (that’s right, one
dollar).

The “Maine Statutory Will” is a
pre-printed form, designed by law-
makers, that allows you to name the
person(s) that you want to leave
your real property (house and/or
camp), your personal property and
household items, and all other as-
ets to when you die. You may also
leave cash gifts to charities or to
your church using this form. You
need only two witnesses to execute
this document and make it legally
binding.

Another (no-cost) option is to ex-
cute a “holographic will.” The defi-
nition of “holograph” is “a document
wholly in the handwriting of its au-
thor,” from the Merrick Webster
Dictionary. A holographic will is
valid in the state of Maine as long
as the signature and the material
provisions are in your own hand-
writing. The only requirements are
that you be 18 years old and of
sound mind.

To execute a holographic will you
do not need any witnesses; you do
not need a notary; you do not need a
lawyer. All you need is a piece of pa-
er and a pen. (There have been cas-
es in which holographic wills were
executed on a handbag, scratched
onto a tractor fender, and written on
the bottom of a chest of wooden
drawers, which was later sawed out
and offered into probate in Los Ange-
les. Needless to say, none of these
methods are recommended.)

There are plenty of websites
that offer you “quick, easy, and/or
free” will preparation. However, be
forewarned that the will forms
available online may not comply
with Maine laws. The same holds
true for will forms found in publica-
tions at your local bookstore or li-
brary. The time and money you
spend getting a legitimate will pre-
pared—with the advice of an attor-
ney when needed—can give you
piece of mind about the future of
your estate.

If you have any questions, call
Legal Services for the Elderly (LSE)
at 1-800-750-5353 to speak with an
attorney at no charge. Or visit us
online at www.maineelse.org. LSE is
a non-profit organization that pro-
vides free assistance on a wide
range of legal issues to Maine resi-
dents aged 60 and over.

LSE can provide information
about how to execute your will, or
we can refer you to an attorney from
the private Bar. You may even qual-
ify to execute a will with an attor-
ney for a reduced fee.
Living Well for Better Health Workshops – Fall 2011

Tuesdays, September 6 - October 24, 1 to 3:30pm, Casco Bay YMCA, 14 Old South Freeport Rd., Freeport, call 866-609-5163 to register.

Wednesdays, September 21 - October 26, 2:30 to 5pm, Southern Maine Agency on Aging, 136 U.S. Route One, Scarborough.

Mondays, September 26 - November 7, 9:30 to 12 noon, Fore River Family Practice, 195 Fore River Parkway, Portland.

Tuesdays, October 4 - November 8, 1 to 3:30pm, MaineHealth Learning Resource Center (LRC), East Tower, Maine Medical Center, 22 Bramhall Street, Portland, call 866-609-5163 to register.

W ednesdays, October 5 - November 7, 10am to 12:30pm, Gorham Recreation Department, Gorham, call Gail Platts, 222-1630 to register.

Fridays, October 7 - November 11, 9:30am to 12 noon, MMC Family Medicine, LRC Classroom, 5 Bucknam Road, Falmouth.

Tuesday, November 1 - December 6, 2 - 4:30pm, MMC Family Medicine, 272 Congress Street, Portland.

Tuesdays, November 1 - December 13, 2-3:50pm, Portland YMCA, 70 Forest Ave., Portland, call 874-1111 to register.

*Call Jessica at 396-6583 or 1-800-400-6325 jleblanc@smaaa.org for more information or to register. Or, if you’d like to take this class in the future or closer to where you live, please call Jessica.

Volunteer Leader Training

SMAA office, Scarborough, 8:30 to 4:30pm each day, Session #1: September 15, 16, 22 & 23, Session #2: March 15, 16, 22 & 23. Call Jessica at 396-6583 or 1-800-400-6325 jleblanc@smaaa.org for more information or to register. Must attend all four days for certification.

A Matter of Balance

Are you concerned about falling?
Do you restrict your activities because you are concerned?
Are you interested in improving your balance, flexibility and strength?
Are you age 60 or older, ambulatory and able to problem-solve?

