



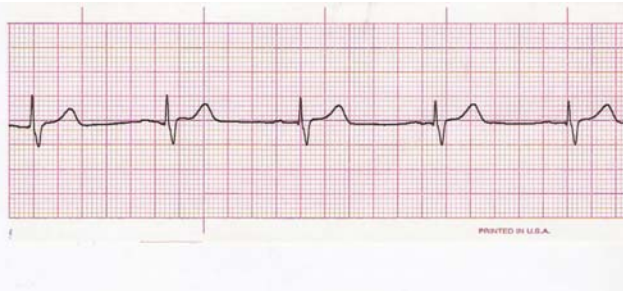
www.mendedhearts.org

Mended Hearts, Inc.

Greater Rochester Chapter 50

"Heartbeat of Rochester"

May/June – July/Aug 2008 Issue Number 20



Upcoming Meetings

May



Monday May 19, 2008
(Third Monday in May)

Place: Henrietta Ambulance Facility
280 Calkins Rd. 14623

Meeting Time: 7:15PM

Guest: Donald Londorf, MD, L.Ac. - a physician, acupuncturist, herbologist, qigong master and practitioner of Peruvian shamanic healing.

Topic: See page 9 for his Bio and more information!



Mended Hearts Prayer

We ask for your blessings, Lord:
We ask for strength that we may pass
it on to others
We ask for faith that we may give
hope to others
We ask for health that we may
encourage others
We ask Lord for wisdom that we may
use all your gifts well.
It's Great to be Alive — and to help others

Monday June 2, 2008
(Third Monday in April) - In lieu of our regular meeting

Officers Installation Dinner

Place: Keenan's Restaurant – located at 1010 Ridge Rd. East. Between Portland Ave. & Carter St. - We have a separate room.

Time: 6:00 PM Cocktails
6:30 PM Dinner

Price: \$20.00 per person.

See details and directions – page 6

No meeting in July or August - however, don't miss the annual summer-fest picnic, hosted by the Joyal's at their home – 65 Erie Dr. Fairport.

Call – RSVP at 377-1247 by July 20th

Date – Sunday July 27th

Time – Starting at 1:00 pm. Remember you need only bring a dish to pass. Mended Hearts will supply the meat, beverages, paper products, snacks & desserts. Hope to see you there.

Canandaigua Chapter --- See Page 10

June

Strong to get 'open' MRI

(February 25, 2008) —

Strong Memorial Hospital will install the area's first "open" magnetic resonance imaging machine, which will let patients be scanned without entering an enclosed tube.

Strong officials plan to move the 7seven-ton 1-Tesla MRI scanner into the hospital today02-23 and begin using the machine in April.

The new MRI will place a circular dome over the body parts that need to be scanned and leave all other areas open.

Hospital officials said the open MRI will help scan adults who are claustrophobic or obese, and small children who would need anesthesia to stay still through a traditional MRI scan.



Reprinted from *Caregiver's Handbook: A Guide to Caring for the III, Elderly, or Disabled ... and Yourself* — A Special Health Report from Harvard Medical School, Copyright © 2008 by Harvard University. All rights reserved.

Survival tips for current and future caregivers

One day you may find that someone you care about — a spouse, parent, relative, or close friend — needs help negotiating the daily tasks of life. Perhaps that day has already come.

Well over 44 million informal or family caregivers offer assistance of all sorts in America, according to the National Alliance for Caregiving

and AARP. Their efforts are vital to the lives of people struggling with illness, disability, or the changes that often accompany aging.

The spectrum of tasks that unpaid caregivers undertake is vast. Some, such as grocery shopping and cooking, are familiar to us all. Giving injections, changing bandages, calming an agitated parent suffering from Alzheimer's disease, or helping a disabled partner get from the bed to the bathroom can be far more daunting. According to a survey undertaken in New York, well over half of caregivers receive no training before plunging in. But through countless unheralded contributions like these, caregivers allow millions of Americans to continue to live as independently as possible.

Talking with your loved one

Discussing needs can be a prickly business. It may be easy for you to imagine what sort of help is necessary, but much harder to discuss it openly or come to an agreement with the person who needs care.

Ask before deciding

Ask the person in need of care to spell out what he or she believes would help. One way to open a conversation is to say: "I've wondered if you're having any trouble with _____." Or "I've noticed it is getting harder for you to _____."

