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## Strokes Are Highly Preventable

*Stroke is a leading cause of long-term disability. Here's how you can greatly reduce your risk of having one.*

The phrase “time is brain” is often used by health experts to emphasize the need to act immediately when a stroke is suspected. That is because with each tick of the clock chances of severe and potentially permanent brain damage increase and so does the risk of death. According to the American Stroke Association, every 40 seconds someone in the United States has a stroke.

What you do and don't do impacts survival and the degree of recovery.

A stroke inhibits normal blood flow to the brain. If blood flow is interrupted for more than a few seconds, neurons (brain cells) begin to malfunction. If flow is not restored quickly, neurons begin to die.

“The brain depends on a continuous supply of blood. It delivers oxygen, nutrients, and glucose, and carries waste products away from the brain,” explains Jeffrey Saver, MD, director of the UCLA Comprehensive Stroke Center in a recent UCLA video. “If something goes wrong with this circulation system, the brain will be injured.”

Knowing what caused the disruption in blood flow is critical in properly treating this medical emergency.

### Stroke Types

The two main categories of stroke are ischemic and hemorrhagic. The former is a blocked artery problem, while the latter results from bleeding in the brain, usually

caused by a ruptured blood vessel. The vast majority of strokes (about 87 percent) are ischemic. These are typically caused when an artery leading to the brain has been blocked.

Sometimes ischemic strokes can happen from a severe drop in blood pressure, but that's rare.

It's also worth being aware of what's called a transient ischemic attack (TIA). This event is sometimes called a mini stroke and occurs when a blood clot briefly blocks an artery. The American Stroke Association says the key difference between a stroke and a TIA is that with a TIA the blockage is temporary. TIA symptoms occur rapidly and last a relatively short time. Unlike a stroke, when a TIA is over, there's no permanent injury to the brain.

But a TIA raises the risk for a stroke occurring within the next 90 days. There's no way to tell in the moment if stroke symptoms are due to a TIA or a major stroke.

### Stroke Symptoms

“Stroke can cause many different symptoms because whatever the brain does can go wrong in stroke,” explains Dr. Saver. “But there are three common symptoms to be aware of. They are drooping of the face on one side, arm weakness on one side, and speech difficulty, including trouble speaking, slurred speech, or incorrect speech.”

*Continued on page 7*



*A healthy active lifestyle can help reduce stroke risk. Exercise buddies can help keep you motivated and on task.*

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## Some Antidepressants May Increase Risk of Type 2 Diabetes

It is known that some antidepressants may promote weight gain as well as other undesirable metabolic effects. As a result, experts have long been concerned that antidepressants might increase the risk of type 2 diabetes. Until now evidence of this link has been unclear, according to a study published in the June 2020 edition of the United Kingdom journal *Diabetic*

*Medicine*. Researchers from Canada and Europe got together to examine data on nearly 64,000 French women without diabetes who were followed for six years. The researchers looked at who took antidepressants as well as who developed type 2 diabetes during this follow-up period. They found that those taking antidepressants had a 34 percent increased risk of developing type 2 diabetes, but this risk depended on the type of antidepressants they were taking. Use of selective serotonin reuptake inhibitor (SSRI) type antidepressants was associated with a 25 percent increased risk. For other types of antidepressants, the increased risk ranged from 35 to 82 percent. The authors recommend that these findings be confirmed and, if they are, that people prescribed antidepressants undergo regular monitoring of their blood sugar levels.