A Matter of Balance is a nationally recognized program designed to help you manage falls and increase your activity levels. The workshops are given in two-hour sessions once a week for eight weeks.

You will learn to:
• View falls and fear of falls as controllable
• Set realistic goals for increasing activity
• Make changes to reduce falls at home
• Exercise to increase strength and balance

A Matter of Balance Classes – Fall 2011

Wednesdays, September 14 - November 2, 1-3pm, MaineHealth Learning Resource Center, 5 Bucknam Rd., Falmouth, call 866-609-5163 to register.

Tuesdays, November 1 - December 13, 1-3pm, Casco Bay YMCA, 14 Old South Freeport, Freeport, call 865-9600 to register.

If you’d like to take this class in the future or closer to where you live, please call Jessica.

Sponsored by the York County Maine Military Community Network, this event will provide a wide variety of resources and valuable information available to families.

Presentations include:
• Understanding Community Resources for Seniors at 10:45
• Communicating Who You Are to Potential Employers at 11:15
• Supporting the Independent Warrior: Helping a warrior in need in crisis at 11:45
• Healing through Adventure and Fun at 12:15
• All Dads were once Kids: the importance of male parent involvement at 12:45
• Effects of Agent Orange on Veterans and their Families at 1:15

The exhibits will open at 10:30. Refreshments will be served all day. There will be fun and fitness activities for children sponsored by Operation Military Kids.

The York County Maine Military Community Network (YCMCN) is comprised of community, state and federal agencies, veteran service organizations and community members from York County all working together to ensure that current military personnel, veterans and their family members are aware of and have access to the resources needed to support them in their quest to live happier, healthier and fuller lives, plus providing a way to say, “Thank You for Your Service.”

Community Education Series in Gorham

Join Home Instead at the Baxter Memorial Library, 71 South Street in Gorham for one or both presentations listed below. Please RSVP to Marcie Yager at 839-0441.

Financial Planning for the Future – Is it too late to start planning?

Thursday, October 27, 5-6PM

Kerry Peabody of Clark Insurance will discuss the different financial options available to pay for our needs, whether in our homes, assisted living or a nursing home.

Mary Toole, Esq. specializes in elder law and will present planning options and essentials. This is a must see presentation for children of aging parents who are considering next steps in caring for them.

Managing Alzheimer’s Disease in the Home

Thursday, November 17, 5-6PM

Cathy Kline, Social Worker for the Maine Medical Center Geriatric Clinic will share helpful coping strategies for the day-to-day challenges that arise with the progression of this disease. Cathy will offer tips and other effective ways to care for ourselves and our family members with dementia.

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• Develop household budget
• Organize financial/legal documents and tax records
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Free initial consultation

Jennifer T. Minkowitz, J.D.
(207) 841-3711 
jtmink@maine.rr.com
**Life Without Limits Expo in Brunswick**

The Life Without Limits Expo will be set up to help mature adults, their families and caregivers. The event will be held September 20, from 9AM to 2PM, at the Cook’s Corner Mall in Brunswick. Admission is free. Sponsored by the Southern Midcoast Community Center in Topsham.

Area businesses and nonprofits from the Brunswick region will be on hand with resources, education, and product demonstrations on preventative approaches to a healthier life, fitness, insurance, financial planning and much more.

Many free health screenings will be available, including flu shots by CHANS Home Health Care and body scans by Holland Chiropractic. Free seminars will be offered on topics such as Money Management, Choosing the Right Assisted Living, and more.

For more information or to RSVP, please contact Michelle at 207-490-7606 to register.

**Junk Busters Workshop in Sanford**

Are you inundated with junk mail? Are you bothered by unsolicited mail from companies vying for your attention and money? If so, join us for a FREE Junk Busters Workshop, September 20, 2-3:30PM, Trafton Senior Center, 19 Elm Street, Sanford.

At the Workshop participants will:

- Separate important mail from junk mail
- Learn tips on identifying mail scams and have a paper shredding party!

