

## Parish Nurses

### Quite Possibly Caregiving's Best Kept Secret

By **Melissa A. Goodwin**

**C**arol Heimann didn't know where to turn. Her mother, who had Alzheimer's disease, lived alone in a community 30 miles away and could no longer drive. Carol's work schedule and busy family life made it difficult to see her mother as often as she wanted. Carol found herself constantly worrying whether her mother was all right.

Help arrived unexpectedly in the form of Pam, a parish nurse at the church Carol's mother had attended for many years. Carol, a registered nurse herself, had never even heard of a parish nurse before. "Parish nurses have to be the best kept secret on earth," she said in an interview. "It was such a surprise and a relief when Pam stepped in to help. She was truly wonderful, visiting with Mom every week and touching base with me regularly.

"It was such a comfort to know that someone caring and responsible was checking in on her. It gave me so much peace of mind."

Over time, Carol, who lives in Phoenix, found that Pam was willing to help in other ways: "Pam referred us to a home health care agency so we could provide in-home services to allow Mom to continue to function at home a while longer. Eventually, when it came time to move Mom to an assisted living facility, Pam did all the legwork. She located and researched facilities in the area. She took me to tour them and helped me understand how to assess each one and to know what questions to ask. When it finally came time for ►



#### INSIDE THIS ISSUE

- 3 Falls, Flames and Food**  
Avoiding Trouble in Mom's Kitchen
- 4 Keeping Love Alive: When Partners Become Patients** 10 Tips for 'Renegotiating' Spousal Contracts
- 6 Bathing Your Loved One—One Way or Another**  
Answers to Common Questions
- 8 Grandpa Donated His Body**  
A wry look at aging

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*Caregiver's Home Companion* is produced by caregivers and professional healthcare workers. While this publication is not intended as a substitute for professionally administered medical advice, the practical suggestions, advice and tips made in this newsletter have been tested or reviewed by an individual or organization involved in caring for elderly other loved ones. *Caregiver's Home Companion* also strives to obtain the input of educators and researchers in all branches of medical and scientific research. We welcome your comments and suggestions at [editor@caregivershome.com](mailto:editor@caregivershome.com).

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## Parish nurses blend care with compassion while promoting health and well-being .... They also provide a willing ear and a safe environment in which weary and worried caregivers can vent.

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### Parish Nurses *Continued from page 1*

Mom to move, Pam was there to help us both make the transition."

Carol adds, "I honestly don't know how we would have managed without her."

Pam is one of more than 7,000 parish nurses who provide support to individuals and families across the United States. A parish nurse is a registered, state-licensed nurse who is on the staff of a religious or faith-based community such as a church, mosque, or synagogue. The role of the parish nurse is to blend care with compassion while promoting health and well-being.

Although there may be differences in the specific functions that individual parish nurses perform, the focus of the role is always on "whole person" wellness—meaning the integration of physical, emotional, and spiritual health. Parish nurses can be valuable resources to caregivers and families dealing with a variety of difficult health-related situations.

The parish nurse concept was developed in the 1980's by a Lutheran minister, The Reverend Dr. Granger Westberg, author of the best-selling book *Good Grief*. Westberg envisioned an approach to health and healing that would include the spiritual and emotional components of wellness. He founded the Parish Nurse Movement, which he saw as a partnership between health care systems and congregations. His vision evolved into The International Parish Nurse Resource Center (IPNRC), which now plays a leadership role in parish nurse education, research, and support.

So, what does a parish nurse actually do? To a large degree, it depends on the needs of the particular faith community being served. But in all cases, the parish nurse encourages personal responsibility for health, and helps people understand that emotional and spiritual health are vital components of well-being. Generic parish nurse duties include health education, personal health counseling, advocacy, referrals, volunteer coordination, support group facilitation, and spiritual comfort.