## Blood Iron Levels Associated with Age-Related Decline

Biological aging, the rate at which our bodies decline over time, varies among people and drives the world's most fatal diseases, including heart disease, dementia, and cancers. A new study by scientists from the University of Edinburgh and the Max Planck Institute for Biology and Ageing in Germany identified gene sets linked to metabolizing iron in the blood as partially responsible for how we age. The researchers focused on three measures linked to biological aging: lifespan, years of life lived free of disease (also known as healthspan), and being extremely long-lived (longevity). The analysis included information pooled from three large public datasets. Ten regions of the human genome (sum of mapped genes) linked to healthspan and longevity were identified. Gene sets linked to iron in the blood were overrepresented in their analysis of all three measures of aging. "We are very excited by these findings, as they strongly suggest that high levels of iron in the blood reduces our healthy years of life, and keeping these levels in check could prevent age-related damage," says Dr Paul Timmers from the Usher Institute at the University of Edinburgh. The researchers speculate that the findings on iron metabolism might also start to explain why very high levels of iron-rich red meat in the diet have been linked to age-related conditions, such as heart disease. The study was published in the July 20, 2020, issue of the journal *Nature Communications*.

## High-Intensity Exercise Improves Memory in Seniors

For this study published in *Applied Physiology, Nutrition and Metabolism*, researchers recruited dozens of sedentary but otherwise healthy older adults between the ages of 60 and 88 who were monitored over a 12-week period and participated in three exercise sessions per week. Some performed high-intensity interval training (HIIT) or moderate-intensity continuous training (MICT), while a separate control group engaged in stretching only. The HIIT protocol included four sets of high-intensity exercise on a treadmill for four minutes, followed by a recovery period. The MICT protocol included one set of moderate-intensity aerobic exercise for nearly 50 minutes. To capture exercise-related improvements in memory, researchers used a specific test that taps into the function of the newborn neurons generated by exercise, which are more active than mature ones and are ideal for forming new connections and creating new memories. They found that older adults in the HIIT group had a substantial increase in high-interference memory compared to the MICT or control groups. This form of memory allows us to distinguish detail such as one car from another of the same make or model. Researchers also found that improvements in fitness levels directly correlated with improvement in memory performance. According to the researchers, it's never too late to get the brain benefits of being physically active, but if you are starting late and want to see results fast, their research suggests you may need to increase the intensity of your exercise. It is important to tailor exercise to current fitness levels, but adding intensity can be as simple as adding hills or increasing pace. ■

# The Practice of Mindful Eating

*To avoid weight gain and enjoy holiday foods more, use the principles of mindfulness.*

The term “quarantine 15” has entered our vernacular, referring to the 15 pounds many people, on average, have gained during the pandemic. With the holidays right around the corner, it may be a good time to re-evaluate how you think, eat, and drink.

“The holidays can, at times, be triggering events for emotional or mindless eating if we are distracted or have had too much to drink and so are not present in how we are feeling in terms of fullness,” says Dana Hunnes, PhD, MPH, RD, senior dietitian at UCLA Medical Center and Adjunct Assistant Professor at UCLA Fielding School of Public Health. “But by paying attention to how the foods taste, eating slowly, and eating in the present moment, you may be better equipped to deal with certain stressors and the impulse to overeat.”

Hunnes also recommends trying to get everyone at holiday meals on board with this concept. For example, gently suggest to holiday companions that everyone try to eat a bit more slowly and to share their thoughts about the flavors of the foods. This might help everyone appreciate the gathering more and result in eating enough rather than too much.

## A Mindful Eating Approach

Mindfulness refers to the ability to be truly present in the immediate moment. It’s easy to describe, but requires skill, patience, and practice to develop the habit of doing so. Most of the time, our thoughts jump like monkeys from tree to tree, swinging

from past to future with occasional stopovers in the present. This pattern can create feelings of stress and overwhelm, which have been understandably high this past year.

Mindful eating is about reconnecting with your inner wisdom about food as nourishing and health promoting and empowers you to make generally healthier choices. It’s also about becoming more aware of true physical hunger and satiety cues.



*Thoroughly enjoy a slice of pie this holiday season by taking the time to savor each and every bite.*

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## The Power of Pausing

Mindless eating is that out-of-control feeling that you cannot stop eating and being unaware of how much you’ve actually consumed. Mindful eating is the opposite of that. Taking a deliberate pause can serve as a wakeup call that breaks the spell of compulsively reaching for another slice of apple pie a la mode. Literally put down the fork and take a breath. Pausing helps you slow down and assess. Using pie as an example, here are some ideas for pausing and savoring:

- ➔ **What does it smell like?** Do you notice aromas of apple or spice?
- ➔ **What does it taste like?** Is there any cinnamon? Are the apples sweet, tart, or both?
- ➔ **Can you discern different textures?** For example, is it smooth, silky, or crumbly?
- ➔ **What does it look like?** Imagine someone who has never seen an apple pie. How would you describe it to them?
- ➔ **Discuss the pie.** State what you like about the pie. Did someone at the table make it?