Presenters will be Michelle Matt, Senior Advocate, Goodall Hospital and Detective Sarah Roberts, Sanford Police Department. Workshop offered by Goodall Hospital and SALT (Seniors and Law Enforcement Together). Coffee & Refreshments will be served. Please contact Michelle at 207-490-7606 to register.

**Westbrook Library Delivers**

Homebound residents of Westbrook can borrow books, DVDs, audio books, E-books, music and more through Walker Memorial Library. With each delivery, you may request specific titles or let the library staff choose a few titles for you based on your reading or entertainment preferences. Contact Walker Memorial Library's OutReach Services for delivery at 207-854-0630 x256 or by email walkcrilibrary@westbrook.me.us.

**Brain-a-Thon in Saco**

Join us for a community “Brain-a-Thon” at the Paul Hazleton House in Saco on Friday, September 16th from 1-4PM. Learn the 10 Warning Signs of Alzheimer’s Disease, the importance of early diagnosis, brain function and health, the role of good nutrition, and tips to change your daily diet, brain teasers, puzzles, brain healthy snacks and more.

Bring your questions about Alzheimer’s disease, dementia and brain health. This event is sponsored by Volunteers of America in collaboration with the Alzheimer’s Association. Paul Hazleton House is located at 7 Smith Lane in Saco, Maine. For more information or to RSVP, please call Denise at 283-9042.

**In-Home Senior Services**

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We help keep you at home!
The Sisters Who Compete Together, Sure Stay Fit Together

By Lauren Ball, Intern
Maine Senior Games

I had the pleasure of interviewing not one, not two, but three sisters who have been competing in the games for the past 15 years. What an accomplishment for these women of Portland, Maine, especially when competition was scarce for them growing up without Title IX in place.

Q: How did you become involved with the Senior Games?
Betty: When we were in high school there were no organized sports for girls—or anybody actually. So I figured it would just be a good way to see what I had for talent, if any, in any one of the sports. And, I just enjoyed everything, especially meeting new people. I talked these two into it. They don’t believe that, but I did. I said it would be a good thing to try, and we’ve been with it ever since.

Dotty had played sports. She played softball and basketball in the “services” (military).
Carolyn: It’s the same for me. Like she said, I played basketball in high school but that’s all that we had and before that growing up we had no sports. So I always loved sports, and I just wanted to give it a try.

Dot: She talked me into it. (Points to Carolyn.)

Q: What do you compete in?
Betty: Golf, horseshoes, foul shooting and bowling.
Dot: Horseshoes, foul shooting, bowling and golf.

Q: Have you done well over the 15 years that you have been competing?
Betty: Pretty well. Yeah. You know we’ve got a lot of medals at home. Carolyn: Yes, we have a lot of medals. (Can you tell we have never been interviewed before?) Dot: Awesome.

Q: How much longer do you plan on participating?
Betty: As long as God will let us. That’s all I can say. As long as I can walk.
Carolyn: Oh right, exactly. As long as we can.

Dot: It’s all up to the man upstairs.

Q: What do you enjoy most about the Games?
Betty: Everything. Really, I mean just meeting new people and the competition part of it. See how good you are or not.

Dot: It’s the same. Just meeting new people and competing but at the same time trying not to be too hard on ourselves because if we don’t do everything the way we think we are supposed to do it.

Dot: I agree.

Q: How have you seen the games evolve in the last 15 years?
Betty: It’s definitely changed for the better. There are more people involved; it’s advertised more. And I’ve seen it change dramatically, for the better. (I seem to be the spokesperson.)
Carolyn: Same here. You’re the oldest that’s why. You’re doing wonderful, you must have rehearsed.
Dot: Same.

Q: Did you play sports growing up? What kinds of sports did you play? Did you play sports in college?
Betty: They did. I couldn’t play basketball because I had just had my appendix out and back then you couldn’t do anything for like a year. Today they put you out on the field or wherever. So I didn’t get a chance to play any sports. That’s why I thought the Senior Games would be, “never too late,” right? We played neighborhood baseball. Not with a bat, with a stick and a tennis ball, stickball. I was the home-run champion of the neighborhood. No we didn’t go to college.