If offers of help are flatly declined, you might call in a second opinion about the need for assistance. Try talking to the person's doctor or trusted relatives or friends. Their opinions may carry more weight than your own. Some doctors, particularly geriatricians, may be

willing to schedule and attend a family conference to talk about what is needed. Geriatric care managers or social workers can also help facilitate these kinds of discussions and present a range of options.

Encourage forethought

Whenever possible, it helps enormously to plan ahead for certain types of assistance, such as good nursing home care and insurance coverage. You might start a conversation by saying: "I read about Medicaid planning in the news today. Do you know about this?"

Be sensitive

In many families, parents never talk to their children — even after they become adults — about finances or health problems. And it is hard to ask sensitive questions of a relative, spouse, or partner who already feels pressured from illness.

Raising concerns about your own financial future can make it easier for you to ask your parent about his or her finances. The same tactic may work well for discussing end-of-life decisions. You may find that the person wants to acknowledge these issues. It can be a relief to talk frankly about troubling topics and share concerns rather than hiding them.

Be truthful

Certain topics — that the individual shouldn't be driving or that it's getting too difficult to continue caring for a person at home — are painful to discuss for everyone concerned. Even so, telling white lies or making promises that are impossible to keep can come back to haunt you. **Cont'd Page 8**

The "HEARTBEAT of ROCHESTER" is the bimonthly periodical from the Mended Hearts, Inc., Rochester NY Chapter #50. Chapter #50 is a nonprofit service organization of Mended Hearts, Inc., Dallas, Texas, which is dedicated to alleviating the stress and trauma associated with heart disease and surgery. This periodical is issued free of charge to heart patients and to members of the Chapter #50 Mended Hearts Inc.

Permission is granted for anyone to reprint any portion of this newsletter.

CHAPTER 50 IS GOING ON THE INTERNET!

Gene Binder

Yes, that's right. Your chapter's executive board has decided to join the 21st century tech world. When we're officially online, you'll be able to run (not walk) to your friendly PC, bring up your Internet browser, enter www.mendedheartsrochester.org, and there will appear Chapter 50's very own web site. Some of the features on it will be:

1. A complete detailed schedule of future meetings and events, for our chapter, our Canandaigua satellite and some nearby chapters.
2. Instructions on membership along with a membership application that can be printed, completed and mailed in.
3. A link for contacting the board. It can be used by any member for suggestions about this web site or any other matter concerning the chapter, a heart patient desiring support from a fellow patient, or any other inquiry about our chapter or organization.
4. There will be a page about the chapter's visiting program. Full details about accreditation meetings will be there. Any member interested in information about heart patient visiting can use the "contact us" link.
5. You'll be able to read any issue, for the last 2 years, of the chapter's award winning newsletter, The Heartbeat of Rochester.
6. There will be links to the Mended Hearts national web site as well as the American Heart Association, providing access to a wealth of topics.

The site will be operated by Fearless Compute, a professional company in Webster that provides reasonably priced tech services to organizations like ours. Funding comes from a grant arranged by State Assemblyman Joseph Morelle, the request for which was submitted by chapter member and former chapter treasurer, Sue Taney. So, what are we waiting for?

Unfortunately, no funds can be provided until the successful passage of the state budget. Sound familiar? We seemed to have gone down this road before. There's no approved budget as of the date I'm writing this, April 9. Think it will be done by the time you read this? If so, go to your PC and see if it's there.



Depression, heart disease often go hand in hand

By Charnicia E. Huggins - SOURCE: Mayo Clinic Women's HealthSource, February 2006.

NEW YORK (Reuters Health) - Depression is one of the most common health disorders in the US, and heart disease is a leading cause of death. "Although they can and do occur separately, research shows that the two conditions are often connected," health experts write in the February issue of the Mayo Clinic Women's HealthSource.

Previous studies have shown that depression is more common among people with heart disease than among those without. Researchers found that one in three heart attack survivors experience depression, compared to about one in 20 adults in the general population.

Depression has also been shown to be a precursor to heart disease. In one study of postmenopausal women, investigators found that those with symptoms of depression were 50 percent more likely to develop or die from heart disease than those without such symptoms, even though they had no prior history of heart disease.

Cont'd – Page 5



President's Corner

I wanted you to know about some wonderful events coming up, one in Rochester, one in Hartford CT, and one in Canandaigua.

On Thursday, May 15th the American Heart Association will present the Go Red for Women Luncheon at the Crowne Plaza to pay tribute to the countless numbers of women who have suffered from heart disease and stroke. The event will start at 10:00 am with many vendors including blood pressure screening, cholesterol testing, Chapter 50, etc. There will be prizes auctioned off, a delicious lunch, a guest speaker and lots of fun. If you would like to attend please contact Diane Chevron, (585) 697-6276 by May 10th. The cost is \$50 a ticket. Hope to see you there. Men are invited too!

