

Caregiver's

HOME COMPANION

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H E L P I N G T H O S E W H O H E L P O T H E R S

Caregiver Fear

What You Can Do to Cope with Your Worst Caregiving Fears

By Melissa A. Goodwin

"I've developed a new philosophy...I only dread one day at a time."

—Charlie Brown

Fear! It can jolt you awake in the middle of the night, your body soaked with sweat and your heart pounding. Fear can creep up from your stomach and grab hold of your heart like an icy fist. It can paralyze your mind and it can make you physically ill.

Fear is something everyone experiences at certain times, but caregivers are faced with more than their fair share. That's because caregiver fears are often compounded by shock and grief, typically resulting from an unexpected event, and exhaustion, usually from trying to manage both the emotional and practical aspects of caregiving.

Common Caregiver Fears

Fear of failing, by not living up to your own expectations of yourself or not meeting the demands of others on you, is a major source of caregiver anxiety.

Annette Clement, a caregiver from Cave Creek, Arizona, provides ongoing care for her husband and her mother and intermittent care for several elderly friends. She describes her experience with fear about caregiving this way: "You are petrified that you'll fail at such an important task, that you'll disappoint yourself, your loved one and extended family members."

While fear of failure looms large for many caregivers, a number of other fears

can also be at play. Here's a list of some of the most common ones:

- Being unable to handle the emotional issues
- Making the wrong decisions
- Running out of money
- Feeling resentful
- Missing out on the best years of our own lives
- Caregiving going on indefinitely—or ending suddenly
- Losing a loved one
- Our own mortality
- The unknown

Accept, Don't Avoid

Susan Jeffers, Ph.D. and author of the

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“Fear is a normal response to being thrust into the role of caregiver. But caregivers have to learn to acknowledge their thoughts and feelings and to remember that they are people first and caregivers second.”

—*psychologist Dr. Bernard Katz*

Caregiver Fear *Continued from page 1*

book *Feel the Fear and Do It Anyway*, says that avoiding our fears is a surefire way to make certain they won't go away. In fact, suppressing fear only ensures that it will return again and again to undermine and paralyze us.

Dr. Bernard Katz, a psychologist in Long Island, New York, agrees. “Fear is a normal response to being thrust into the role of caregiver. But caregivers have to learn to acknowledge their thoughts and feelings and to remember that they are people first and caregivers second,” says Dr. Katz.

Much of our fear comes from feeling that we are at the mercy of events beyond our control and helpless to do anything about them. The truth is that as long as we are living and growing, we will face unexpected situations and challenges that frighten us. Accepting that this is a normal fact of life is the first step toward empowering ourselves to overcome the feelings of helplessness and the fears that accompany them.

Play the ‘What If Game’

Instead of pushing our fears away, a more effective approach is to consciously think about what we would do if each one came to pass. I call this playing the “What If Game,” and it works like this: Write down each fear that you have. Then, for each fear expressed, write down a few things that you could do if it became a reality.

For example, to the question, “What if Dad's health gets worse,” you might respond, “I would ask the doctors to help me understand what happens next.” Or to the question, “What if we start to run out of money for Mom's care,” you might answer, “Then I would talk to an elder law attorney about our options.”

Even if you don't know exactly what steps you would take for each situation, simply acknowledging the possibility of what could happen and identifying one or two potential action steps can go a long way toward relieving your fears and helping you feel more empowered.

Dr. Jeffers says it's human nature to want to

UNDERSTANDING CAREGIVER FEAR

Caregivers are especially prone to feeling overwhelmed by fear and anxiety because they carry so many responsibilities while also dealing with emotional issues. Susan Jeffers, Ph.D. and author of *Feel the Fear and Do it Anyway*, offers a few basic truths about fear. These “truths” can help caregivers understand that the fear they experience is normal, and that there are ways to work through it.

Truth #1: “Not only am I going to experience fear whenever I'm on unfamiliar territory, but so is everyone else.”