Carolyn: Yeah we played basketball in high school (Carol and Dot). Our father was the first city golf champion here in Portland, so we are kind of following along with his sports background. We used to play just pick up games as kids. That was all that was available.

Dot: I played all the time in the service. I joined the service instead of going to college.

Q: If you had the opportunity to go to college to compete in sports would you have?
Betty: Yes, I definitely would have. But you know that wasn’t even thought of when we were young. Now they push them from the time they are in kindergarten.

Carolyn: Hmm, I think I would have. They know if they are college material right then.

Dot: Yes.

Q: Is competing strenuous on your bodies? Do you train?
Betty: I belong to a fitness class so that helps a lot. A whole lot. But, no, we don’t practice; we just go to the events. Some of these sports, like horseshoes, we usually end up competing against each other because there is nobody. You know when we talk to somebody our age and they say that there was no organized sports of any kind when we were younger, it’s kind of like you don’t get that, right? Because I’m sure you thought that they were always around. But they aren’t, it wasn’t. We’re enjoying what we’re doing in these later years—keeps you in shape.

Carolyn: That is in part why we are so hard on ourselves. We think we are supposed to be perfect, especially for that one day. There are not lot of people that do that sport. What are we talking about? How old are these people? Keeps you young. Keeps your mind working.

Dot: We’re in the same age group so we usually end up competing against each other. If one wins and the other loses, we don’t speak to each other. (That’s not true). They basically maybe sort of talked me into doing “little ball” bowling—I used to bowl with the bigger balls all the time but I would consider that type of game a lot more challenging than “big ball.” I’m still getting used to it.

Q: Which sport would you say is the toughest for you?
Betty: Golf because we are kind of relatively new and not that great. We don’t golf enough I guess. But we do alright, you know. I got a medal last year and so did she. I talked her into golfing. Now I can’t keep her off the course. I love it but there’s a lot of people who play golf that are a lot better than I am. It’s hard to get out there and not try to watch other people and see how good they are. That’s when you have to tenders on and play your own game.

Q: How do you feel about Jo Dill taking over as Coordinator of the Games?
Betty: She’s done a wonderful job. She’s terrific, Jo, she really is. She’s very encouraging you know. She’s very energetic and that is what you need to run the Games.

Carolyn: Much, much better. Before her, it wasn’t as organized as it is now. She’s very, very good.

Dot: She’s much more involved.

After the interview, this amazing trio of women athletes wanted to thank me for making them feel better about themselves. But really, I was the one to thank them for making ME feel better. They are an inspiration to us all and prove that it is never too late to accomplish your wildest of dreams.
Prisoner #B-11279
Part II of a Holocaust Survivor’s Story
By Hunter Howe

Kurt Messerschmidt, 96 and a respected member of the Jewish community in Portland, was born in Germany. As the Nazis raced to war during the late 1930’s, Jewish oppression marked by prohibitive laws worsened. Although an exceptional student and athlete, Kurt knew he would be forbidden to attend Berlin University. Instead, he taught at a Jewish school until it was closed down. Finally, his family was transported to the Theresienstadt ghetto in Czechoslovakia. Food shortages and sickness prevailed. Kurt worked for the Waterworks digging trenches, and with his gifts in music served as a temple Cantor.1 In October of 1944, he and his brother Henry were put on a train bound for Auschwitz, the death camp in Poland. “Luggage piled up all around us, we could hardly move,” Kurt relates. His mother Else, and wife Sonja, followed on another train. Auschwitz, the death camp.

On arrival in Birkenau, the reception camp for Auschwitz, Kurt was shocked to see inmates in striped uniforms, because he had worn regular clothes back in the ghetto. “They took all our possessions leaving us with only the clothes on our back. The weather was good. But, dark and huge flames were going up to heaven and there was an unbelievable penetrating stench. Later, we learned it was burning human flesh from the crematorium. This was an additional torture.”