The annual Mended Hearts Convention will take place May 24-28 in Hartford, CT. Joining the program in Hartford will be Dr. Wayne Sotile – back by popular demand. Dr. Sotile is one of the nation's preeminent psychologists on the subject of depression and heart disease and whose message of "Thriving with Heart Disease" drew some of the highest speaker evaluations ever when he spoke at the Charleston, SC convention several years ago. Also joining us will be Dr. Kathryn Taubert, senior scientist at the American Heart Association, who will speak on some of the latest trends and developments in cardiovascular treatment and science. There will be workshops and social gatherings that will really make you glad that you attended. Give me a call or go to www.mendedhearts.org to find out more about the convention. There

may be some scholarship money available, so let me know if you plan to attend.

Now in its 12th year, the newly renamed Rose Walk will be held on Saturday, June 21, 2008, 8:00am to 11:00 am, at Sonnenberg Gardens and Mansion State Historic Park in Canandaigua. The proceeds from this event will directly benefit the Thompson Health Cardiac Rehabilitation Scholarship Fund. Thompson Health offers a comprehensive Cardiac Rehabilitation Program, the only one of its kind in the Canandaigua community, to help patients recover and thrive after a cardiac event. Unfortunately there is a growing number of patients who require scholarship assistance to participate fully in this program. The Thompson Health Cardiac Rehabilitation Scholarship Fund has been established to assist those patients who cannot afford the cost of this vital cardiac rehabilitation program. The funds from this Rose Walk are used to help patients with their co-pays in Cardiac Rehab. They come 18-36 visits, three times a week and have co-pays of \$20-40. Many would be unable to attend if it were not for the Rose Walk proceeds. Over the past five years alone Walk participants and sponsors have provided "scholarship" assistance to hundreds of patients - totaling more than \$50,000! If you are interested in participating in the Rose Walk contact the Cardiac Rehabilitation Department at (585) 396-6375 for an application. You will definitely have a wonderful time while doing very important fundraising work for those less fortunate.

Our meeting last month with Ginger Zimmerman was great. Those of us who heard her speak were in awe of her ability to overcome and thrive through all she's had to endure. You truly missed a great meeting. Our speakers for April and May are outstanding. Set some time aside so that you too can attend. Jackie is

setting up a great dinner for June – look for the info in this newsletter. Spring may have finally arrived. Have you gotten out for a walk yet? I live near Durand Eastman Park where there is now a great walking path that goes along Lake Ontario and through a bit of the Park. It's a really picturesque walk. There's loads of parking and this time of year it's not too crowded. Wave if you see me. Hope you have a healthy and happy summer.~~~Sharon

Visiting Chairman's Report

Congratulations are in order for our 3 newest visitors, Frank Angevine, Charlie Frame and Mac McGonigle, who completed their accreditation training on April 9th. Charlie and Frank will visit at Rochester General and Mac will be at Strong Memorial. Our visiting coverage is getting better at both hospitals.

Good news for Cliff, Hazel and the rest of our visiting staff at Strong. Sharon and I met with the nurse manager of the cardiac surgical unit, and, as of Monday, April 14th, we will have our own 4-drawer file cabinet in an office adjacent to that unit, in which you will be able to have all of the visiting supplies that are available to us right up where you use them. No more having to carry up brochures, etc, from the first floor. Also, Sharon and I spoke with the nurse manager from the angioplasty unit, and they would welcome our visitors coming to see their patients. Visitors at Strong should work with Cliff and Hazel about visiting in that unit.

I'm trying to put together a reaccreditation class in May, and I'll be in touch with those visitors that would need that class.

For the first 3 months of 2008 we're 122 hospital visits ahead of the same time period last year.

Harvey L. Steron

Visiting Chairman Chapter # 50

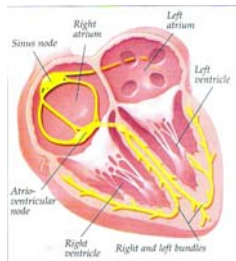


Spidey: – My Motor Neuron Disease is causing me more problems. I have to stand and type with one finger. It is my sincere hope someone will step up and take over as newsletter Editor. Nearly all the Board members are already doing double duty as it is. We need fresh faces – soon. “Lets Rock & Roll,” as they say, & put this last newsletter of the 2007/2008 meeting year to bed. See you all in the fall! **Don’t forget the Installation DINNER on Monday June 16th or the PICNIC at the Joyal’s on Sunday July 27th - 1pm.**

Editor’s Corner

Welcome New Members:

Gerald P. McGonigle



In honor of our celebrants!

