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Caregiving



Ryan Collier

A monument at West Philadelphia's Woodlands Cemetery stands in front of a Ginkgo tree. The species was first introduced to the U.S. by William Hamilton when he brought them to the site.

Philadelphia's historic cemeteries offer many activities this autumn

By Constance Garcia-Barrio

If you're looking for a dose of history and autumn beauty, try dropping by an area cemetery. Philadelphia's cemeteries feature architectural marvels, lush gardens and often-forgotten history. In October, some cemeteries offer quirky tours, sell organic produce, share stories about personalities of the past, and host Halloween parties ablaze in autumn's mantle of crimson and gold.

Historic Fair Hill

Historic Fair Hill Cemetery and Garden (HFH), 2901 Germantown Ave., sits on 4.5 acres that William Penn gave to his friend and fellow seeker of religious freedom George Fox, founder of Quakerism. Some of this burial ground's permanent residents live on, not

only in legend, but also in a three-story mural at 2902 Germantown Ave. Rows of collards, kale, beans and tomatoes grow near the graves of Quaker abolitionist and grandmother of the women's movement Lucretia Mott and black businessman Robert Purvis, whose South Philadelphia home became a safe house for fugitives from slavery. Mobs threatened to kill these two staunch abolitionists because of their anti-slavery activism.

HFH provides a peaceful space where children in this North Philadelphia neighborhood can play, learn about history, and enjoy the organic fruits and vegetables grown there. "We host family-friendly parties, and we have workshops on how to grow and cook vegetables," said HFH director Jean Warrington, 67.

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Health Care

Making your medical visits more meaningful

By Sally Friedman

You write shopping lists, "To Do" lists and holiday lists. You make time to get the car inspected and pay your taxes. But do you approach your medical visits with a plan, a list of priorities and willingness to do some homework before you even get to that office?

In too many cases, such preparation is overlooked in a mad scramble to get to the appointment.

Every medical visit is worth not just your time, but also your careful preparation to make sure that it's a meaningful experience. Read on to find out what you can do to maximize what may be the most important calendar date of all.

Be prepared

Let's begin at the beginning. Treat a doctor's appointment as if your life depended on it – because it might. Preparation is key for a successful visit.

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Health Brief



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Older Americans face challenges in HIV/AIDS diagnosis, treatment

Older Americans face unique challenges when it comes to HIV prevention and treatment. While the likelihood of contracting HIV is about the same for all sexually active adults, older people are more likely to have late-stage HIV infection at the time of their diagnosis, according to the Centers for Disease Control and Prevention (CDC).

Early detection and diagnosis of HIV is crucial to successful treatment. A late diagnosis increases the potential for immune system damage, putting patients at increased risk for other illnesses and even death.

The CDC points to a number of reasons why older Americans are diagnosed with HIV at later stages than younger people. For one thing, health care providers may not test older patients for HIV infection at the same rate as younger patients. In addition, older people may not consider themselves at risk for infection or may mistake early HIV symptoms, such as fatigue or mental confusion, as a normal part of the aging process.

Older patients may also be reluctant to speak to health care providers about their sex life and drug use. It is important for older adults who may be at risk for contracting HIV to talk to their health care providers openly about their sexual habits. In turn, health care providers should ask questions about their patients' habits and clearly communicate the

risk factors and warning signs of HIV, according to the CDC.

Living with HIV

Older adults who are infected with HIV face the additional challenge of preventing other diseases. Both age and HIV increase the risk for cardiovascular disease, bone loss and certain cancers. Older HIV patients must remain on the lookout for early warning signs of these and other illnesses, as their immune systems may not be strong enough to fight them off.

It's important for health care providers and older patients to communicate openly and consistently to ensure there are no negative interactions between HIV medications and those used to treat other chronic health conditions, including high blood pressure, high cholesterol and diabetes.

Resources are available online for seniors to learn more about HIV/AIDS. Action Wellness is a nonprofit organization serving the Greater Philadelphia area that offers a welcoming atmosphere to get information on many chronic illnesses, including HIV/AIDS. Seniors can learn more about HIV/AIDS risk factors, access resources for living with HIV/AIDS and find a test site in their community by visiting actionwellness.org or calling 215-981-0088

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Health Care

Local woman shares journey with ovarian cancer

By Barbara Sherf

Betsy Wallace's eight-year journey with ovarian cancer was guided by her belief in the family motto: "Face the wind." "The saying came from my mother's side of the family, French people who sailed to Canada in the 1600s and then found their way down to New England," said Wallace, 66, of Wyndmoor. "It is all about facing your challenges, whether it's the struggle to find and farm arable land, starvation, giving birth to a child in a cabin, or being newly diagnosed with cancer."