## WHAT YOU CAN DO

*Try these tips to avoid distractions while eating:*

- **Use** your senses to more fully enjoy every bite of food.
- **Pause** to assess if you are full before taking another serving.
- **Explore** what’s behind the impulse to eat. Both emotions and stress can trigger excessive eating.
- **Try** to think of food as nourishing and health affirming.

Bakers and food makers enjoy creating dishes for other people and typically welcome the chance to talk about what they made. Discussing the finer points of a dish also could make for more positive and light conversation, which can be quite welcome to many at a holiday table.

## One Thing at a Time

Multitasking runs rampant in society. Eating while reading the newspaper, making phone calls, watching TV or browsing the internet all serve to pull you out of the moment and into mindless munching.

“Mindful eating is when you are paying attention to all the sensations of eating and are not distracted,” echoes Hunnes. “By paying full attention to what you are doing when you eat and how you feel as you eat, you can more accurately assess your psychological well-being. For example, are you eating because you are emotional about something and do not know what else to do? Are you eating because you are bored? Are you eating because you are stressed?”

By asking yourself such questions with compassion and curiosity, you can learn to make better, healthier choices, as opposed to impulsive, reactive ones. This, says Hunnes, can help with binge eating or overeating, because if you are paying attention, you will notice when you begin to feel full or satiated, as opposed to overconsuming because your mind was elsewhere and unable to notice that your belly was full. ■



## Dreaming of Better Sleep?

*From pillows to mattresses, sheets and more, these tips can help you create a more serene scene for slumber.*

There's no question that lives have been profoundly affected by the coronavirus pandemic. For many people that includes a massively disrupted sleep schedule. Sleep is an essential part of reducing stress, anxiety, and fatigue. And there are many steps you can take to improve your nightly slumber.

"Create a routine that includes going to bed the same time every night, and do your best to stick with it," recommends occupational therapy assistant Mike Desrosiers, UCLA Department of Rehabilitation.

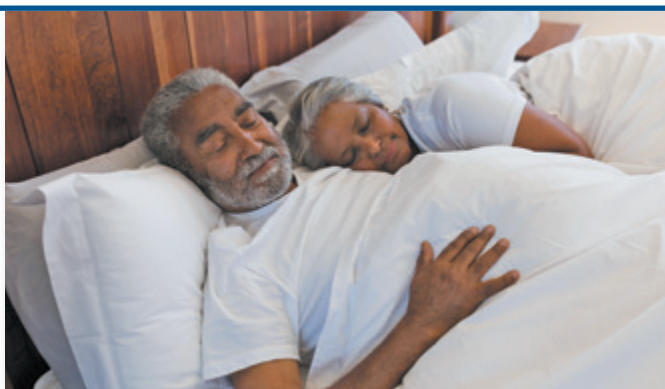
Routines are the centerpiece of sleep expert recommendations. The National Sleep Foundation emphasizes the need for everyone to pay extra special attention now to keep schedules and biological clocks as consistent as possible to preserve normal circadian biology (the natural sleep/wake cycle). To help accomplish this:

- Limit how many caffeinated products you consume in the afternoon.
- Finish eating meals two to three hours before bedtime.
- Go to sleep and wake up at the same time every day, including weekends. It's important for your body to have a consistent sleeping schedule.

- Create a relaxing bedtime routine, such as listening to calming music, reading a book, or taking a warm bath.
- Exercise regularly. A low-impact fitness program, like walking, swimming or yoga, is helpful for managing pain and stiffness and improving your sleep.
- Limit or avoid alcohol and nicotine near bedtime. They can disrupt sleep and can cause nighttime waking. For optimal sleep, skip them close to bedtime or altogether.