If anyone was missed – our sincere apologies.

May

Andrew Chastek
Donald Clark
Dorothy Specksgoor
Harvey Steron
Audrey Verschneider
Carl Zollo

June

Mary Amato
Anthony Carlisi
Vernon Iuppa
Donovan Jenkins, Jr.
Douglas Johnson
Philip Mendola
Richard Rosenbloom
Sherman Soles
Robert White

"If you do not wish your name and anniversary of your procedure listed in the newsletter, then please contact newsletter editor Brent Gosson at 585-467-4194

*Mended Hearts
“Dedicated to inspiring hope
in heart disease patients and
their families.”*

Mended Hearts - Chapter 50 would like to express its sincere thanks to the “Rochester Heart Institute” – an integral part of Rochester General Hospital for their generous assistance in printing our newsletter!

Food Quickies:

Ham and Eggs - A day's work for a chicken; a lifetime commitment for a pig.

If I eat equal amounts of dark chocolate and white chocolate, is that a balanced diet?

Diet tip: Eat a chocolate bar before each meal. It'll take the edge off your appetite and you'll eat less. (A diet worth following! ;-))

Mended Hearts - Chapter 50 wishes to thank Lori’s Natural Foods Ctr. for supplying the organic apples we serve at our monthly meetings!

Depression – Con’t. from Page 3

Explaining the connection between the two conditions, the Mayo Clinic experts note that depression affects not only the mind but also

physical health. Depression has been linked to increased blood pressure and abnormal heart rhythms, as well as chronically elevated stress hormone levels, which can increase the heart's workload.

"Even if you don't have heart disease, if you are chronically depressed, you are at somewhat increased risk of heart disease," Dr. Sharonne Hayes, a specialty reviewer of the HealthSource publication, told Reuters Health. What's more, people with a history of depression "are susceptible for recurrence" if they develop heart disease, said Hayes, who is also the director of the Women's Heart Clinic at the Mayo Clinic in Rochester, Minnesota.

Yet, "the complex interplay between the two conditions may allow for one or both to go undiagnosed," according to the HealthSource article.

Findings from a previously reported study show that even doctors and nurses do not always readily assess depression in heart patients, and it is "hard for patients to recognize" their own depressive symptoms, Hayes said. **Con’t – Page 8**

Installation Dinner Details

Menu will include -----
Carved Roast Beef, Oven Roasted Chicken, Baked Haddock, Soup & Relish Tray, Tossed Salad, Chilled Fruit, Oven Roasted Potatoes, Baked Pasta, Vegetable Du Juor Mexican Corn, Homemade Coleslaw, Bread & Butter, Coffee, Tea, Soda and Dessert

You need only send a check for \$20/person; to Jackie Joyal at 65 Erie Dr. Fairport, NY 14450 & tell her the number of people in your party. Please make your check payable to Mended Hearts--
Chapter 50

Please RSVP by June 9th
Dinner - Monday June 16th
Keenan's - located at 1010 Ridge Rd. East. Take 590 to Rt. 104 W to Carter St. Exit. Turn North [right] to Ridge Rd. Turn right on Ridge Rd. - Loc. in GeorgeTowne Plaza on your left -phone no. is 266-2691

Notes from our March Mtg.

Ginger Zimmerman, a very courageous woman, was the speaker at our March meeting. She is an artist, writer, motivational speaker and heart transplant recipient. At age 28 she was stricken with a virus that attached itself to her heart muscle and slowly began destroying it. When she complained to doctors that something felt wrong with her heart they didn't believe her after all she was young and looked very healthy. She pleaded with her doctors to listen to her. Over the next 4 years she saw doctors who specialized in thyroid problems and fibromyalgia. They treated her for bronchitis because she was having trouble breathing. She was even told by one doctor that it was all in her

