Inspiring Story of Hope

The next Stroke Club Meeting is Tuesday July 18th, at 7:00p.m. at New Hope United Methodist Church at 4525 Beaver Ave., Des Moines. The church is accessible and air-conditioned.

This month our presentation is titled: Inspiring Story of Hope. Nick Vujicic has an inspiring story to share with us in our July meeting.

He has faced difficulties being born without arms and legs. He has faced obstacles physically, emotionally and spiritually as he forged a path through life. He found many ways to creatively deal with his disability which he will share and along the way he discovered the profound purposes God had in store for him all along. His video will share his compelling story as we meet in the sanctuary this month.

Please plan to join us for his inspirational story and motivational evening.

As a reminder if you have something special you would like to see in the newsletter please don’t hesitate to let me know. My phone # is (515) 241-8139. My email address is sue.toaleknapp@unitypoint.org

Thanks, your Newsletter Editor, Sue Toale Knapp.

Five Riddles to Test your Brain

IT SHARPENS THOSE GENES
IN YOUR BRAIN AND STALLS
ALZHEIMER’S FOR YEARS ....

1. A murderer is condemned to death. He has to choose between three rooms. The first is full of raging fires, the second is full of assassins with loaded guns, and the third is full of lions that haven’t eaten in 3 years. Which room is safest for him?

2. A woman shoots her husband. Then she holds him under water for over 5 minutes. Finally, she hangs him. But 5 minutes later they both go out together and enjoy a wonderful dinner together. How can this be?

3. What is black when you buy it, red when you use it, and grey when you throw it away?

4. Can you name three consecutive days without using the words Wednesday, Friday, or Sunday?

5. This is an unusual paragraph. I’m curious as to just how quickly you can find out what is so unusual about it. It looks so ordinary and plain that you would think nothing was wrong with it. In fact, nothing is wrong with it! It is highly unusual though. Study it and think about it, but you still may not find anything odd but if you work at it a bit, you might find out. Try to do so without any coaching!

Answers located on page 7 of the newsletter!!
Understanding How Post-Stroke Fatigue Affects Your Loved One

Just because someone is home from the hospital does not mean that all is normal and they are running on all cylinders. Their brains have been injured, and it takes time and the compassion and patience of friends for them to recover.

It is important to let survivors respond to this situation in their own way, without trying to meet the expectations of others who have not experienced a brain injury.

What to Understand About Post-Stroke Fatigue

• It is extremely common. As many as 70 percent of stroke survivors experience fatigue.
• Post-stroke fatigue can happen whether there has been any exertion or not.
• Post-stroke fatigue doesn’t always get better after a survivor takes a break, or gets rest.
• Sometimes there may be outwardly noticeable signs of fatigue, other times there may not.
• Some fatigue may be a side effect of medication.
• Post-stroke fatigue is unpredictable. Some survivors experience good days and bad days. For some it is all day, every day.
• Some survivors may be doing well then suddenly “hit a wall.”
• For some, “hit the wall” episodes may decrease over time, but they still may generally feel that they don’t have the energy to do what they want and need to do.
• As a survivor tires:
  • They may become clumsy
  • Their speech may be affected
  • Their ability to understand, comprehend or recall may be compromised
  • They may get irritable they may experience increased emotional lability (crying or laughing with no apparent trigger)
• People who have made otherwise remarkable recoveries still may not be able to return to work because of post-stroke fatigue.

What Can Help

• If energy is better at a certain time of day, take advantage and plan activity around that.
• For mental fatigue, sitting quietly with low sensory stimulation (keep noise, light and activity in the area to a minimum) may be better than a nap.
• Schedule regular rest breaks or even a nap if needed.
• Factor in fatigue before any event or activity as well as recuperation time after an event or activity.
• Survivors with fatigue should be conscientious about maintaining energy reserves, rather than pushing themselves into exhaustion.

Family members and friends can help by coming from a position of compassion and understanding rather than the expectation that everything should be better. Others can’t always see it, but post-stroke fatigue can be quite limiting.

Reference: Stroke Connection Magazine Spring 2017

NEED A LIFT

Need a ride to Stroke Club Meeting?

Call Amy Johnson at 263-5166 to arrange a ride.

Please call her rather than the person who may be your “usual driver”. This will allow Amy to know how to plan for rides and drivers.

If you are afraid you will forget to call, do it now!! Please call no later than 9:00am the day before the meeting and preferably the Friday before the Tuesday meeting. This will allow Amy enough time to schedule a ride for you.