“We stayed in barracks meant for horses, so crowded we couldn’t sit down, like in an elevator. For no reason, we were forced to kneel in an impossible position, watched over by an SS guy with a whip. The next day, we stood in line. Men only. We removed all our clothes, and they shaved all our body hair. Then, they gave us striped clothes from a pile, no underwear, socks made from torn talleisim (Jewish prayer shawls) and wooden shoes.” Sonja endured the same humiliating treatment. While standing in line, she saw a dear friend with her two children. Sonja took one child to help. When the women and children were ordered to a separate area, her instincts kicked in. Reluctantly, she handed the child back. Later, all the women and their children were gassed. Sonja had escaped death.

At one point, Kurt heard screaming and turned to witness a near riot. A fellow Jew with a pall of red paintbrushed a red stripe on each inmate’s back. But, when he reached one particular Jew, he put a whole pattern on his back and kicked him. “We found out that this Jew had denounced other Jews to the Gestapo in Holland. The man was trampled to death.”

“My values changed. I tried not to go to a lower level of existence, but in this case, I had to.” On the second day, Kurt was tattooed Prisoner number B-11279.

“It hardly hurt the physical aspect. I had too much on my mind, thinking about Sonja. I remember looking at the most famous sign over the entrance to Auschwitz, ‘Arbeit Macht Frei’ or ‘Work will make you free’. Each morning we were counted. I had a rule. I stood straight up and never allowed to be shaken with God. I needed him.”

“The water was dirty and food was practically nonexistent, some times just pieces of cabbage. The more experienced inmates, the Capos, distributed potatoes, which looked like rotten prunes. I told Henry not to eat them, that they would kill us. I wanted to die on my own terms, even if by starvation. But some did. Half dead by then, the potatoes ruined their stomachs.” Kurt survived the next four days without food.

After a week in the main camp, Kurt and Henry were shipped a couple of hours away to Golleschau, the infamous sub camp of Auschwitz. “Another death camp. We arrived, 90 to 100 of us standing, pressed into one truck. Other trucks passed us on the way back to Auschwitz carrying inmates who had worked in the mines. They were completely black, no flesh on their bodies, unable to work, eyes with deep holes. Living corpses headed to the chimneys.”

Two jobs were available, the coal mine or the quarry. Kurt volunteered for the quarry. Henry, trained to make fine furniture, was more fortunate. They needed a carpenter to build beer barrels in a small factory. “It saved him.”

“I knew what was coming. It was difficult to keep my mind going. I lived in a shell, had an inner life. I picked little things to hold on to, like writing music. I found optimism in danger, not foolishly, no, I didn’t overlook the danger. I had a one track mind. I had to have the will to survive this. If I died, I vowed I’d dedicate my life to being a Cantor.”

On the way to the quarry, they walked through a cabbage field. “If someone bent down to take a cabbage, he was killed. There was no escape. I witnessed hangings, inmates displaying naked. We were forced to stand and look.”

Kurt worked this night shift. “It was a miserably cold winter, but I was still in fine physical shape. One guard was a real professional criminal. His eyes would have a wild expression, and we knew an attack of a violent nature was due, like spontaneously shooting the workers.”

Kurt hummed as he worked. “One extremely bitter night, while gathered around a fire, the guard said, ‘Sing to me.’ I sang for six minutes. He seemed captivated by this. I figured out he was afraid to go to the Russian front. For six minutes, he didn’t kill anybody.”

Hell on Earth

The camp commander’s aide, a Jewish boy and a former brilliant student of Kurt’s, had seen Kurt’s name on the list of incoming inmates. “He couldn’t approach Kurt, but at dinner he would slip him a wedge of bread and Kurt shared this with his brother. “Cutting the wedge in half with a spoon that became a sharp knife. This was life, another one of those little miracles that helped me survive.”

In December 1944 the camp commander ordered the Jews to perform at an SS Christmas party. He had instruments shipped in. Only eight Jews knew how to play. The commander had requested a Spanish song he liked. The musicians tried to learn it but couldn’t harmonize the parts. Kurt helped them. “I told them which chords to play. We played it along with a medley of German songs while the SS and their dogs listened. A little humanity in the most horrible situation.”