Don't beat yourself up because you feel afraid. Taking on the role of caregiver is a big change and feeling scared is a normal and natural response.

Truth #2: “Pushing through fear is less frightening than living with the underlying fear that comes from a feeling of helplessness.”

Invite the fear in by asking yourself, “What am I afraid will happen?” Answering that question will reduce the sense of helplessness that increases fear.

Truth #3: “At the bottom of every one of your fears is simply the fear that you can't handle whatever life may bring you.”

Whatever happens, you will handle it — one way or another. Learning to trust your own instincts and abilities will, over time, lessen your fear.

wait until our fear goes away before taking action. But ironically, the only way to get rid of our fear of doing something is to go out and do it! The “doing it” comes before the fear goes away, but the doing it also makes the fear go away. So, when fears overwhelm, do something—anything—and your fear will automatically begin to diminish.

Have Faith in Yourself

Annette Clement's friend Bob cares for his wife who has Alzheimer's and for his 93-year-old

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OCD in Our Elderly

Is Mom Obsessively Compulsive— or Just Anxious?

By Kelly D. Morris



Karen Fleischner is terrified of germs. At age 65, she knows her fear is irrational, but she can't help it. She washes her hands dozens of times each day. In fact, she washes them so often that the skin becomes so dry it cracks and bleeds. Still, she can't stop herself.

Karen has obsessive-compulsive disorder (OCD). OCD is an anxiety disorder characterized by obsessions and compulsions. Karen, who lives in Boise, Idaho, is obsessed with the idea of germs, and her obsession drives her to compulsively wash her hands.

Many of our elderly loved ones develop some signs of OCD without receiving a diagnosis of the full-blown disorder. Their anxieties increase with their advancing age, as they come to terms with the challenges of growing old and becoming less independent. Old habits may become excessive; if mom always kept the house clean, she might begin to obsess about it and clean compulsively. Dealing with these symptoms can be a challenge for caregivers.

"Mom was constantly cleaning the house," says Gene Kearney of Hillsboro, Ohio. "She was obsessed with it. She'd say, look how dirty this floor is, and it would be sparkling clean. She was mopping the floor every day, sometimes more than once."

"We finally found out what was going on with her," Sandy Kearney, Gene's wife, says. "She was afraid that if she couldn't keep up with the housework she'd have to come live with us. She wanted to stay in her own home. She wanted to remain independent."

OCD vs. OCD-Like Behaviors

Gene's mother, Dorothy, doesn't really have obsessive-compulsive disorder, because there is a logical basis for her anxiety. She certainly had some OCD-like behaviors, however.

Kelly Morris is a former social worker and home health and hospice worker whose writing has appeared in a number of health-related journals. She lives in Mansfield, Ohio, and can be reached at multihearts@hotmail.com.

Once they realized they cause of her anxiety, Gene and Sandy were able to lay Dorothy's fears to rest. They assured her that they would help her remain in her own home. Sandy looked into community resources, and found that Dorothy would qualify for Meal on Wheels and for someone to come in and help with the housework if she needed it. The good news is that Dorothy still kept a very clean house, but she stopped obsessing about it.

How did Gene and Sandy find out what was worrying Dorothy? "One day I asked her what would happen if she didn't mop the floor," Sandy says. "And that's when we found out what was going on in her mind."

Anxiety and symptoms of OCD may get worse during times of change. Losing a spouse, moving to a new place, dealing with illness, and other times of stress may cause obsessions and compulsive behaviors to increase.

When Carol Sharpe's husband died and she became unable to live alone in her Greenhills, Ohio, home, the 82-year-old widow moved in with her daughter. As her children were helping her pack, they discovered she had stockpiled canned goods in the pantry. "She had 42 cans of green beans, 50 cans of peas, and 57 cans of creamed corn," says Carol's daughter Elizabeth. "I was amazed. And she didn't want us to get rid of any of it, either!"