head and she should see a psychiatrist. It was even written in her medical file that she was a hypochondriac so that when she did go to see other doctors, they immediately dismissed anything she told them. She began coughing up blood as her heart was too weak to do its' job. Her lungs began to fill with fluid and she was rushed to the hospital. A local Internist and Cardiologist discovered her heart was working at less than 15%. She was told that she should prepare herself and her family for what might happen as she was at risk for sudden cardiac death. She was immediately put on the transplant list. If someone had listened to her even one year before and started treating her she would not have needed a transplant. Her husband David an Offshore Surveyor was working in the Gulf of Mexico when the call came that a heart was found for Ginger. His company flew him by helicopter to be with Ginger before her surgery. The pilot who was on his cell phone [Remember how big the first cell phones were?] while flying the helicopter crashed. David and the pilot survived the crash and David even was able to see Ginger, but tragically he died 9 days later from injuries he sustained in the crash. Her husband was an advocate for organ donation and had made it clear that if anything happened to him, he wanted to be a donor. Ginger and her 3 young sons donated his organs. Four other people's lives were saved by David's organs, his corneas gave the gift of sight to another person and his bones and tissues greatly improved others lives. Unfortunately her in-laws were against organ donation and never forgave Ginger for what she did. To this day they refuse to

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have anything to do with her or their grandsons. It's been 10 years since she had her transplant. Looking at her no one would ever guess that she had a heart transplant. She strives to lead a healthy active life. How did she survive a transplant, her husband's death and everything she went through over the next few years? Ginger will tell you: "Loving my heart, my health and my life, after all, I have three very important reasons to survive...my three sons!" Indeed, Ginger is an inspiration to everyone who meets her.



**ROCHESTER
GENERAL
HOSPITAL**
HOME OF THE
Rochester Heart Institute

A Cleveland Clinic heart surgery center
THE CLEVELAND CLINIC

HEART WALK 2008

The American Heart Walk in our area was Saturday April 5th. It was a great success. The weather was great as well. Our chapter contributions so far is over \$3400. !!!! Again this year **Bob Peri** is our major fund raiser. So far he alone has raised over \$2400.00 !!!! Thanks again Bob for all of the time that you give to this cause., it is greatly appreciated. We want to thank all who participated. They are **Bob Peri, Georgianne & Gene Binder, Harvey Steron, Bill Servis, Ron Tuttle, Carl Brant, Sharon Feldman & Bob Joyal.** If anyone has any other funds they have raised or would like to make a donation to the American Heart Walk please let us know. No contribution is too small. Again a heart felt thanks to all who participated. Please contact Jackie or Bob Joyal [377-1247]

Research on aspirin takes heart

Amy Wilson
McClatchy Newspapers

(February 6, 2008) — In 1982, 22,071 male doctors agreed to be part of a study to see whether a single tablet of aspirin would reduce their risk of heart attack. They were the right age — between 40 and 84. They were healthy, with no history of heart disease.

One group took 325 milligrams of aspirin and another took 325 mg of sugar. The study was called the Physicians' Health Study, and it was supposed to last through 1990.

By March 1988, an independent board looking at the data had seen enough. The aspirin regimen produced a 47 percent reduction in the total incidence of heart attacks.

Now an estimated 50 million Americans take the over-the-counter pain reliever to protect their hearts from clots, which cause attacks and strokes.

It's been 20 years since the first news, and science continues to refine the initial finding. Last spring, researchers at the University of Kentucky published findings that might have changed some thinking in the medical profession. In short, they said that not everyone needs an aspirin a day. And if you do, they said, you sure don't need 325 mg.

Two of those researchers — cardiologists Charles Campbell and Susan Smyth at UK's Gill Heart Institute — recently explained their work and the most

current findings about aspirin and heart health.

What was the crux of your findings?

In a review of numerous trials employing aspirin as a preventive and as a subsequent regimen after an initial heart attack, we could not find a benefit from taking the higher (1 adult tablet, 325 mg) dose over taking a quarter of that (one baby aspirin, 81 mg) dose.

So taking a baby aspirin a day is now what should be recommended?

If it's warranted. No one should begin an aspirin regimen without first speaking to a doctor or health care provider. Things like your blood pressure and cholesterol count and family history are what's important in determining your risk of heart attack, and those should be analyzed before any regimen is begun.

In general, if it's been determined that you have a 10 percent chance of having a heart attack in the next 10 years, the aspirin regimen is advisable. Obviously, the higher the risk, the more benefit you accrue.

If it's warranted and I am diligent in taking it daily, am I absolutely reducing my risk of heart attack?

It's hard to prove the negative. And it may matter if you are male or female. In studies with men, there is reasonable data to suggest that taking an aspirin will reduce heart attack risk but not stroke. (It should be noted that men suffer heart attacks about 10 years earlier in life — i.e., in their 50s — than women do.) And in studies with

women, the effect of the regimen seems to be reducing stroke but not heart attack.

But what about if I'm having a heart attack?