At this “party,” Kurt took a major risk. He sang the following song “with definite emphasis on these words right into the face of the camp commander and his SS group. All my fellow inmates were concerned about me, but this was one way we could offer some resistance.”

DIE GEDANKEN SIND FREI
English translation: Our thoughts are free! Who can guess them? They’re flying by like nightly shadows. No man ever can know them, And no hunter shoot them. The fact remains: THOUGHTS ARE FREE!

In January 1945 the Russian army advanced closer. The Germans, not wanting the Russians to be liberators, abandoned camp, leaving the sick behind. “About 800 to 900 of us began the death march towards Germany. I had a wedge of bread and one blanket. The snow was knee deep. We had nothing to eat, some ate the snow. If you stumbled and didn’t get up immediately, a German shot you in the neck with a machine gun taken from a cart being pushed by the Jews. Henry and I supported each other.”

continued on page 21
Editor’s Note

Thanks for making “Senior News” possible!

Our readers have come through! As of August 1 we have received $2,093 in donations in the past six months to support the newspaper. That means 200 people have donated. Let’s see if we can push both numbers up! Readers can send a check or call with a credit card number anytime. Thank you.
—Eileen Whynot, Editor of “Senior News,” Southern Maine Agency on Aging

To inquire about contributing to the newspaper, contact Eileen at 396-6512 or 1-800-427-7411 x512 or ewhynot@smaaa.org

If you no longer want to receive the paper, please contact Bonnie at 396-6526 or 1-800-427-7411 x526 or email bcray@smaaa.org to be removed from the mailing list. Thank you!

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On January 30, the same date 13 years after Hitler had become Chancellor of Germany, the surviving marchers, fighting for their lives in the severe cold, finally arrived at Sachsenhausen, "a miserable camp southwest of Berlin. We could hear the bombing of the city. The Allied forces were coming closer, so we marched south to Flossenburg, a Russian prisoner of war camp northeast of Munich. The Russians had a long history of anti-Semitism. One of the guards hit me on my right cheek with an iron pipe. I've had a long history of anti-Semitism. I don't remember what I said. Then, I walked with certainty straight into the forest. Fresh snow had fallen. I knew the guard wouldn't shoot. It was the most intense moment of my life." 

The Will to Live

That evening Kurt came upon a large farm. Inside the house, he heard young SS men crying, "Mama, mama." They had been listening to the radio. Italy had surrendered. They'd had enough. "The guard wouldn't shoot. It was the most intense moment of faith in my life."

Prisoner #B-11279

continued from page 19

On May 1, near Traunstein on the Austrian border, "we were forced to bend down and crawl into a completely dark pig sty. We weren't allowed to talk. The next morning, I climbed over a few people. I'd noticed that the guard appeared unsure of himself. I went to him and spoke perfect German. I don't remember what I said. Then, I walked with certainty straight into the forest. Fresh snow had fallen. I knew the guard wouldn't shoot. It was the most intense moment of faith in my life." 

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- 2,125 people improved their health with foot care, screenings and tests
- 1,715 people lived safely with Lifeline Emergency Response Services
- 130 volunteers donated 12,000 hours to the community

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The Will to Live

That evening Kurt came upon a large farm. Inside the house, he heard young SS men crying, "Mama, mama." They had been listening to the radio. Italy had surrendered. They'd had enough. "The guard wouldn't shoot. It was the most intense moment of faith in my life."

In one year, over 40,000 children, adults and elders benefited from the services of HomeHealth Visiting Nurses:

- 9,250 patients maintained independence through 111,000 home visits from nurses, rehabilitative therapists, social workers, and health aides
- 9,200 newborns and mothers got a healthy start with 6,100 home nursing visits, offered at no charge, from our Women and Children's Health Promotion Grant
- 2,125 people improved their health with foot care, screenings and tests
- 1,715 people lived safely with Lifeline Emergency Response Services
- 130 volunteers donated 12,000 hours to the community
The Tip of the Iceberg

There are hundreds of volunteer opportunities available for people age 55 and over through RSVP. The ones listed below are just “the tip of the iceberg.”