Wallace, who was diagnosed with ovarian cancer in July 2010, is well aware of the disease's staggering statistics. Approximately 1.3 percent of all women will be diagnosed with ovarian cancer, according to the Ovarian

Cancer Research Fund Alliance. Ovarian cancer is the most lethal of the gynecologic cancers and is the fifth-leading cause of cancer-related death among American women. This year alone, 22,000 women will be diagnosed with the disease and 15,500 will die from it.

Ovarian cancer is often difficult to diagnose because its symptoms may be subtle and are easily confused with those of other diseases, and because there is no single, reliable, easy-to-administer screening tool. (For more information on symptoms and risk factors, see the sidebar on page 5.)

Mother, daughter

In the late spring of 2010, Wallace's mother had fallen and wound up in the emergency room with a fractured pelvis. During her brief

hospitalization, a community oncologist visited the 87-year-old woman, who had a history of colon cancer and ocular melanoma, and told her that the CT scans showed that her cancer had spread to her liver and spine. After consulting with an oncologist, Wallace's mother decided not to undergo chemotherapy.

While Wallace tried to find a good nursing home nearby where her mother could get rehab for her fractured pelvis and die in comfort in hospice, she started to experience pain in her abdomen and back, symptoms that can be associated with ovarian cancer. She treated the pain with ibuprofen and didn't see a doctor until four weeks later, when

the pain got much worse. Her gynecologist immediately ordered a transvaginal ultrasound test. Two days later, while at work as an attorney for the Third Circuit Court of Appeals in Philadelphia, Wallace received "the call" from her gynecologist.

"I knew it wasn't good that she was calling me," Wallace said. "I felt like a deer caught in the headlights. I was pretty much an emotional zombie, unable to feel or process what I was hearing." Wallace wanted to keep the news quiet and process it before telling the rest of her family. She called her husband, left work, and, once she was home, sought out her next-door neighbor, Ella, who was battling ovarian cancer herself. Ella advised Wallace to find a surgeon pronto and to get a CA125 blood test to confirm with certainty whether she had ovarian cancer.

Wallace did, and she did. "The stats for me were grim," Wallace said. "My mother was edging her way toward becoming a cancer statistic, and I didn't want to join her."

Plan of action

About a week after Wallace got the call from her doctor, her two older sisters and younger brother and his wife (all of whom live out West) gathered at the home Wallace shares with her husband, Ken Weiner, to craft a care plan for Wallace's mother to keep her comfortable.

Behind the scenes, Wallace and her husband visited two gynecologic oncologists,

one of whom was Ella's doctor, to learn about treatment options. They tried to keep the situation quiet until they had a plan of action – debulking surgery (a radical hysterectomy) on July 14, 2010, and then radiation and chemotherapy.

With her mother settled in a nursing home and on hospice care, Wallace shared the news with the rest of her family before they disbursed. She didn't tell her mother until a week before her surgery.

Always the competent researcher, Wallace had done her homework before she had her surgery and learned that clear cell ovarian cancer was one of the worst types of the disease because it is aggressive and does not respond well to chemotherapy. "I did not want ovarian clear cell carcinoma," she said. "Then I read the pathology report two weeks after my debulking surgery, and I saw the words 'Clear Cell.' My heart plunged into an abyss. I was sure that I was going to die within two years. I was full of rage and fear."

Her mother had months, not years, to live. "I was really angry and afraid that she was going to take me with her," Wallace said.

Then, at her first post-op visit with her gynecologic oncologist, Wallace found out that her cancer had metastasized to her lungs. The doctor's original treatment plan – abdominal radiation preceded and followed by chemo – was cast aside, and Wallace started on chemotherapy immediately.



Barbara Sherf

Betsy Wallace, 66, an eight-year ovarian cancer survivor, stands on the back deck at her Wyndmoor home.

Cancer survivors teach medical students

In 2012, ovarian cancer survivor Betsy Wallace started volunteering for the Survivors Teaching Students (STS) program sponsored by the Ovarian Cancer Research Fund Alliance. The program targets third-year medical students with the goal of increasing the number of health care providers who recognize ovarian cancer symptoms and refer women suspected of the disease to gynecologic oncologists to diagnose and treat the illness in its earliest stages. The STS program is taking place in more than 90 U.S. medical schools and in the Virgin Islands, the United Kingdom, Canada and Australia.

Once every five to six weeks, Wallace and several other local ovarian cancer survivors share their stories with third-year medical students in a classroom setting at teaching hospitals in Philadelphia, followed by an active dialogue between the women and students. Topics include how to improve doctor-patient communication, the emotional impact of the disease on patients and their families, resources available for support, and how to tell a patient "bad news."