Hoarding as OCD Symptom

It is not uncommon for the elderly to stockpile food and other goods. Having

lived through the Great Depression, many of them feel safer having plenty of supplies on hand. But this can also be a symptom of obsessive-compulsive disorder. The technical term for it is hoarding.

"We didn't know how to convince her she didn't need so much food," Elizabeth says. "We pretty much made her give a lot of the canned stuff to the food bank. I know it really upset her, but we didn't know how to help."

So how can you help your loved one if they are showing signs of obsessive-compulsive disorder?

Remember that the obsession and the behavior are signs of anxiety. Try to find the root cause of that anxiety so you can lay their fears to rest. You can ask, "Do you worry about running out of food?" or "What will happen if you don't mop the floor?" In some cases, your loved one may not know or understand the cause of their behavior, but in many cases they will be able to tell you.

Reassurance is Key

Reassure them as much as you can. "I will take you grocery shopping every week. And remember, Meals on Wheels brings you lunch every day." You may need to look for answers, as Sandy Kearney did, in order to provide reassurance. And you may need to repeat the reassurance several times before it sinks in.

If you are unable to reassure your loved one, and their behavior is causing them a lot of distress, they may need to see a doc-

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Caregiving Gadgets and Gizmos

Products to Ease Stress, Help Insure Safety

By Kelly D. Morris

Our never-ending search to find helpful devices that can improve life for you and your loved one has turned up some interesting products to keep your loved ones safe and to help them (and you) relieve stress. We've also continued to look for items to improve the quality of life for your loved ones with dementia.



Erase Stress

The StressEraser is a small biofeedback machine intended to allow you to monitor your stress (and do caregivers ever have stress!). Slip your finger into a slot on the device, and an infrared sensor will monitor your breathing and translate your pulse beats into waves you can watch on the display screen. All the while, the machine is basically decoding various nerve signals into something you can see and easily understand.

StressEraser tracks two types of nerve patterns—stimulating nerves that increase your heart rate and lead to faster breathing patterns, and pacifying nerves that do the opposite. You want the opposite pattern of pacifying nerves!

While tracking your nerve pattern, you watch the waves displayed on the screen. You want them to come in gentle arcs. This may take a little time on the machine,

because if you are under a lot of stress at the moment, the arcs will look more like peaked mountains. StressEraser also will monitor your breathing, and it will beep to tell you when to exhale. By controlling your breathing, the manufacturer says you will learn to control your stress.

Use the StressEraser during times that you feel particularly stressed to help calm yourself down, but also practice with it at other times. You'll learn the proper breathing pattern, and this may help when you need it—even without the machine. Use it for 15 minutes right before bed for a good night's sleep, the device manufacturer says. We think there's a double benefit from StressEraser—it calms mom or dad when agitated, but it's also a great help for overworked and overwhelmed caregivers.

The StressEraser retails for \$299. You can order by calling 888-437-0700 or order online at www.stresseraser.com.

Finger Fidgets

These innovative exercise gadgets provide exercise for the hands and also provide visual and auditory stimulation for those with dementia. Finger Fidgets come with three 10-inch plastic mesh sleeves in different colors with balls inside. There is a foam ball, a wooden ball, and a chime ball. Moving the balls inside the sleeves exercises the hands and fingers, making it also good for anyone with arthritis.



The colors, textures, and sound of the chime ball provide sensory stimulation that is helpful for those with dementia. It will be a soothing activity for someone with Alzheimer's disease, due to the repetitive nature of the task.

Finger Fidgets cost \$24 for a set of three. Call 800-225-2610 or order online at www.alimed.com.



Walk-In Bath Tub for Safety

These bath tubs are the perfect solution for someone who has trouble stepping over the lip of a regular tub. They have a door that opens and closes securely, allowing one to walk right in, preventing the risk of tripping and falling while climbing into the tub. You walk into the tub, close the water-tight door behind you, and then fill the tub. The tubs come with a color-matched grab bar and a slip-resistant floor for safety.