Get an aspirin into you as quickly as you can. In an emergency room setting, that's 162 mg — or two baby aspirins — but 325 mg is fine. Chew it so that it dissolves and gets into your bloodstream with haste. Some 250,000 people die of heart attacks each year before they reach a hospital. That number could be reduced if more would recognize the symptoms of a heart attack and act accordingly.

Do Tylenol or Motrin work the same way?

No. Those are different products and do not have the same mechanism. However, do not take these drugs and aspirin together, as they compete for the same binding sites and may blind each other's positive effects.

Does coated aspirin work?

That's not really clear, but absolutely do not use it in the acute setting — where you're in the midst of a heart attack. It would take too long to get into your system.

Who should not take a daily dose of aspirin to prevent heart attack?

Anyone at low risk of having a heart attack. If there is not much benefit of using the drug or any drug, all that you're left with is the side effects and, in the case of aspirin, that can be bleeding into the stomach or intestines or an allergic reaction.

No one ever wants to go to a nursing home, for example, but instead of pledging that this will never happen, it may be best to promise only that you will try hard to work out other solutions for as long as possible. If you know a nursing home is the best long-term option, it doesn't help to suggest that such a move is just for a few weeks. When those weeks are over, the reckoning and sense of betrayal are impossible to sidestep. It's better to acknowledge that these are hard, sad decisions replete with many layers of loss.

You might put these sentiments into your own words: "I know it's very hard to even think about moving to a nursing home. But we can't supply all the care you need anymore. I worry about you constantly, especially when I'm not available. I've tried really hard, but I can't keep everything going. We need to think about finding a place where you'll be safe and well cared-for all the time."

If appropriate, you might mention concerns about your own health and well-being or worries about what might happen if you become ill or unable to offer enough care. A single conversation is rarely sufficient. Let the person you are caring for grieve the loss. Moving toward a solution is likely to take time and several discussions.

Things to contemplate

- Developing a plan
- Legal planning
- Financial planning
- Navigating the Medicaid and Medicare Maze
- Medical planning
- Home to hospital to rehab: Navigating health transitions
- Meeting needs
- Handling daily tasks and common problems
- Care for the caregiver
- When your loved one can't stay at home



Brighton couple gives \$1M to hospital

(Democrat & Chronicle - February 21, 2008) — A Brighton couple's \$1 million donation has helped Rochester General Hospital purchase a new 64-slice CT scanner that can manufacture dozens of high-definition images within minutes.

Recently, hospital officials named a CT Diagnostic Suite in honor of the donors, Jack A. and Norma Erdle. The scanner, manufactured by General Electric, can scan the entire body in about 10 minutes and provide comprehensive views of the heart and coronary arteries in five seconds. The machine is also equipped with software to reduce radiation exposure to patients.

Jack Erdle, a businessman, is a member of the Rochester General Hospital Foundation board of directors.

Health Information Available

Do you need information on a medical condition, disease, or treatment? **The Stabins Wellness Information Center at Rochester General Hospital** offers confidential answers to your medical questions from their **medical library service**. Our medical librarians provide reliable medical information in understandable language. Call 922-9355 to request information on your health topic. We will mail or e-mail the information to you, free of charge. The library's website is: www.viahealth.org/library/wellnessinfocenter

Depression – Con't. from Page 5

This "tells us we're probably missing some people who need to be treated or at least further evaluated (for depression)," she said.

Symptoms of depression include persistent sadness, loss of interest in normal activities, feelings of guilt or hopelessness, tiredness, restlessness and changes in appetite. Some of these symptoms may "be discounted by many with heart disease or viewed as a natural part of dealing with aging or heart-health problems," the report indicates.

According to Hayes, "It may be natural to grieve and be sad if you have a new diagnosis of heart disease." If those feelings persist or interfere with normal daily functioning, however, heart patients should "specifically mention that and be evaluated (for depression)," she advised.

A healthier, fitter YOU — Simple strength training can benefit you.

If you've never lifted weights in your life — and many people haven't — why should you start now? The answer is simple: Muscle tissue, bone density, and strength all dwindle over the years. So, too, does muscle power. These changes open the door to accidents and injuries that can compromise your ability to lead an independent, active life. Strength training is the most effective way to slow and possibly reverse much of this decline.