You will receive a call before the meeting regarding who will pick you up the night of meeting. We have several volunteers who are willing to provide you a ride to Stroke Club.
Caregiver CORNER
Forty-Eight Mental Breaks for Caregivers

Caregiving takes a lot of time. Even if you had spare time to daydream in the first place, it’s probably gone now. However you must give yourself a mental break once in a while.

The following list is intended to make you think back to a simpler time in your past, and possibly one in your future. Use them sparingly (one at a time), or be a glutton (overdose on all of them at the same time).

The goal here is to make you feel better. If you really want to make yourself feel better, use this as a “to do” list. Please pass the list on to others who may need it.

• Falling in love
• Laughing so hard your face hurts
• A hot shower
• No lines at the Super Wal-Mart
• A special glance
• Getting mail—other than bills or junk mail
• Taking a drive on a pretty road
• Hearing your favorite song on the radio
• Lying in bed listening to the rain outside
• Hot towels out of the dryer
• Finding the sweater you want is on sale for half price
• Chocolate milkshake. (or vanilla!)
• A long distance phone call
• A bubble bath
• Giggling
• A good conversation
• The beach
• Finding a $20 bill in your coat from last winter
• Laughing at yourself
• Midnight phone calls that last for hours
• Running through sprinklers
• Laughing for absolutely no reason at all
• Having someone tell you that you’re beautiful

• Laughing at an inside joke
• Friends
• Accidentally overhearing someone say something nice about you
• Waking up and realizing you still have a few hours left to sleep
• Your first kiss
• Making new friends or spending time with old ones
• Playing with a new puppy
• Having someone play with your hair
• Sweet dreams
• Hot chocolate
• Road trips with friends
• Swinging on swings
• Wrapping presents under the Christmas tree while eating cookies and drinking eggnog
• Song lyrics printed inside your new CD so you can sing along without feeling stupid
• Going to a really good concert
• Winning a really competitive game
• Making chocolate chip cookies
• Spending time with close friends
• Seeing smiles and hearing laughter from those friends...
• Holding hands with someone you care about
• Running into an old friend and realizing that some things (good or bad) never change
• Riding the best roller coasters over and over
• Watching the expression on someone’s face as they open a much desired present from you.
• Watching the sunrise
• Getting out of bed every morning and thanking God for another beautiful day....

by Editorial Staff at www.caregiver.com
Medication Management

For many reasons, patients don’t always take their drugs as prescribed or fail to take them at all. We identify the reasons, as well as ways to work around them.

By Kritz, Fran

Medication Reminders Set an alarm on a clock or your watch or put your pill container near your toothbrush or the coffee maker. Pick up a plastic pill box from your local pharmacy and fill it at the start of each week with the drugs you need to take and keep it in a cool, dry place. These are simple ways to remember to take your daily medication.

If these reminders aren’t enough and you’re still forgetting to take your pills, technology might be able to help. But talk to your doctor, pharmacist, or support group, or call the help line of a patient organization before you buy any device or smartphone app. The Parkinson’s Disease Foundation, for example, has counselors who can walk you through different devices. In the meantime, keep these points and possibilities in mind.

Mind the Costs Many medication reminder apps are available for little or no cost. Insurance may not pay for more expensive options, such as devices that dispense each drug on time and even connect with the pharmacy for refills, but you may be eligible for reimbursement if you have a pre-tax flexible spending account through your employer.

Line Up Support Many reminder devices require some programming and an internet connection. Call the toll-free number of the manufacturer to ask what is required to operate the device, so you don’t miss a dose or two setting it up.

Convenience Packs In the last year or so, CVS and other pharmacies have launched compliance packaging. Usually free of charge, the pharmacy will package your medication as daily doses in individual envelopes or in blister packs with labels for the day and time you need to break the plastic and take the pill. An even simpler option is PillPack, an online pharmacy that packages daily meds in individual envelopes and sends them every two weeks by mail. If your insurance covers the medication they stock, you’ll pay the standard copay but no extra charge for the packaging.

Caps that Help Several companies make specialized drug vial caps that can help you remember if you took your medicine. The simplest ones show how much time has elapsed since you last opened the bottle. CVS and Rite Aid sell them for about $10 for a pack of four. Remember to take the cap off the vial and put it on the next refill before throwing away the empty bottle.

Apps for Smartphones A group of researchers compiled a list of the 10 best medication reminder apps based on how easy they were to use. The list was first published in 2013 and updated in 2016. Top-ranked apps include Medisafe, a free app that buzzes when it’s time to take a dose and alerts a doctor and, if requested by the patient, a “medifriend,” when a dose was missed. Users must input information about each prescription. For information about other apps, go to http://medappfinder.com.