These tubs also come with the option to add a number of special features, including hydrotherapy water jets or air jets and an aromatherapy feature. These features make the tubs therapeutic as well as simply a way to get clean. They will help relieve the pain and tension ▶

associated with stress, arthritis, neuropathy, and other conditions.

The tubs are attractive and should fit in well with most bathroom décor. They are available in several sizes, to fit into most sized bathrooms.

These tubs aren't cheap. Prices for most walk-in tubs start around \$3,000, but may cost more depending on the model and additional options you choose. For more information, or to find an installer near you, call 800-465-1202 or visit them online at www.walkinbathtubstore.com.



Portable Grab Bars for Bath, Shower Safety

These portable grab bars from Bridge Medical are easily attached to any tub or shower to provide a safe handhold. There are two styles—the Telescoping Grip and the Telescoping Pivot Grip. Both are adjustable in length. The Pivot Grip bar works for non-parallel surfaces, such as corners. Both grips come in two sizes, medium and large.

These grab bars are useful if you don't want to install permanent bars because of a temporary need or housing restrictions. They are easy to attach and remove, and you can take them with you if you travel and set them up anywhere.

These grips range in price from about \$100-\$150. Look for them at a medical supply store near you, or call 877-746-7940 or look them up online at www.bridge-medical.com to find out where you can buy them.

Doll Therapy for Women with Alzheimer's

Dolls are not just child's play anymore; they're a recognized form of therapy for women with Alzheimer's disease. (Men can certainly try it out too, but most men obviously don't show an interest in the

dolls the way women do).

People with Alzheimer's may begin to lose interest in the world around them, but when given a life-like baby doll to hold, many women with Alzheimer's show interest in the doll. They hold it, talk to it, sing to it, and so on. The manufacturer says the doll brings back fond memories of when their own children were small and is a source of comfort to them.

For doll therapy to be effective, the doll needs to be as life-like as possible. We like the Ashton-Drake dolls. They are about the size of a newborn baby. They are made of vinyl, which feels soft like real skin. They look incredibly life-like.

The Ashton-Drake dolls come dressed, but you can purchase real baby clothing for them as well. Newborn-size clothing will fit them. Women in the early stages of Alzheimer's may enjoy changing the baby's clothes, but the women for whom doll therapy is most helpful, women in mid- to late-stage Alzheimer's, may find it difficult to dress a doll.

Ashton-Drake has several dolls to choose from. They range in price from about \$100 to \$130. You can view the dolls on their website at www.ashtondrake.com, or call 877-268-6638 for more information.

Kelly Morris is a former social worker and home health and hospice worker whose writing has appeared in a number of health-related journals. She lives in Mansfield, Ohio, and can be reached at multihearts@hotmail.com.



OCD in Our Elderly *Continued from page 3*

tor or therapist. Cognitive behavioral therapy, a form of therapy that looks at one's thoughts and resulting behaviors, is the recommended treatment for OCD. There is also medication to treat obsessive-compulsive disorder. Medication works by increasing the amount of a neurotransmitter called serotonin in the brain.

There are many stress reduction techniques that may also help relieve anxiety. You can find guided relaxation tapes at many bookstores and public libraries. Your loved one can also try yoga. You probably picture someone bending himself up like a pretzel, but there are plenty of other, more sedate, yoga postures. There are even some that can be done by people with limited mobility. Yoga also teaches deep breathing for relaxation—excellent tools in this case.

If your loved one tends to hoard things such as food, make sure you check the expiration dates. Food safety can become a concern. Elderly people may also hoard medication, which can be downright dangerous if they take too much or take the wrong pills. While you're cleaning out the pantry, clean out the medicine cabinet as well.

Some elderly people also hoard pets—yes, pets. You've probably heard stories of an elderly lady with two dozen cats. If this, or something like it, is the case, call the local Humane Society or your local no-kill shelter for help.