Having smaller, weaker muscles doesn't just change the way people look or move. Muscle loss affects the body in many ways. Strong muscles pluck oxygen and nutrients from the blood much more efficiently than weak ones. That means any activity requires less cardiac work and puts less strain on your heart. Strong muscles are better at sopping up sugar in the blood and helping the body stay sensitive to insulin (which helps cells remove sugar from the blood). In these ways, strong muscles can help keep blood sugar levels in check, which in turn helps prevent or control type 2 diabetes and is good for the heart. Strong muscles also enhance weight control.

On the other hand, weak muscles hasten the loss of independence as everyday activities — such as walking, cleaning, shopping, and even dressing — become more difficult. They also make it harder to balance your body properly when moving or even standing still, or to catch yourself if you trip. The loss of

power compounds this. Perhaps it's not so surprising that, by age 65, one in three people reports falls. Because bones also weaken over time, one out of every 20 of these falls ends in fracture, usually of the hip, wrist, or leg. The good news is that the risk of these problems can be reduced by an exercise and fitness routine that includes strength training. Talk to your doctor for a referral to a gym or therapy routine in addition to aerobic exercise.

Toaster Waffle Sandwich



Ingredients

1. 2 frozen waffles
2. 2 frozen BOCA Meatless Breakfast Links
3. 1 KRAFT 2% Milk Sharp Cheddar Singles
4. 1/4 medium apple, thinly sliced
5. 1/2 teaspoon cinnamon sugar
6. 1 cup 1% milk

Directions

Toast waffles as directed on package. Meanwhile, microwave breakfast links as directed on package.

Place 2% Milk Singles on 1 of the waffles. Cover with apple, cinnamon sugar and breakfast links; top with remaining waffle. Cut in half. Serve with milk.

Intro Bio Donald Londorf, MD, L.Ac.

Dr. Londorf is a physician, acupuncturist, herbologist, qigong master and practitioner of Peruvian shamanic healing. He graduated from McGill University medical school and completed a residency in emergency medicine at Emory and McGill Universities. He is also a graduate of Nanjing University of Traditional Chinese Medicine in China.

Dr. Londorf worked as an emergency physician until 1996 when he shifted his practice to full time Chinese medicine. He has practiced meditation since the age of 12 and is a personal qigong student and senior instructor of Grand Master Shih of the Chinese Healing Arts Center. For the past three years he has trained with the Four Winds Society learning the native healing traditions of the Peruvian shamans. His private practice is located in Pittsford, NY.

Minn. Health System Purges Drug Trinkets

When a Duluth-based operator of hospitals and clinics purged the pens, notepads, coffee mugs and other promotional trinkets drug companies had given its doctors over the years, it took 20 shopping carts to haul the loot away.



Accodrnig to a rscheearch at an Elingsh uinervtisy, it deosn't mtttaer in waht oredr the ltteers in a wrod are, the only iprmoetnt tihng is taht the frist and lsat ltteer is at the rghit pelae.

The rset can be a toatl mses and you can sitll raed it wouthit a porbelm. Tihs is bcuseae we do not raed ervey lteter by it slef but the wrod as a wlohe.

WASHINGTON (AFP) - US researchers have identified all the 1,166 proteins in human saliva in a breakthrough which could become a new tool for diagnosing killer diseases like cancer, a study showed Tuesday.

Patients may soon be able to spit in a cup for tests for such illnesses as cancer, heart disease and diabetes thanks to the work of three teams of researchers.

"Replacing blood draws with saliva tests promises to make disease diagnosis, as well as the tracking of treatment efficacy, less invasive and costly," said the study published in the Journal of Proteome Research.

"Our work, and the work of our partners, has shown that salivary proteins may represent new tools for tracking disease throughout the body, tools that are potentially easier to monitor in saliva than in blood," added author James Melvin, director of the Center for Oral Biology at the University of Rochester Medical Center.

Saliva, collected from 23 adults of several races and both sexes, was subjected to mass spectrometry, which identifies proteins by measuring their mass and charge.

The studies showed that about a third of the proteins in saliva were the same as in blood.

A number of saliva proteins also matched proteins which played a role in diseases such as Alzheimer's, Huntington's and Parkinson's as well as breast and pancreatic cancer and diabetes.

"We believe these projects will dramatically accelerate diagnosis and improve prognosis by treating diseases at the earliest stages," said Mireya Gonzalez Begne, research assistant professor of dentistry at the center.

"Researchers have already shown that saliva proteins can be used to detect oral cancer and HIV infection.

"We think this list will soon expand to include leading causes of death like cancer and heart disease,

which, if caught early, are much more likely to be successfully treated."