### Mattress and Pillows

Personal preference, comfort, and support are leading guideposts for choosing the right pillows and best mattress for you. The industry standard for replacing a regularly-used mattress is seven to 10 years. Signs that it may be time to replace your mattress include obvious sags, lumps, and tears. In addition, waking up with back or neck pain, and feeling stiff and unrested are other signals that your mattress may be a culprit in your unrest. Of course, you'll want to check if medical issues might be



© Wavebreakmedia | Getty Images

*Memory foam and latex mattresses help reduce the disruptive movements from partners who tend to move a lot during sleep.*

causing these as well, but don't rule out what you sleep on as a contributor to your lack of restful sleep.

"If you find yourself tossing and turning throughout the night, your spine alignment might be off," says Desrosiers. "If you are a side sleeper, try putting a pillow between your legs, and make sure that the pillow for your head provides adequate support."

Desrosiers suggests trying pillows with shredded memory foam that allow you to specifically adjust the amount of fill in the pillow. He says these types of pillows are highly adaptable for back and side sleepers, and most importantly they hold their structure, helping to provide proper spine alignment. Be aware, however, that some, but not all, may have a lingering chemical smell. Check the return policy before you buy. To relieve pressure from the lower spine when sleeping on your back, place a pillow under the knees. Avoid sleeping on your belly, which puts stress on the neck and shoulders.

Choices in mattresses have exploded in recent years. There are many online stores, and some allow you to try their mattress for several weeks and return it, if it doesn't work for you. In general, you want to look for something that's supportive, and not too soft or firm, relative to your preferences. Reading user reviews can be helpful. Today's offerings include memory foam mattresses, which have become popular for the same reasons the pillows have: They're supportive, distribute body weight

### BETTER SLEEP IS GOOD FOR YOUR HEART

Sleep disruption has been shown to be associated with an increased risk of atherosclerosis, but the mechanism has been unclear. A recent study in the open-access journal *PLOS Biology* led by researchers from University of California at Berkeley reveals that fragmented sleep exacerbates atherosclerosis and may raise the risk of stroke via an effect on inflammatory pathways.

These results provide a mechanism to explain the long-standing observation that poor sleep increases the risk of heart disease and stroke and suggest simple and direct ways to reduce such risk. Bedtime routines and comfort may help improve sleep.



© wowmom | Getty Images

evenly, and are hypoallergenic. Latex offers similar benefits with the addition of being made from natural materials processed from the sap of rubber trees. Latex mattresses are eco-friendly and typically forgo the chemical additives and petroleum used in memory foam. For a deeper dive into mattresses, go to this American Sleep Association webpage at <http://tiny.cc/lcnlsz>.

### Comfortable Sheets

What you put on your bed plays a role in creating a comfortable, sleep-friendly environment. The highest-quality cotton sheets come from those made with extra-long fibers. They include Egyptian, pima, and Supima cotton, and they come with a higher price tag, starting at around \$65 for a set of sheets. Cotton polyester blend sheets offer durability, comfort, and are less prone to wrinkling compared to 100 percent cotton sheets.

Thread count refers to the number of horizontal and vertical threads per square inch. Though it's often touted as the difference that makes a sheet better, it's not necessarily true. High thread count made from cheaper materials is inferior to, for example, Egyptian cotton sheets of lower thread count. Thread counts between 300 to 400 are generally quite pleasing to most people. For the eco-minded, there are sheets made of Tencel (a brand name for a type of rayon typically made from eucalyptus wood pulp). While these sheets are much pricier compared to cotton poly blends, they are antimicrobial, and moisture wicking, helping to keep you cooler at night. There's also flannel, which can be especially cozy in the depths of winter, offering warmth and softness. Flannel is a type of weave and can be made from wool, cotton, or synthetic material.