Smartwatches A growing number of smartwatches offer medication reminder apps you can download and sync with your phone so no matter which device you’re using, you’ll still get an alert.

Home Robots Several companies have introduced home robots designed to dispense pills. Some cost as much as $500. That may be worth the price for someone with epilepsy, for example, where precise medication management is crucial. Once programmed, the devices can dispense the right dose at the right time, order refills, and connect with the doctor’s electronic health record system to document your medication history.

Reference: www.neurologynow.com

The article above is a portion of an article from the magazine Neurology Now February/March 2017 Edition
You can find the article in its entirety at www.neurology.com
Stroke rates continue to decline in people 55 and older, while more than doubling in those between 35 and 39, according to new research in Journal of the American Heart Association, the Open Access Journal of the American Heart Association/ American Stroke Association.

“People, especially those under 50, need to realize that stroke does not just occur in the old, and the outcome can be much more debilitating than a heart attack — leaving you living for another 30 to 50 years with a physical disability,” said Joel N. Swerdel, M.S., M.P.H., lead study author and a Ph.D. candidate at the Rutgers University School of Public Health in New Brunswick, New Jersey.

For many decades stroke rates declined, an improvement the Centers for Disease Control and Prevention attributed to reductions in smoking, high blood pressure and high cholesterol. However, in recent years there have been worrisome reports that stroke rates are rising in younger people. The current study examined that question using a unique database that includes almost all hospitalizations for heart disease and stroke in New Jersey.

“The beauty of this resource is that it includes all patients over 18 years old, rather than other databases that are based on a sample of patients or require voluntary participation from hospitals,” said John B. Kostis, M.D., co-author of the study and the John G. Detwiler professor of cardiology, medicine and pharmacology in the Cardiovascular Institute at Rutgers Robert Wood Johnson Medical School in New Brunswick.

Comparing 1995-1999 and 2010-2014, researchers found the rate of strokes:

- More than doubled (a 2.47-fold increase) in people 35 to 39 years old;
- Doubled in people aged 40 to 44;
- Increased to a lesser extent in people 45 to 54 years old;
- Declined in older age groups; and
- Was in sharp contrast to heart attack rates, which decreased in all age groups.

On an age-by-age basis, researchers found that people born in the “golden generation” between 1945 and 1954 had lower rates of stroke than those born 20 years before or after. More research is needed to explain why Baby Boomers are less likely to have strokes. This analysis did not have access to data on individual risk factors such as smoking, cholesterol levels or medication use to help explain differences in stroke rates between groups born at different times. However, the researchers speculated on several possible causes.

“In the golden generation, obesity was less common than in people born earlier or later. Diabetes has been on a continuous upswing over the last 40 years and is particularly seen in the youngest generations. Smoking had decreased rapidly by the golden generation but has been increasing lately. Younger generations are also less likely to take blood pressure or lipid-lowering medication as prescribed,” said Swerdel, who is also manager of epidemiology analytics at Janssen Pharmaceuticals in Titusville, New Jersey.

Differences in risk depending on birth groups also raise questions of how early life influences risk.

“For example, while someone born in 1945 might have eaten oatmeal or eggs for breakfast as a child, younger generations are more likely to eat sugared cereals. No matter what the cause, being aware of the risk in younger generations is important to encourage people to take their prescribed medications and strongly consider lifestyle changes, including exercise and a better diet,” Swerdel said.

Source: American Heart Association News on www.strokeassociation.org
FOOD FIRST
A healthy diet beats supplements – in most cases

By Marianne Wait

Good-for-you foods provide a vast spectrum of nutrients important to battling inflammation, strengthening bones, fighting disease and generally helping you feel your best. So why not load up on vitamins and mineral supplements to make sure you’re getting enough of these nutrients? Food trumps supplements for several important reasons.

• If you don’t eat a well-balanced diet, you’re missing out on countless nutrients you’d never get in a pill, or even a handful of different pills. For example, “fatty fish also gives you other types of fat, protein, iron, zinc – you’re getting all those other lovely nutrients that are also important from an inflammation perspective and from a whole-health perspective,” explains registered dietician Heidi Turner, medical nutrition therapist at Seattle Arthritis Clinic.

• Nutrients are most beneficial when they work in concert with other nutrients. For instance, vitamin D helps your body absorb calcium, and vitamin C enhances the absorption of iron.

• The body absorbs nutrients from food much better than from supplements.

• Plant-based food supply an array of phytonutrients not found in supplements that feed good bacteria in our gut.