Local medical schools participating in STS are Drexel University, Jefferson University, the University of Pennsylvania, and the Philadelphia College of Osteopathic Medicine.

At the July 27 class at Thomas Jefferson University's Sidney Kimmel Medical College, Wallace asked the more than two dozen medical students attending to take a pre- and post-class evaluation to test their knowledge of ovarian cancer symptoms and risk factors, and she led the discussion among the panel of women who shared their experiences with the students. Afterward, she shared her experience of the class with Milestones.

"Every one of us told the students today that we ignored or tried to self-treat our symptoms because they were so vague," she said. "By the time we saw a doctor, some of us had been living with the symptoms for as much as nine months. The students heard that it sometimes takes a long time for women to walk into their office with these symptoms, and so, when they do make an appointment, the doctors should take it seriously and rule out the possibility of ovarian cancer."

"I think these students really heard us today, and my hope is that they will learn to empathize with their patients and listen for certain symptoms and catch this disease earlier," Wallace added. "There were a lot of good questions, and I do feel that we got through to the next generation of physicians, so for me, that is a success."

Ovarian cancer

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“At one point in a visit with my mother when I was still coughing, her hospice nurse pulled me aside and said, ‘That sounds like a cancer cough,’ and she was right,” Wallace said.

When Wallace visited her mother, she would get out of her bed and sit in the recliner, offering the bed to her. “To the end, she was always trying to be a mother,” she said. Wallace’s mother died on Oct. 31, 2010, three months after Wallace was diagnosed.

Back to living

Wallace met with several other women, including her friend and neighbor Ella, as an informal support group to discuss their fears, symptoms, and treatments and bear witness to each other’s stories. Four of the seven women in the group, including Ella, died between 2011 and 2012.

“I’m one of the lucky ones,” Wallace said. “I’ve not had one recurrence after chemo and I’m still here after eight years. You come to terms with having cancer, and your priorities change. Those deep conversations you have

had with loved ones make you stronger and at some point, you just get back to living.”

Wallace said through all of it, people have been sincere and helpful.

When she had used up all of her sick time at work, her co-workers – even some she did not know – donated their sick time to her. Wallace, still believing that she only had two years to live at best, was feeling like she wanted to concentrate on spending quality time with her husband and doing only those things that fundamentally mattered to her. So in July 2011, she and her husband left the 9-to-5 work world and didn’t look back. Since her retirement, Wallace has been an active volunteer in her community. She and her husband took trips to England for fun and out West to see her family and old friends. As she put it, “This is not the time to drink cheap wine.”

During her treatment at the University of Pennsylvania, Wallace participated in a clinical trial focusing on counseling for newly diagnosed ovarian cancer patients. “The one-on-one counseling was so helpful to me because it made me realize that I had to grieve my mother’s death before I could deal with

my own,” Wallace said. She also attended a free weekly mindfulness meditation class at the Wellness Center in Fairmount Park that gave her a way of staying centered and of accepting her diagnosis.

She also sought out a good nutritionist while she underwent chemotherapy. The nutritionist, who had worked with a lot of cancer patients, advised her to stick to an anti-inflammatory diet: little to no dairy, very little sugar, and only organic meat in small portions a few times a week. “I also started exercising and still maintain the diet and workout program to this day,” she said.

Wallace bristles at the term “cancer survivor,” saying, “I am not my cancer. I have cancer, but it’s not the sum total of who I am.” However, she admits that there is no other suitable descriptor. “I didn’t ask for cancer,” she said. “It came to me, and I did the chemo and even went a step beyond with maintenance chemo. Anyone would have done the same under the circumstances. But here’s the deal: You do try to put yourself and your life back together, but cancer is not something that disappears.”

Author, speaker and writer Barbara Sherf tells the stories of businesses and individuals.

Symptoms and risk factors

Ovarian cancer is often called “the silent killer” because the symptoms are vague and there is no screening test. According to the Ovarian Cancer Research Fund Alliance, symptoms and risk factors include the following:

Symptoms:

- Bloating
- Pelvic or abdominal pain
- Difficulty eating or feeling full quickly
- Urinary frequency or urgency

See your gynecologist, if you have these symptoms for more than two weeks.

Risk factors:

- The BRCA 1 or 2 genetic mutations
- A family history of breast, colon or ovarian cancer
- Being post-menopausal

Your risk may be reduced by having children or taking oral contraceptives.

For more information and resources, go to sandyovarian.org or www.ocrfa.org or contact the Sandy Rollman Ovarian Cancer Foundation at 610-446-2272.