To get the right size sheets, be sure to measure your mattress. Many newer mattresses are thicker, especially those with toppers. You may need sheets labeled "extra deep" or

"deep pockets." While most people wash sheets frequently, it's also important to occasionally vacuum the mattress. This helps get rid of the dust and dander that can cause, or exacerbate, allergies.

High-quality sleep can become ever more elusive through the decades for many reasons. Some people may toss and turn due to pain and the inability to find a relaxing position. For other people, racing thoughts are a common theme. And in some cases, medications and medical conditions can interfere with falling or staying asleep. Try some of the sleep strategies outlined here. But if you struggle with sleep for more than two or three weeks, make an appointment to talk with your doctor. ■

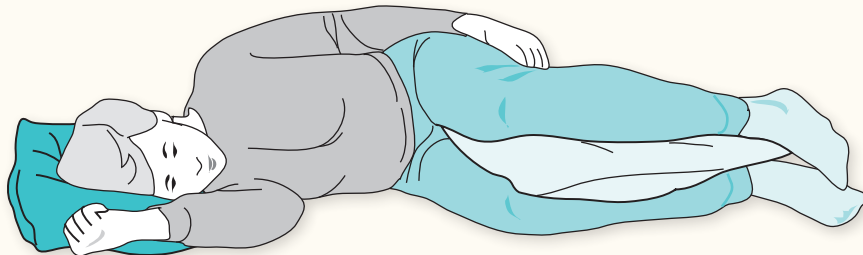
### WHAT YOU CAN DO

*Older adults need about the same amount of sleep as younger adults—7 to 9 hours each night. Here's how to help improve yours:*

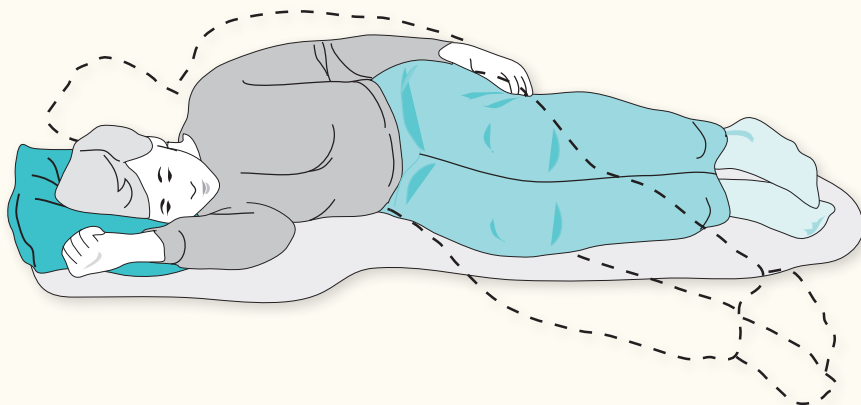
- **Sleep** on a mattress and with pillows that are comfortable and supportive.
- **Keep** the room cool. A temperature between 60 and 67 degrees Fahrenheit helps promote sleep.
- **Silence** unwanted noise with earplugs, or use "white noise," such as from a fan, sound machine, or a cell phone app.
- **Use** blackout shades to block out unwanted light.
- **Dim** light on clocks and digital devices.

### SLEEPING POSITION FOR PEOPLE WITH BACK PAIN

Illustrations by Marty Bee



**Sleeping on side with pillow:** Sleep on your side with knees bent. Support your neck with a pillow, and place a small pillow between your knees.



**Log roll to get out of bed:** Avoid excess stress on your back and neck by using a "log roll" move to get out of bed. Always roll over to your side first, so that you don't twist your spine. Use your arms to push away from the bed, as you drop your legs over the side and come to a sitting position. Then let your legs do the work as you stand. Don't lead the movement from your head and neck; bend from the hip joints.