As a result of her own personal experience, Carol Heimann became a parish nurse herself. "I visit people in the hospital and at home, and

*continues on page 7*

## HOW TO BENEFIT FROM PARISH NURSE SERVICES

*A parish nurse can help if you or a loved one:*

- Feels confused by the complexity of the health care system
- Has a question about a medical condition, treatment, medication, or symptoms
- Needs help and doesn't know where to turn
- Has recently been released from the hospital
- Needs the reassurance of a caring medical professional who will take the time to listen

## PARISH NURSES IN A NUTSHELL

Parish Nurses:

- Are registered professional nurses, licensed by the state, who are on the staff of a faith-based community.
- Are usually part-time and may or may not be in paid positions
- Come from all nursing specialties
- Provide health and wellness education and counseling
- Act as community liaisons and advocates for the ill and elderly
- Can help people understand complex medical information and refer them to resources for additional information and support
- Always respect the confidentiality of individual family members
- Provide spiritual support but do not preach

# Falls, Flames and Food

## Avoiding Trouble in Mom's Kitchen

By Kelly D. Morris

**W**hile the kitchen is often referred to as the “heart of the house,” it can be a dangerous place for our elderly whose poor vision, failing memory, and poor balance can all contribute to the problem. Fortunately, there are ways to minimize the risk and keep our loved ones safe. There are even ways to do this without making mom and dad feel offended!

Let's start by looking at some of the dangers that exist in the kitchen.

First, there is falling. Falls are common among the elderly in any room, but may be even more likely to occur in the kitchen. Elderly people may try to stand on a chair to reach high shelves or cabinets. Liquid spills or simply washing dishes can cause wet, slippery floors. Bending over to reach low items may also upset one's balance.

To prevent falls, place a water-absorbent, non-skid mat in front of the sink. Use kitchen chairs with arms so the elderly can sit and stand up more easily. Never keep chairs on wheels in the kitchen (unless, of course, your loved one uses a wheelchair to get around). Avoid putting frequently used items on high shelves or in high cabinets. Also, get a sturdy stepstool, just in case your loved one needs to get something that's out of reach. Make sure there is adequate lighting.

Now, how do you do these things to mom's kitchen without upsetting her? Well, you might give her some of these safety items as a gift. A nice stepstool, perhaps in a color that matches mom's kitchen or is decorated with paint and stencils, would probably be perceived as very nice gift. A new floor mat to place in front of the sink could be taken the same way.



Mom might resist having her sons or daughters rearrange her kitchen cabinets, but if they bring it up in the right way, she could be easily persuaded to go along. Try something along the lines of, “Mom, it's so hard for me to reach the pots and pans. It's probably hard for you, too. Do you think we could move them to a lower place?”

Now, on to the hot stuff. I'm sure we've all burned ourselves at some point while cooking, regardless of how careful we are. There are ways to reduce the risk to our loved ones, however. Dr. Rein Tideiksaar, educational coordinator of Geriatrics and Adult Development at Mt. Sinai Medical Center in New York City, suggests making sure there is a working

smoke detector in the kitchen and that a small fire extinguisher is easily available.

In addition, avoid wearing bathrobes or other clothing with long, loose sleeves that could catch fire from a stove burner. Skye Bradley, a home health aide in Cincinnati, recalls one of her clients leaning over the stove while wearing a loose-fitting bathrobe. “The arm of the robe caught fire immediately from the gas flame. I was able to help her get the robe off before her skin was burned. If she'd been home alone, though, who knows what would have happened? The whole thing was just terrifying.”

Stovetop fires can also be prevented by keeping the area around the stove free of flammable items, such as junk mail, paper towels, dish clothes, etc. Make sure there are no window curtains close to the stove.

Now, how can we get dad to accept these changes? Try buying a fire extinguisher for yourself and one for dad. After all, every kitchen should have one. Just tell dad that while you were buying one for yourself, you decided to go ahead and get one for him, too. Help him find other storage places for flammable stuff currently keep beside the stove. You could even give him a gift of a nice wooden box or something similar to hold some of those items. Presenting as a gift will most likely make it easier for him to accept.

There are ways to make cooking easier for the elderly. Larger knobs from the stove can be purchased at many home improvement stores, making it easier for those with poor vision to make sure they cook food at the proper temperature. Recipes can be copied in large print for easier reading. An egg timer can be set to

*continues on page 4*

## Avoiding Trouble in Mom's Kitchen

*Continued from page 3*

remind your loved one when it is time to check on dinner. The advantage to the egg timer is that, unlike timers on kitchen appliances, it can be carried from room to room. That way your loved one will be sure to hear the timer go off.