THREE EXCEPTIONS

However, there are three nutrients that many people, especially with arthritis, simply can’t or don’t get enough of through food alone. Ask your doctor if you should consider these supplements:

Omega-3 fatty acids. “Most studies that have shown positive benefits involved larger amounts that we get in the diet,” says Turner. But don’t quit eating fish. Health experts recommend two servings per week of fatty fish, such as salmon, tuna or sardines. Turner recommends as much as 3,000 mg of fish oil per day to many of her patients, but it’s not for everybody. Ask your doctor is you might benefit from omega-3 supplements and at what dosage.

Calcium. If you avoid dairy, which seems to exacerbate arthritis symptoms for some people, getting sufficient calcium, which is important for bones and muscles, can be challenging. Other good food sources are green leafy vegetables and fortified beverages, such as almond milk. Turner’s clinic recommends 800 to 1,200 milligrams of calcium a day for supplements and food.

Vitamin D. Critical for bone and immune health, vitamin D is scant in food, and Turner says most of her patients are deficient. “If you’re going to supplement with anything, that’s the one to supplement with,” she says. Sunlight is the vest source of vitamin D; food sources include Portobello mushrooms and fatty fish. Turner advises asking your doctor to test to see if you need a supplement. The recommended daily dose is 600 IU, but different people need varying amounts.

Bottom line: “We want to try to make the diet as varied and nutrient-dense as possible so that we’re getting all of our nutrients from a variety of food sources,” says Turner. Supplements may have a role, but think “food first.”

Reference: Arthritis Today Magazine
Tools 4 Life “3 Day rule”  By Dr. Jim Coyle

While having lunch with a dear friend, he inspired me with his handling of tough events called the “3 day Rule”.

**DAY ONE:** This is the day to catch your breath after getting the wind knocked out of you. Ask for God’s guidance as you begin to sort it out. It could come from the Bible, signs, other people or a combination of things to help comfort you.

**DAY TWO:** This is the day to look at how and why the situation happened. If it was something that could have been prevented, what can I learn from it and how can I make things better. If it was outside my control how can I make me a better person.

**DAY THREE:** This is the day to move on and put what happened behind you so it doesn’t trip you for what lies ahead. Put it on the shelf and keep it there to remind of where you came from.

*Thank you Ralph for your words of wisdom.*

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**Words and Thoughts to Live By**

**I Believe...** That maturity has more to do with what types of experiences you’ve had and what you’ve learned from them and less to do with how many birthdays you’ve celebrated.

**I Believe...** That you should always leave loved ones with Loving words. It may be the last time you see them.

**I Believe...** That even when you think you have no more to give, When a friend cries out to you, you will find the strength to help.

**I Believe....** That you can keep going long after you think you can’t.

**Lastly....** The happiest of people don’t necessarily have the best of everything. They just make the most of everything they have.

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**Aphasia Group**

The Aphasia group will now meet the 2nd and 4th Wednesdays of each month from 1:00-2:00p.m.

The group meets at Mercy Riverside, which is located to 501 SW 7th St. Suite Q, Des Moines, IA 50309. Sue Fagg, Speech Language Pathologist for Mercy Medical Center is the group leader. Interested persons can call Sue at 515-643-9818 for more information or directions to the facility.

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**ONLINE Support Group**

For those of you looking for an online support group here is a website for you: [http://www.strokenetwork.org/](http://www.strokenetwork.org/).

It is a very active group. You have to join like a listserv and you post a question or issue and the group will email you back suggestions. Everyone in the group has survived a stroke and has great ideas they are willing to share.

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**Five Riddles to Test your Brain**

**THE ANSWERS TO ALL FIVE THE RIDDLES ARE BELOW:**

1. The third room. Lions that haven’t eaten in three years are dead. That one was easy, right?

2. The woman was a photographer. She shot a picture of her husband, developed it, and hung it up to dry (shot; held under water; and hung).

3. Charcoal, as it is used in barbecuing.

4. Sure you can name three consecutive days, yesterday, today, and tomorrow!

5. The letter “e” which is the most common letter used in the English language, does not appear even once in the paragraph.

I’ll be getting Alzheimer’s any time now. How did you do?
A BIT OF HUMOR

The Wednesday-night church service coincided with the last day of hunting season. Our pastor asked who had bagged a deer. No one raised a hand.

Puzzled, the pastor said, “I don’t get it. Last Sunday many of you said you were missing because of hunting season. I had the whole congregation pray for your deer.”

One hunter groaned, “Well, it worked. They’re all safe.”

A Sunday school teacher was teaching her class about the difference between right and wrong.

“All right children, let’s take another example,” she said. “If I were to get into a man’s pocket and take his billfold with all his money, what would I be?”

Little Johnny raises his hand, and with a confident smile, he blurts out, “You’d be his wife!”