# Effectively Treating Knee Pain

*Self-care can help mitigate knee pain. But when warranted, knee replacement may preserve function longer and eliminate pain.*

**T**reating knee pain is most successful when aligned with the cause of the discomfort. For example, inflammation due to soft tissue damage, such as from minor muscle injuries, can be treated at home with the RICE protocol (rest, ice, compression, elevation). The mainstay medications for osteoarthritis (bone-on-bone pain) includes acetaminophen for pain and nonsteroidal anti-inflammatory medicines (e.g., aspirin, naproxen, ibuprofen). Extra support, such as a compression sleeve or off-loader brace can be helpful in both cases. Activity modification with a gait aid (cane or walker) might also provide some relief during weight-bearing activities.

“I also like to recommend hiking poles,” says orthopaedic surgeon Adam Sassoon, MD, MS, UCLA Medical Center. “These provide needed assistance, give you a sporty outdoor look, and can be especially helpful for walking on paths and other uneven surfaces, too.”

## Heed the Call of Pain

The longer the pain stays, the more damage it can do to your body and your quality of life. Pain may cause some people to avoid exercise altogether. As muscles get weaker, joints are further compromised. When the knee hurts, compensation patterns, such as limping, often result. When the body is out of alignment, a domino effect occurs and can spread pain to other parts of the body, such as the hips and lower back.

The experience of intense and ongoing pain also can make the nervous system hypersensitive, so that even small bumps, bruises, and other stressors create disproportionately severe pain. So, don't grin and bear it. Relieve and repair it.

“If pain persists for weeks and interferes with recreation, daily function, personal care, or basic biologic func-

tions (e.g., sleep, personal hygiene or intercourse) that's concerning and warrants a visit with a physician,” advises Dr. Sassoon.

## The Value of Timely Interventions

Osteoarthritis (OA) is a major culprit of knee pain in adults ages 50 and older. Knees affected by OA often feel stiff in the morning, with pain that worsens throughout the day, particularly when standing or walking. In OAs most advanced state, bone grinds on bone, causing excruciating pain and greatly limiting mobility. Unfortunately, time won't heal OA, and neither will RICE, anti-inflammatory medications, or joint injections. But OA pain often is resolved by a well-done knee replacement.

A recent study published in the *Journal of Bone and Joint Surgery* reported that the timing of knee replacement surgery optimizes its benefit. However, 90 percent of patients with knee OA who would potentially benefit from knee replacement are waiting too long to have it done and thus are getting less benefit, according to the National Institutes of Health funded-study. Researchers reached these conclusions by analyzing data from 8,002 participants who were followed for up to eight years.

“You don't get as much function back when you wait too long; your mobility is still reduced versus somebody who had it done in a timely fashion,” explains lead investigator Hassan Ghomrawi, MD, associate professor of surgery at Northwestern University Feinberg School of Medicine.

## Outpatient Knee Replacement

Once upon a time, people might spend four or five days in the hospital following total knee replacement surgery. Now they may be going home within hours. According to Dr. Sassoon, almost



© Jan-Otto | Getty Images

*Total knee replacement done sooner rather than later helps you get back to activities you enjoy pain free.*

anyone could be a candidate for outpatient total knee replacement. People who are generally healthy and have no pre-existing health conditions (comorbidities) are the ideal candidates. But even people with a few well-controlled pre-existing conditions, such as high blood pressure and diabetes, can be successful outpatient candidates.

“Those with a higher number of comorbidities may need to have the procedure in the hospital as opposed to the UCLA Santa Monica Surgery Center, but most could still go home that day,” Dr. Sassoon says.

What makes this possible, in great part, is the collaborative effort of a highly skilled team of people and specific anesthesia protocols.

“Almost no narcotic is used,” explains Dr. Sassoon. “We administer local anesthetic around the nerves in the knee to help minimize surgical pain, and we use a short-acting spinal anesthetic that wears off almost immediately after surgery. It creates a similar effect to what's used during a colonoscopy, creating a kind of twilight sedation. Many patients can begin physical therapy within an hour of leaving the operating room, which is what allows people to leave the hospital on the same day.”

Of course, there will be some pain and discomfort for about six weeks after knee replacement. Physical therapy is required and further optimizes functionality, though it will take several months to recover full function.