Microwave cooking is quick and easy and doesn't require people to be on their feet or moving around in the kitchen for long. Place microwave ovens on a table or countertop so your loved one won't have to reach up or bend down to remove food from the microwave. This will help prevent falls, and it will also help to prevent hot food from spilling from the heating container and possibly causing severe burns.

Finally, there is food safety. Denise Kelley recalls cleaning out her grandmother's cupboards. "I was shocked to find canned goods that expired years ago!" says Denise. "Do you know how long canned goods keep? She had a whole pantry full of out-of-date food." When Ann Mooreman, at age 75, began to open cans of food, eat a little from the can, and then put the can back in the cupboard, her family became concerned for her safety. "We didn't want her eating spoiled food, and we didn't want the open cans of food to draw bugs," explains her nephew Mike. Food safety can become a serious problem for the elderly, particularly if one has Alzheimer's or some other form of dementia.

How do you get mom to let you throw out the spoiled stuff? If she's able, ask her if she'd be willing to help you with your "spring cleaning" as well. It can be a way to spend some time together, as well as giving you the opportunity to discard bad food.

What if it doesn't work? What if these gentle suggestions are not taken well and mom and dad refuse to comply? Sometimes that happens. In this case, do your best to be gentle and compassionate and understanding, but the bottom line is to do what you need to do in order to keep your loved ones safe. ■

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## Keeping Love Alive

# When Partners Become Patients

**By Roberta Cole**

"Till death do us part." These are familiar words to anyone who has embarked on a journey of marriage or partnership. When our lives are flush with the golden glow of romance, these words are easy to swallow. But when our relationship is transformed from one of pleasure to one of frustration and sadness, it becomes a great deal more difficult. And if our days are characterized by thankless chores and tedious tasks often associated with caregiving, it can even seem impossible.

Of the more than 50 million people providing care for chronically ill, disabled or aged family members and friends in the United States, nearly half are life partners. It is only when this life partner is unavailable that adult children take on the role of primary caregiver.

In many instances, spousal caregivers are frail or ill themselves. The general caregiving stress, as you know, can be unbearable. In some cases it can lead to harmful behavior such as drinking and even spousal abuse. In fact, research has shown that when caregivers are married to the care recipient, the risk of abuse is far greater than with non-spousal family members. Prolonged stress takes a toll on our immune system as well, often predisposing caregivers to serious physical and emotional illness and even death. Keep in mind that the person for whom you are caring may have been your support system, the love of your life.

Memories linger. Often when the present is painful, we cling to the past and attempt to re-create it. This is understandable but not productive. So what can be done? From my many conversations with spousal caregivers, gathering stories for my book *Caregiving from the Heart: tales of inspiration*, I found the following tips to be helpful:

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*Roberta Cole is a writer and TV documentary and radio programming producer living in New York. Her past credits include producing and hosting the award-winning program Healthline on National Public*

*Radio. Her book Caregiving from the Heart: tales of inspiration was published in July by Elders Academy Press. She lives in New York and can be reached at [rjcole24@yahoo.com](mailto:rjcole24@yahoo.com).*

“People are like stained glass windows. They sparkle and shine when the sun is out but when the darkness sets in, their true beauty is revealed only if there is a light from within.”

— *Elizabeth Kubler Ross*



## 10 Tips for ‘Renegotiating’ Spousal Contracts

### 1. Be flexible

Continue to do activities as you did before, but be prepared to do them differently. For example: If you are attending a play or going out to dinner, sweatpants may have to replace the suit or dress that was always appropriate. It can mean the difference between going out and staying home—and going out sure helps! Be creative and investigate alternate means of transportation and ways of doing things. If you were accustomed to going out to a fancy restaurant and the corner diner works now, make it special. Find your own table there.