Coping with OCD symptoms in a loved one can be frustrating. Understanding where they are coming from can make it a little easier. And remember there are ways to help relieve the anxiety your loved one is feeling. If you can't help them cope with the anxiety by yourself, don't hesitate to talk to their doctor. There *is* help available. ■

RESOURCES:

The Obsessive Compulsive Foundation
PO Box 961029, Boston, MA 02196
617-973-5801 www.ocfoundation.org

The Anxiety Disorders Association of America
8739 Georgia Avenue,
Silver Spring, MD 20910
240-485-1001 www.adaa.org

Is Alzheimer's Type 3 Diabetes?

Dementia and Diabetes Linked in Elderly

By Lori Zantesson

Research is increasingly linking dementia and diabetes, with their shared infamous reputation for cutting a wide and speedy path through our aging population.

The findings, in fact, are eye-opening: Studies show that people who develop diabetes in midlife or later are at twice the risk for developing dementia. Diabetes is characterized by chronic high blood sugar, a condition which harms the brain, the resident area of dementia.

This link may seem to be yet another blow to caregivers whose burdens are already stacked too high. A closer look, however, shows that this new information may actually make it possible to stave off dementia in their loved one and themselves—by preventing or controlling diabetes.

Diabetes is on the rise due in large part to our country's obesity epidemic. The number of Americans who have type 2 diabetes has doubled in the last 20 years to more than 20 million cases. A staggering 41 million people are pre-diabetic, meaning they have blood-sugar levels that are rising toward the diabetic level.

Diabetes is a disease in which the body does not produce or properly use insulin, a hormone that's needed to convert sugar, starches, and other food into energy needed for daily life. It is characterized by chronic high blood sugar which harms body and brain. Glucose, a blood sugar, is the brain's major energy source. The body regulates glucose by producing insulin released by the pancreas. High blood sugar occurs when the body doesn't produce enough insulin, or the organs like the heart, brain, and muscles, don't respond to the insulin.

Insulin is as important to the brain as it is to the body. Insulin modulates cognition and other aspects of normal brain

function. It is needed for learning and memory, and it plays a role in a mechanism necessary for nerve cells to survive and memories to form.

In type 2 diabetes, the most common form of the disease, the body either does not produce enough insulin or it may be resistant to it. This is known as insulin resistance, or IR. IR is characterized by reduced brain insulin levels and insulin activity. Obesity, type 2 diabetes, and hypertension are strongly associated with IR. According to a report in the journal *Current Alzheimer's Research* in April 2007, IR increases the risk of age-related memory impairment and Alzheimer's disease. This risk increases with age, specifically beginning in midlife when the adult body may not respond to normal insulin amounts.

Diabetes and dementia share several links. They include risk factors such as midlife obesity and lack of physical activity. Diabetics and pre-diabetics are also prone to other health problems that can increase the risk of dementia such as stroke, high blood pressure and high cholesterol, all of which are associated with poor mental performance.

Another shared link is the toxic effect high blood glucose may have on the brain. Amyloid proteins, which are similar to senile plaques, form when blood sugar in the brain is too high. Amyloid build-up kills brain cells. This is the same protein found in the brain of Alzheimer's patients and in the pancreas of diabetics, causing some researchers to refer to Alzheimer's disease as type 3 diabetes.

Insulin resistance represents yet another link between the two diseases because it leads to cognitive decline similar to that seen in Alzheimer's patients. A person with Alzheimer's disease not only has dysfunctional learning and memory loss, but also a decrease in new brain cell formation

and the repair of damaged cells. Insulin increases inflammation in the brain, as well, contributing to Alzheimer's.

The April 9, 2008, issue of the medical journal *Neurology* published the results of a Swedish study of 2,300 Swedish men who were followed for 32 years after being glucose tested for diabetes at the age of ▶

TIPS TO PREVENT TYPE 2 DIABETES



Eat a healthy, high-fiber diet that is low in saturated fat, trans fat and cholesterol.

Include a variety of fruits and vegetables, whole grains, and beans. If you are overweight, begin a weight loss program to maintain a healthy weight.