A healthy lifestyle and good physical conditioning before surgery can accelerate recovery. Ultimately, most people return to their favorite sports and activities pain free. ■

Upon recognizing symptoms, it might be tempting to call a doctor to first verify that it is indeed a stroke, or to just drive yourself or someone else to the emergency department. Don't do either. Remember, time lost is brain lost. Emergency personnel are trained to recognize a stroke and can begin interventions while en route to the hospital. Arriving to the hospital via ambulance also bypasses the ER check-in required if you walk in, which saves even more precious time. Remember, speed is of the essence and may make the difference between a lasting disability and a partial or perhaps complete recovery.

### Life-Changing Disabilities

It's estimated that one in six people will have a stroke in his or her lifetime. Though anyone can experience a stroke, even babies, older age increases the risk for both men and women. Stroke treatments have improved survival rates, but unfortunately many survivors are disabled and require care in nursing homes or long-term care facilities. Stroke reduces mobility in more than half of stroke survivors ages 65 and over. And only 10 percent of stroke survivors recover completely. The more encouraging news is that the most common type of stroke, ischemic, can in large part be prevented.

### Preventing Strokes

Steps to improve heart health also improve brain health and lower the risk of stroke. About 90 percent of people who have had a stroke have one or more of the following risk factors: Hypertension (high blood pressure) is the most common risk factor, followed by high cholesterol and/or high triglyceride levels, and diabetes. Smoking, obesity, and sedentary lifestyles also are contributing risk factors that you can do something about.

**Lowering blood pressure.** Hypertension is the single most important modifiable risk factor for stroke prevention. People with a systolic (top number) of 160 millimeters of mer-

## FAST STROKE SIGNS AND SYMPTOMS

The infographic features four illustrations of a man in an orange shirt, each representing a sign of a stroke. 1. **Face:** A red arrow points down to the man's face, which has a blue 'F' on his chest. 2. **Arm:** The man's right arm is drooping, with a blue 'A' on his chest. 3. **Speech:** The man has a speech bubble containing a tangled scribble, with a blue 'S' on his chest. 4. **Time:** A hand holds a smartphone displaying 'CALL 911' with a blue 'T' on the screen.

**Face:** Face drooping. Ask the person to smile and note if it's uneven or lopsided.

**Arm:** Arm or leg weakness. Ask the person to raise both arms and notice if one arm drifts downward.

**Speech:** Slurred speech. Ask them to repeat a simple sentence.

**Time:** Call 9-1-1. Go to the hospital, even if symptoms go away.

cury (mmHg) or greater and a diastolic (bottom number) of 95 mmHg or greater have four times the risk of stroke compared to someone with optimal blood pressure. Optimal blood pressure is 120/80 mmHg, though for some older adults a bit higher readings may be allowable—ask your doctor. To keep your blood pressure at healthy levels, take medications as prescribed, even if you feel fine. Hypertension is called a “silent killer” because you may not feel it as it causes damage. Regular exercise and cutting back on sodium can also help regulate blood levels.

**Lowering cholesterol.** As with hypertension, it's important to take medications as prescribed. Eating foods low in saturated fats and cholesterol and high in fiber can help prevent high cholesterol, and possibly lower elevated levels.

**Managing diabetes.** Type 2 diabetes, the most common kind, also can be addressed through lifestyle choices and medications. In some cases, losing weight and becoming more active may eliminate the need for medications.

**Losing weight.** The battle of the bulge is mainly lost and won through diet. Learning to prepare healthy meals at home is the ideal way to control what you put in your body. The Mediterranean diet emphasizes heart-healthy fruits, vegetables, olive oil, and fish. Oldways ([oldwayspt.org](http://oldwayspt.org))

is a nonprofit website offering a wide variety of Mediterranean meal plans.

**Being active.** Exercise is excellent medicine and helps with all the aforementioned health issues. The type of activity doesn't matter. What does matter is that you do it, and do it consistently. It's important to get 30 minutes of cardiovascular (a.k.a. aerobic) exercise most days of the week. It's any activity that elevates your heart rate. If you're not used to exercise, get some guidelines from a health professional before you begin. Give any new plan a few weeks for the workout habit to form. Once you get in the groove, you'll start to feel better—more energy, less stress, and possibly some weight loss are all benefits of regular physical activity.