### 2. Keep tradition and honor holidays

Make the effort to keep your home alive and to gather for holidays whenever possible. If an adult child or a friend volunteers to help when you have always done it yourself in the past, say “yes.” It is a different time now. It may be necessary to re-invent the things you do and the way you do them. For example: If you prepare certain meals from scratch, try using some frozen foods. If your partner can no longer eat what he or she did before, create something new. It is a way to make your spouse feel acknowledged and for you to be spared the unnecessary effort of preparing separate meals.

### 3. Turn everyday chores into adventures

When cooking or cleaning, have your partner help in whatever way he or she can. It can turn drudgery into an activity that makes both of you feel good. It doesn’t matter what you choose to do. Even something simple like washing vegetables becomes a team effort.

### 4. Open up to new activities

If you have never played bingo, try it. It may sound corny, but it is something you and your spouse can do together.

### 5. Know your limits

Allow others to help. It doesn’t mean you are not capable. Your partner will appreciate you more and you will feel replenished. You are not the only one who can do this! When you have delegated some of your responsibilities, don’t criticize the way they were done. Sometimes getting help with intimate care is also not a bad idea.

### 6. Maintain your social network

Take time for respite, relaxation and friends. Try things like relaxation tapes and exercise. Studies have shown that relaxation tapes do make a difference. Try comforting music—whatever works.

### 7. Be Organized

Turn negative energy into positive action. The more you have things in order, the more in control you will feel. Make time to take care of paper work and all necessary files, documents, etc.

### 8. Always say, “I love you”

Always say “I love you” and behave as if you do, even if you don’t feel it. We tend to believe what we think and say. It will do you and your spouse a world of good. Try to maintain affection and intimacy whenever possible. Laughter and playfulness is good medicine.

### 9. Communicate negative feelings elsewhere

Tell a therapist, a support group or a friend how you “really feel.” While in many cases, nothing can be done about it, it is important and valuable to be in touch with your feelings and to voice them, just not to your partner.

### 10. Prepare to let go

Prepare to let go without guilt. Let daily events be your teacher. This can take many different forms, depending on your situation.

No one can tell you that there is one right way to care. If it turns out that your spouse is too ill for any of these tips to be relevant, perhaps it is time to consider an alternative to home care. We must all find our own way. But trying to honor the present instead of living in the past can help. The pain of loss is profound, but with some subtle changes we can make a difference and improve the quality of life we have as a couple. ■

## Answers to Common Questions

# Bathing Your Loved One— One Way or Another

By Ursula Furi-Perry

**T**hough it is often an uncomfortable and daunting task, bathing your loved one is an important, integral part of elder-caregiving. It is also the source of many questions from caregivers, many of which we are asked at *Caregiver's Home Companion*. In this article, we explore answers to some of the most common bathing questions we've received.

### How do I motivate my loved one to let me bathe her?

Gentle encouragement is best, says Michele Alexander, MSW, president of Geriatric Care Management Associates in Norwalk, Connecticut. "Be very calm, and try not to get into an argument," Alexander advises, even when your loved one will not budge on bathing. It's essential to talk your loved one through the whole process, Alexander notes, to reassure them by letting them know what you are doing.

Also, talk with your loved one about the importance of bathing, Alexander advises. "If you are not clean and not as mobile, you have a risk for skin breakdown," Alexander points out. "You can end up being septic from a bed sore." Citing the benefits of good personal hygiene—and recruiting your loved one's medical provider to back you up—can make a world of difference in your loved one's attitude towards bathing.

### How do I deal with issues of modesty—mine and my loved one's?

As one of the most personal parts of caregiving, bathing can be a touchy topic for caregiver and loved one alike. Your loved one may feel discouraged and humiliated over needing your help with personal

hygiene, which can create an uncomfortable experience for both of you. For starters, try bathing one body part at a time and cover up the rest of your loved one's body as much as it's feasible, Alexander says.

When all else fails, a fresh face may be what's needed, says Alexander. For example, "Sometimes having a daughter bathe a mother may not seem right," explains Alexander, "but you may be able to get someone else (professional) in." Though it may seem that your loved one would be most comfortable with you, their family caregiver, the opposite may be true. Check with another trusted caregiver, if one is available, or consider hiring a professional to help with bathing. "Both parties have to be comfortable with performing this task," says Rick Greene, aging program specialist at the Area Agencies on Aging. "That obviously should be considered, and if it is a problem, alternatives should be (employed)."