Exercise at least 30 minutes every day or most days. Moderate physical activity like walking is an effective way to regulate blood sugar levels.



Get screened for diabetes regularly. Begin at age 45 or sooner if you are overweight or have a family history.



Look for symptoms like frequent urination and thirst, fatigue, weight loss or blurred vision.

Alzheimer's/Diabetes

Continued from page 6

50. In all, 102 were diagnosed with Alzheimer's, 57 with vascular dementia, and 235 with other types of dementia or other cognitive impairment. The men with low insulin levels at age 50 were nearly one-and-a-half times more likely than those without insulin problems to develop Alzheimer's despite blood pressure, cholesterol, body mass index or education.

Says the study author, Elina Ronnema of Uppsala University, "Our results suggest a link between insulin problems and the origins of Alzheimer's disease and emphasize the importance of insulin in normal brain function. It's possible that insulin problems damage blood vessels in the brain, which leads to memory problems and Alzheimer's disease, but more research is needed to identify the exact mechanisms."

Preventing or controlling type 2 diabetes may be a way to prevent Alzheimer's and other dementia. Too much fatty tissue reduces the efficiency of insulin in the body, which can alter the activity and health of brain cells. Researchers at the Johns Hopkins Bloomberg School of Public Health have found a consistent connection between obesity and dementia after an analysis of 20 years of studies beginning in 1995. They concluded that obesity increases the risk of dementia in general by 42%, Alzheimer's by 80% and vascular dementia by 73%. There was no added risk in people who were normal or overweight.

Dr. Youfa Wang, senior author of the study, said, "Preventing or treating obesity at a younger age could play a major role in reducing the number of dementia patients and those with other commonly associated illnesses such as Alzheimer's disease by up to 20% in the United States."

Diabetes is both preventable and controllable. The American Diabetes Association advises screening beginning at age 45, or sooner if you are overweight and exhibit another risk factor such as having an immediate relative with diabetes, previous gestational diabetes, or if you have hypertension, dyslipidemia, or are an ethnicity other than Caucasian. Be aware that many people show no symptoms of the disease, and diabetes is often not discovered until a screening. Symptoms that may appear are frequent

urination and thirst, fatigue and weight loss, extreme hunger, irritability, and blurred vision.

Though high blood sugar may mean an increased risk of dementia, pre-diabetes and diabetes can be prevented, delayed, and controlled. It's proof of the body-mind connection that says your brain is only as healthy as your body.

Think of the link between diabetes and dementia as an added motivation to make healthy lifestyle choices, like eating right and exercising that are beneficial to both body and mind. Living dementia-free for as long as possible is worth it. ■

Lori Zanteson is a California-based freelance writer. She specializes in topics related to families and can be reached at lorizanteson@verizon.net.

RESOURCES

Medicare Diabetes Information
www.medicare.gov/Health/Diabetes.asp

CDC Diabetes Public Health Resource
www.cdc.gov/diabetes/

National Diabetes Information Clearinghouse
<http://diabetes.niddk.nih.gov/>

American Diabetes Association
www.diabetes.org

National Diabetes Education Program
<http://ndep.nih.gov/>

COMING UP IN JUNE

- The troubled US economy is taking its toll on all of us, but for our elderly, often on fixed incomes, the picture is even bleaker. How they're affected and what caregivers can do to cushion the blow.
- When just getting to the doctor is half the battle—looking for ways to make these necessary visits easier on everyone.
- How to balance Mom's need for Medicaid and meet the program's requirements, while still preserving her asset base. Useful tips for caregivers.
- Keeping an elderly loved one's medications straight is always a chore, for them and for you. But because an estimated 7,000 deaths occur each year from meds errors in the home, it's absolutely critical. We'll give you organizational tips for caregivers.

Caregiver Fears *Continued from page 2*

mother. Bob told Annette, "I'm very rarely wrong, so when I make a decision, I just stick with it!" Oh, if only we could all be like Bob, with such faith in ourselves and confidence in our decision-making abilities!