Finally, some people may wonder what to do while waiting for an ambulance to arrive for a person suspected of having a stroke. For example, should you give someone an aspirin?

“No,” says Dr. Saver. “Though aspirin might help the most common type of stroke, the blockage (ischemic), it could make the less common bleeding stroke (hemorrhagic) worse. Without a CT scan we don't know which stroke is taking place.”

He recommends having the affected person lie down. Wait with them until help arrives. To view Dr. Saver's excellent video on stroke prevention and treatment, go to this link <https://bit.ly/30A92KR>. ■





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**Q** What are biologics, and why are they used?

**A** In broad terms, biologics used in medicine are those that are derived from a living cell source. They come from a variety of natural sources, including human, animal, and microorganisms. Biologics include a wide range of products such as vaccines, blood and blood components, allergenics, gene therapy, tissues, and therapeutic proteins. Insulin and vaccines are examples of biologics that have been around for a long time. An example of a more recent biologic is one derived from a bacterium called *Clostridium botulinum*, better known as Botox. It is most well-known for its ability to temporarily reduce forehead wrinkles by blocking signals from nerves to relax muscles. It is also used medically to treat muscle spasms, migraines, and the loss of bladder control due to multiple sclerosis or spinal cord injury. In the treatment of eye diseases, Avastin (bevacizumab) and Lucentis (ranibizumab) are two biologic medications widely used for retinal diseases, such as age-related macular degeneration. Biologics also are commonly used in the treatment of rheumatoid arthritis and other autoimmune diseases like psoriasis and Crohn's disease. These biologic medications have provided relief to many patients, though there can be some serious side-effects. These biologics suppress the immune system and can make people taking them vulnerable to other illnesses. But, not all biologics compromise the immune system. Those used to treat conditions such as asthma, chronic hives, eczema, and sinusitis are unlike the ones used to treat autoimmune disorders. The biologics used for allergy and asthma work on the allergic arm of the immune system, meaning they don't conflict with the disease-fighting part of the immune system. For example, allergy and asthma biologics have not been shown to increase the risk for COVID-19.

Compared to conventional pharmaceutical medications, biologics are generally much more complicated to produce, which can make them much more expensive, too.

**Q** I have yet to partake in a telemedicine visit. Can you tell me what to expect and how best to participate and prepare for one?

**A** Telemedicine visits are likely here to stay and have been a crucial part of dispensing medical care during the COVID-19 pandemic. Real-time virtual visits with patients are typically conducted using a smartphone, tablet, or computer with video camera capabilities, though in some cases audio-only visits have been allowed. Medicare started covering telehealth visits back in March, though it's not clear if that will be extended beyond the pandemic. Check with your insurance provider. Telemedicine appointments are best for mild and non-life-threatening conditions, such as diabetes and high blood pressure management, mild fever or cough, ear problems, headaches, nausea, constipation, and mild diarrhea. In contrast, high fever, trouble breathing, and severe chest pain warrant a visit to the emergency department.

Using the technology needed for telemedicine visits can be challenging for first-time users. It's a good idea to have a trial run video visit with someone to make sure you understand the process and that the two-way video and audio are working. Position yourself in a quiet room with good lighting. For your appointment, either an internet link will be sent to you, or your provider will initiate the call. Services such as Zoom, FaceTime, Facebook Messenger, and Skype have been used for telemedicine calls. Ask in advance if anything will be needed. For example, you may need to download a computer application before the appointment. During the call, you may be asked to take some vital signs, such as your temperature, blood pressure, or blood sugar readings. Have the devices readily available to take these readings. The more detail you can provide about symptoms, when they started and how long you've had them, will be helpful. Have prescription bottles and any supplements you regularly take nearby. Finally, be sure your devices (computer, phone, tablet) are fully charged before your appointment. ■

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