### What are some alternatives to showers and traditional bath tubs?

Several new walk-in bath products have hit the market, providing more access and greater comfort to loved ones with limited mobility. Most of these offer a seal-tight door with easy access to the tub, and many come equipped with transfer seats. They can also be customized with grab bars, temperature gauges, non-skid surfaces and other safety features.

Some manufacturers offering walk-in baths include Premier Bathrooms ([www.premier-bathrooms.com](http://www.premier-bathrooms.com)), Safety Bath ([www.safetybath.com](http://www.safetybath.com)), and Comfort Bath ([www.comfortbath.net](http://www.comfortbath.net)). Shop around, since most manufacturers of



walk-in baths say their products cost about as much as a quality whirlpool, and be sure you contract with a builder who's handled walk-in baths if you need to remodel, Alexander says.

If you must give your loved one a sponge bath, there are also a lot of disposable "bath-in-a-bag" products," says Debra Hutton, owner of BDN Medical Products, a national health and safety retailer based in California. Hutton recommends Bag Bath (by Bard, approximately \$6 for eight cloths), Aloe Vesta Bathing Cloths (by ConvaTech, approximately \$6 for eight cloths), and Comfort Bath Rinse-Free Shampoo & Conditioner Cap (by Sage, approximately \$11 per cap).

### What are other must-have innovative and helpful bathing aids and safety products?

The right products depend on your loved one's individual needs and the bathing facilities available, says Hutton. For loved ones with limited mobility, a shower seat or bath bench is essential, as is a good shower transfer seat, Hutton says. "They are waterproof...and made so that the shower water can go right on them. They also have padded ones in case you have someone with sensitive skin," she adds. Hutton recommends the CareGuard Shower Chair (by Invacare, about \$35) and the Adjustable Transfer Bench (by Invacare, about \$110).

Grab bars and skid-proof mats are also helpful; Hutton likes Firmgrip Grab Bars by Invacare, which come in a great variety of sizes and start at about \$17.

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Finally, don't forget a quality hand-held shower to make bathing easier on you both; your local hardware or home improvement store is likely to have them in stock. And don't forget oral hygiene: Hutton says freshening oral swabs can be used without water and extensive brushing (Toothettes Oral Swabs by Sage, starting at about \$7 per packs of 20).

**Where can I find more information and training on bathing my loved one, and where do I turn for additional help?** Start with the American Red Cross family caregiving training program, says Greene. One of the program's training modules focuses on personal care assistance, including bathing and bathing safety. Also, "touch base with your local Area Agency on Aging and inquire as to what services are available under the family caregiver program," Greene advises. From information to assistance with access to services, the agency may be able to help—bathing may even be covered under home care, Greene says, depending on a number of factors such as frequency and need. Your local visiting nurse association may also help, particularly if you decide to hire an outside professional to assist with bathing.

"The bathroom is one of the major locations where accidents do occur with the elderly," Greene points out. As such, it's important for caregivers to have proper training and knowledge before embarking on bathing their loved ones. Their safety is your peace of mind. ■

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*For questions concerning bathing techniques used in elder-caregiving as well as any other hard-to-resolve eldercare issues, visit our Ask an Expert feature online at [www.caregivershome.com/community/askexpert.cfm](http://www.caregivershome.com/community/askexpert.cfm). Our Board of Experts will be happy to help.*

## RESOURCES

National Association of Area Agencies on Aging, [www.n4a.org/](http://www.n4a.org/) and (202) 872-0888

American Red Cross Family Caregiving Training Program, [www.redcross.org/services/hss/care/family.html](http://www.redcross.org/services/hss/care/family.html)

Cornell University Medical School, Gerontologic Environmental Modifications/Bathing Safety, [www.cornellaging.org/gem/product\\_bathing\\_index.html](http://www.cornellaging.org/gem/product_bathing_index.html)

## CALLED TO SERVE

The spiritual dimension of parish nursing sets it apart from other medical specialties. More than 95% of parish nurses responding to a 2003 survey said they felt "called" to parish/faith community nursing. They also reported that the integration of faith and health was among the most beneficial services they provide. The majority (92%) of the people helped by parish nurses are people over age 65.