Harvest Your Skills: Share your bounty of skills and interests to contribute.

Cumberland County
- Do you enjoy being in an office setting? There are several agencies asking for volunteers to help on the telephone, filing, bulk mailings and computer work.
- School bells are ringing! Consider helping children in grades K through 12. Needed are tutors, mentors, multicultural classroom helpers. There are even opportunities at the college level.
- Train to be a group facilitator with multicultural children. Some of the activities in this special program include supervising art, theater, games or group discussions. The needed skills would be taught in a volunteer training.
- It is time to consider an opportunity to assist with income taxes. Training will start soon.
- A small new theater is looking for some help in a variety of ways, such as with fundraising, marketing, running the concessions stand, and planning and organizing special events. Here is a chance to participate in the development of a new venue.
- Volunteer Capacity Builders are needed. Work with the United Way to help a local nonprofit organization build its volunteer program. There are many ways to contribute.
- Local hospitals are looking for volunteers to help in a variety of ways. Give us a call so we can tell you more.
- You can brighten the lives of people residing in nursing homes by volunteering to help with activities or to visit residents.
- A therapeutic riding center is looking for volunteers to help in a variety of ways.
- A new school year is beginning. Volunteer tutors and classroom helpers are welcome in many places.

To learn more about these and many other volunteer opportunities, if you live in southern York County, contact Deborah Levine at (603) 205-4073 or dlevine12@yahoo.com. If you live in the rest of York County, contact Ken Murray, at 1-800-427-7411, Ext. 520 or by e-mailing kmurray@smaaa.org

A more general list of opportunities available to the 55 and over set includes the following:
- Activity Aide in Senior Housing
- Adult Tutor in Literacy Programs
- Board or Committee Volunteer
- Buddy for Health Program
- Bulk Mailing Helper
- Child Care Volunteer
- Classroom Aide
- Clerical Support
- Docent at a Museum
- Driver in a Volunteer Rides Program
- Entertainer at Senior Facilities
- Health Educator or Mentor
- Hospice Volunteer
- Hospital Volunteer
- Hotline Volunteer
- Independent Living Helper for Frail Elders or Returning Veterans
- Information Provider
- Knitter
- Library Aide
- Management Consultant to Nonprofit
- Mentor
- Ombudsman Program Aide in Various Settings
- Reader to Young Children
- Recruiter of Other Volunteers for Nonprofits
- Senior Center Volunteer
- Tutor of Children
- Visitor in Senior Housing

Why not give Priscilla Greene a call 396-6521 or 1-800-427-7411, Ext. 521, and she can discuss the many ways you can make a difference. Or you may email her at pggreene@smaaa.org.

York County
- Volunteer Capacity Builders are needed. Work with the United Way to help a local nonprofit organization build its volunteer program. There are many ways to contribute.
- Local hospitals are looking for volunteers to help in a variety of ways. Give us a call so we can tell you more.
- You can brighten the lives of people residing in nursing homes by volunteering to help with activities or to visit residents.
- A therapeutic riding center is looking for volunteers to help in a variety of ways.
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Senior Corps Week

September 19-23, 2011

By Ken Murray, Volunteer Manager, Southern Maine Agency on Aging

One of our country’s greatest natural resources is the growing number of Americans age 55 and over who have time, talent and dedication to share through volunteer service. Senior Corps Week, sponsored by the Corporation for National and Community Service, celebrates this great resource and the three federally supported senior volunteer programs that help to harness it: the Foster Grandparent Program, the Senior Companion Program and RSVP, the Retired and Senior Volunteer Program.

Southern Maine Agency on Aging sponsors RSVP in York and Cumberland counties. Since 1973, RSVP has been helping people age 55 and over find meaningful volunteer roles with area nonprofit and healthcare organizations. The work performed by these volunteers benefits children, the elderly and everyone in between. At any given time we have about 400 volunteers working in about 80 different organizations. The diversity of organizations with which we partner means that there is a wide variety of volunteer assignments to choose from. Flexibility is built into our program.