In Memoriam

I am sad to say that one of our long time chapter members recently passed away. We offer our condolences to his wife Barb and his family. Charlie was well known for his money raising abilities for the chapter as well as his Medicine Express Co.

**Bell, Charles P.
(A friend of Bill W.)**

Webster: March 18, 2008, age 71. Predeceased by his son, Charles. He is survived by his wife, Barbara; special friend, Patrice Fouque and her daughters, Gwendolyn and Pamela; sons, Frank (Claudia), Edwin (Kathy), Scott (Lisa) and Phillip Bell; daughters, Dawn Marie Bell and Cathy Fraser; brothers, Tom, John (Elaine), Ronnie (Patty), Edwin (Nancy), Michael and Robert Bell; his sisters, Dolores, Diane, Carol Ann, Elizabeth (Roy), Laura (Kim) and Marcia; grandchildren, Brian (Gyllian), Stephanie, April, Ashley, Jake, Samantha, Andrew, Charles J., Aubrie, Sondra, Jessica, Sara and Rebecca; great-grandson, Ethan; and many nieces and nephews. His family will receive friends on Friday 2-4 and 6-8 PM at the Michael R. Yackiw Funeral Home, 2793 Culver Rd., Irondequoit. Funeral Services will be held on Saturday at White Haven Memorial Park at 9 AM in the All Seasons Chapel. In lieu of flowers contributions may be directed to Yellowhouse, P.O. Box 314, Penfield, NY 14526 or Humane Society at Lollypop Farm, 99 Victor Rd., P.O. Box 299, Fairport, NY 14450 in his memory. Published in the Rochester Democrat And Chronicle on 3/20/2008.

Meetings - Canandaigua Satellite Chapter

**Thompson Memorial Hospital
RG&E Room - Continuing Care Ctr.**

Thursday, May 8

**7 PM – Michael LaBlanc, Physical Therapist, ATC
Topic: Exercises: Approaches in the Cardiac
Population.**

Thursday, June 12

7 PM – Mick Krasner, MD, FACP

The Mended Hearts, Inc. / Greater Rochester, NY Chapter 50

Founded 1951 * Incorporated 1955

MEMBERSHIP

APPLICATION

RENEWAL

Mr./Mrs./Ms. _____ Date ___ / ___ / ___

Address _____ Phone _____ Birthday ___ / ___ / ___

City _____ State _____ Zip _____

Name of Spouse _____ Birthday ___ / ___ / ___ Anniversary ___ / ___ / ___

Type of Procedure _____

Date of Procedure ___ / ___ / ___ Hospital _____ Surgeon _____

Membership Type (circle one)

Application Dues

Annual Renewal

Individual	\$22 (National \$17 + Chapter \$5)	\$17
Family	\$31 (National \$24 + Chapter \$7)	\$24
National Life (Individual)	\$155 (National \$150 + Chapter \$5)	\$5 (Chapter)
National Life (Family)	\$217 (National \$210 + Chapter \$7)	\$7 (Chapter)

Please mail this application and your check made out to Mended Hearts, Inc., Chapter 50, to:

**William R. Tuttle, Treasurer
922 Copper Kettle Rd.
Webster, NY 14580**

You must be a member of the National Organization to be a Chapter Member

I/We (spouses are always welcome) would like to be part of Mended Hearts effort as checked off below:

- Telephone Hospitality Visiting Communications/Publicity
- Newsletter Program Membership Historian
- Fifty-fifty American Heart Association Sunshine

The shift is sure to leave some policyholders disgruntled, of course. Offering international coverage

might make it easier for employers to limit benefits at home, for instance, by raising the deductibles on U.S.-based procedures. It's also extremely difficult for patients to sue for malpractice in most Asian countries. But over time, for policyholders and payers alike, the price may be hard to resist. For example, a heart bypass operation in the United States costs about \$130,000 but only about \$18,500 in Singapore.

The March 2008 issue of Business Week Magazine says that more U.S. health insurers are slashing costs by sending policyholders overseas for pricey procedures. Blue Cross and other insurers would like to see more policyholders traveling abroad for medical care. As health-care costs continue to rise in the U.S., traveling for medical care is going to be part of the solution.

Just like manufacturing facilities and call centers, health care is moving offshore. Getting covered employees to leave the U.S. may not be that hard. An insurance company could waive all deductibles and co-pays, offer to cover travel costs for the patient and family members, even throw in a cash incentive, and still save tens of thousands of dollars. And the quality of care? Foreign hospitals in such arrangements are typically approved by Joint Commission International, part of the same nonprofit organization that accredits American hospitals.