*(Source: "Parish Nurse Survey," Nurse & Health Ministries Network and Arizona State University West, 2003)*

### Parish Nurses Continued from page 2

often maintain contact with family members who live far away," she said. "I also coordinate volunteers to visit with people who are homebound, write a monthly newsletter, and develop support groups."

She adds, "Feedback from our parishioners drives the focus of my efforts. Earlier this year, we held an educational forum about the new Medicare prescription program. We provided individual counseling, using a computer program to help them choose the best prescription plan."

Assessing the specific needs of constituents is a large part of any parish nurse's role. Based on parishioner input, other parish nurses have coordinated medical equipment loans, implemented medical resource referral programs, facilitated senior and caregiver support groups, and sponsored health clinics and blood pressure screenings. Others have implemented adult day care programs that allow family caregivers to drop off loved ones for a few hours or a day of respite.

Parish nursing is a field recognized by the American Nurses Association. Parish nurses typically provide support and counseling as opposed to hands-on medical care. They often act as liaisons between individuals, families, and healthcare providers, and can play a helpful role in explaining complex medical information.

They also provide a willing ear and a safe environment in which weary and worried caregivers can vent, and they provide support and companionship to those who feel alone and isolated.

Although parish nurses are usually affiliated with a religious organization,

they do not preach or otherwise impose any religious convictions on the people they help. Not all religious institutions have a parish nurse or a health ministry program, but they can be a source of information about locating one. Information about parish nursing can be found on the International Parish Nurse Resource Center website at [www.ipnrc.parishnurses.org](http://www.ipnrc.parishnurses.org), or by calling (314) 918-2559. Another resource is the Beatitudes Center for Developing Older Adult Resources' Nurse and Health Ministries Network at [www.centerdoar.org](http://www.centerdoar.org). ■

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## COMING UP IN SEPTEMBER

- **Geriatric med-psych care.** We'll tell you how caregivers and their loved ones can benefit from this comprehensive approach to meeting the medical, emotional, and social needs of our elderly.
- Always costly in many respects, we have **tips for caregivers to cut their costs** of caregiving.
- **"I can't do anything right!"** How primary caregivers can deal effectively with the competing interests of other family members and stay focused on the caregiving challenge at hand.
- **Food tricks, not a food fight.** Getting Mom and Dad to eat when they'd rather not—and they tell you so in no uncertain terms.

# Grandpa Donated His Body

For Grandpa, death isn't a concern; it's a lifestyle.

By Jason Love, for Spirituality & Health magazine

My grandpa is 83. I'm sorry—83 years, 5 months (he's back to counting in halves). That is four years past the life expectancy of American males. I know so because he tells me every time I visit.

For Grandpa, death isn't a concern; it's a lifestyle. He schedules his week around dates with Dr. Mioto, whose BMW he has personally financed. It starts every morning at six, when Grandpa hits the obituaries.

"See there," he points, "80 years old, heart failure. Right on schedule."

To stay out of the paper, my grandpa takes pills. By the truckload. He totes them around in an alabaster box and swigs 'em before every meal, sometimes during grace. One pill helps his blood pressure but causes trembling; another stops the trembling but causes cramping.

When I once asked whether my grandpa wanted the blue pill or the red pill, my grandpa took both.

"Got to keep the old body ticking," he winked.

And that's the point: my grandpa has turned himself in. He has given his body to science instead of owning his part in the miracle. He's got pills to make his hair grow and heart beat and lungs breathe — stuff that has been happening without his help for 83 and a half years! My fear is that the old tiger is going to die of medication overdose.

I've tried to pull my grandpa from his bender, but he can't hear me. He's beaten the odds by four years and owes it all to his alabaster box. And so long as we pill-popping junkies keep thinking that way, our gods will keep driving BMWs. ■



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