At the root of all of our fears is the more basic fear that we won't be able to handle the situations we may have to face. But the key to conquering fear lies in developing more trust in our ability to handle whatever comes our way. Most of us aren't as confident as Bob, but we are also a lot more capable than we realize or are willing to admit. Still, there are steps we can take to build up our confidence and reduce our fears:

- Arm yourself with information and don't be afraid to seek out professional advice. Being informed about what may lie ahead will enable you to prepare in advance, reducing the feelings of helplessness that lead to anxiety and fear.
- Forget about perfection. You'll make mistakes and you'll have successes. If something doesn't work out well, accept it as a learning experience and move on. Don't let others undermine you by telling you what you should have done differently. When a decision you make works out well, take a little time to give yourself a pat on the back.
- Trust your instincts. You know more than you may give yourself credit for, so don't be afraid to go with your gut.

Create your own mantra. A mantra is a positive affirmation that you repeat in your mind. Over time, the mantra can become your natural response in stressful situations. Susan Jeffers suggests that when your mind is running amok with all those frightening "What If's," a good response mantra to use is, "I'll handle it!" And you will! ■

Melissa A. Goodwin is a freelance writer and photographer living in Santa Fe, New Mexico. She has years of experience working with volunteer caregiving programs that help seniors and family caregivers. She can be reached at meesarj@msn.com.



No Matter What Your Age Be Prepared for Summer Allergies!

ITCHY, WATERY EYES. STUFFY NOSE. SNEEZING. SOUND FAMILIAR? As much as we love it, warm weather can spell misery for the 20 million to 30 million Americans—many of them among our elderly—who suffer from allergies.

According to Dr. Leslie Miller, director of the emergency department at NewYork-Presbyterian Hospital, the majority of spring respiratory problems come from inhaling such allergens as trees or grass pollen and mold spores. Exposure to dust, pet dander, and other indoor pollutants can worsen the severity of spring and summer allergies, essentially adding fuel to the fire.

In addition, Dr. William Reisacher, an ear, nose and throat specialist at NewYork-Presbyterian Hospital/Weill Cornell Medical Center, says allergies can trigger or worsen asthma and other respiratory illnesses.

Drs. Miller and Reisacher suggest the following tips to help allergy sufferers'

weather through the season:

If you stay in air-conditioned areas with windows closed, you may reduce your symptoms. Be aware that symptoms will flare up the moment you go outside and may remain with you for the rest of the day.

Window air-conditioning units are useful in filtering out large, airborne pollen particles. If you are allergic to pollen it is recommended to run the air-conditioner as much as possible during the warm-weather months. If you use an air conditioner, keep it clean. Heating, ventilation and air-conditioning systems harbor moisture, mold and dust.

If you suffer from mild symptoms, over-the-counter antihistamines will help for a few hours. Caution should be taken because they may cause drowsiness. Driving and operating heavy machinery should be avoided. Occasionally, older men develop urination problems when

taking antihistamines.

If you need more relief, over-the-counter antihistamines combined with a decongestant can relieve symptoms, but read the package for health warnings. Individuals who take multiple medications, and those with chronic medical issues like hypertension or prostate problems, should consult a physician.

If you are concerned about your symptoms, see your physician. In almost all instances, identifying allergic sensitivities and tailoring treatment with prescription drugs, nasal sprays, eye drops, non-sedating antihistamines or allergy shots, or specific allergen avoidance can help alleviate symptoms.

Taking care of yourself or a loved one—no matter what age—can make the warm-weather seasons much more comfortable for caregiver and care recipient alike. ■

Give the Lasting Gift of Care

how you care to those around you who can benefit from the same information, tips, advice and how-to features you receive every month in *Caregiver's Home Companion*.

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HELPING THOSE WHO HELP OTHERS

Alcohol and the Elderly: An All-too-Common Bond with Serious Consequences

By Paula McCann

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