One of our RSVP volunteers is Gary Eckroth. Gary retired to Maine from Massachusetts after a long career in business development in the computer industry. Gary wanted to get to know his new community and make a contribution, so he looked for ways to volunteer. His first choice was the Southern Maine Agency on Aging Fix-It Program, through which he performed minor home repairs for senior homeowners. Later he helped the Agency develop and market a new system for delivering Meals on Wheels. Habitat for Humanity of Greater Portland made use of Gary’s marketing expertise to publicize their ReStore Program. And most recently he has agreed to help the Community Bicycle Center in Biddeford plan for ways to expand their services for youth.

There are five RSVP’s in the state of Maine, along with two Foster Grandparent Programs where volunteers work with children with special needs, and two Senior Companion Programs where volunteers work with frail elderly and adults with disabilities. Together, we are the Senior Corps in Maine.

To learn more about Senior Corps and the volunteer opportunities that exist, call us at 396-6520 or 1-800-427-7411, Ext. 520. I would be happy to help you get connected.
SVP, a program of the Southern Maine Agency on Aging, was recently selected by the Oasis Institute of St. Louis, Missouri to bring the CATCH Healthy Habits Program to Maine. The program will be active in the cities of Portland and South Portland.

CATCH Healthy Habits recruits volunteers age 50 and over who become trained to work with children in grades K-5th on healthy nutrition and exercise habits. In one-hour after-school sessions, children and older adult volunteers share a lesson on nutrition or exercise, prepare and eat a healthy snack and engage in fun physical activity together.

The curriculum includes topics like:
• The importance of physical fitness
• Ways to make fitness an engaging and fun activity
• How to identify and prepare healthy snacks
• How to read food labels
• How to add more fruits and vegetables to meals

We are actively recruiting volunteers for the following positions:
• Team Leaders
• Lesson Leaders
• Activity Leaders
• Snack Coordinators
• Recruiters
• Outreach Coordinators
• Photographers
• Story Interviewers
• Data Collectors
• Mentors
• Trainers
• Recognition Coordinators

Help children develop healthier lifestyles while increasing your own motivation to stay on top of your health and fitness goals.

Christine Ellis has accepted the position of CATCH Healthy Habits Coordinator and has begun working on this project. Christine is actively recruiting volunteers. She may be reached at 396-6523 or 1-800-427-7411 x523 or by emailing her at cellis@smaaa.org.

Dear Knitters and Priscilla (Greene),
I gave the article in “Senior News” to my 90-year old mother who was a great knitter in her day and wishes she could make items for your project now. The best she can do is give you the last of her yarn. As my grandmother always said, “Use it in good health.”

Knitting in my family goes back many generations. My Grandma Ida made me a knitted doll when I was born. She named the doll Priscilla. I still have her and love her. You are doing great work.

With best wishes,
Carolyn Young
Mother decided it was time to simplify and enjoy life.

After living almost 50 years in Cape Elizabeth, following her husband’s passing, Nancy Pierce determined she no longer wanted to deal with her house, the bills, and all the other frustrations of maintaining a house.

She thought about making a move and discussed it with both Bruce, and her daughter. After visiting a few assisted living communities, they discovered Scarborough Terrace, a beautiful community nestled amongst pine trees and serving the Scarborough and greater Portland area.

“That was all it took.” Bruce says, “Mother already knew some of the residents, and we all agreed the location was ideal.”

Now Bruce and his sister have true peace of mind. Bruce states, “My mother has as much independence or assistance as needed while enjoying life to the fullest.”

If you or a family member would like to do the same, call to learn more about assisted living, memory care and short-term care.

Call Elizabeth Simonds today! (207) 885-5568

Scarborough Terrace
Premier Assisted Living & Memory Care
600 Commerce Drive • Scarborough, ME 04074
www.TerraceCommunities.com