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Health Care

Strokes: Act quickly to minimize your risk for death, long-term disability

By Alicia M. Colombo

Every 40 seconds, someone has a stroke. That adds up to nearly 800,000 strokes each year. According to the National Stroke Association, stroke is the leading cause of disability among older adults and the fifth leading cause of death in America. These statistics are certainly cause for concern, but not for panic. Up to 80 percent of strokes can be prevented, and the chance of long-term disability after a stroke may be greatly reduced by acting quickly at the onset of symptoms. Read on to learn more.

What is a stroke?

A stroke is often referred to as a "brain attack." In more specific terms, a stroke occurs when a blood vessel leading to or located within the brain is blocked or bursts. This causes injury and reduces or prevents blood flow to the brain. When the brain cannot get the oxygen it needs to function, brain cells

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begin to die. Brain cells deprived of oxygen can die within minutes, resulting in a loss of physical and mental functions, such as

speech, sight, sense of touch and thought processing.

There are two main types of stroke. An ischemic, or "clotting" stroke, occurs when there is a blockage in a blood vessel in the brain. "Most of the time, when we're talking about a stroke, it's ischemic," said Qingyang "Kristy" Yuan, M.D., assistant professor of clinical neurology at The Perelman School of Medicine, University of Pennsylvania. According to the American Stroke Association, 80 percent of strokes are ischemic.

The second form of stroke, hemorrhagic or "bleeding," occurs when a vessel in the brain ruptures and blood begins leaking from the vessel. "With a hemorrhagic stroke, there is higher mortality, meaning your chance of dying is greater," Yuan said. Hypertension, or high blood pressure, is the main cause of this type of stroke. Other causes include head trauma and a ruptured aneurysm, an excessive localized enlargement of an artery caused by a weakening of the artery wall.

What causes a stroke?

There are three main causes of strokes:

Plaque – A buildup of plaque in the large vessels in the brain, known as atherosclerosis, can lead to a clot. "This is the same process that causes a buildup of plaque in the heart vessels and can lead to a heart attack," Yuan said.

Cardiac disease – Cardiac disease weak-

ens your heart and puts you at a greater risk for stroke. "When your heart-pumping function is not great, you are more prone to forming clots in the heart that can travel to the brain," Yuan said. She added that a lot of seniors have atrial fibrillation, or "a-fib," a form of heart disease that is characterized by an irregular heart rhythm. "This condition makes the heart more prone to forming clots because an irregular heartbeat doesn't allow the blood to circulate as well," she said.

Small vessel disease, which includes conditions such as diabetes and hypertension, is a condition that causes narrowing of the small vessels that provide blood flow to the heart. This can in turn make the vessels in the brain weaker and more prone to injury.

Cancer – Cancers, mostly those involving solid tumors, can cause blood to be thicker than usual and more prone to forming clots.

"About a quarter of strokes are initially diagnosed as cryptogenic, meaning there is an unknown cause," Yuan said. "However, many of these patients later find out they have a cardiac condition or irregular heart rhythm."

Controlling risk

If you have a family history of cardiovascular disease, are 50-plus or are African-American, you have a greater risk of experiencing a stroke. "These are known as non-modifiable risk factors, since there is nothing you can do to change them," Yuan said. "However, there are many things you can do to reduce your risk." Risk factors that you can control through medication and lifestyle changes include being overweight; smoking; and having conditions such as diabetes, hypertension or high cholesterol.

In addition, the American Heart Association has established guidelines, called "My Life Check – Life's Simple 7," that can help you improve your cardiovascular health and reduce your risk for having a stroke. "These seven tips are easy to say, but hard to do," Yuan said. "However, they can be life-saving advice." The recommendations are:

- Manage blood pressure
- Control cholesterol
- Reduce blood sugar
- Get active

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Health Care

Programs empower seniors to take charge of their chronic health issues

By Marcia Z. Siegal



More than 250,000 Philadelphia seniors are living with chronic conditions, such as arthritis, diabetes, high blood pressure, asthma and heart disease. This fall, Philadelphia Corporation for Aging (PCA) will offer three new series of health management workshops for adults 60-plus at community sites throughout Philadelphia, such as senior centers, senior living facilities, houses of worship, libraries and other community settings where seniors gather. The evidence-based programs are proven to produce positive outcomes by helping seniors learn to manage their symptoms, maximize their independence and improve their quality of life. The free workshops each focus on a different aspect of self-managing a health condition – type 2 diabetes, pain or a variety of other chronic diseases. All of these series run for six weeks, with weekly 2 ½-hour sessions.

By participating in any of these programs, seniors can learn how to communicate effectively with their physicians and other health care professionals; manage medications; develop healthy, appropriate meal plans; and discover suitable exercise/physical activity routines to help improve their energy, strength and well-being. “We teach participants that they are partners with their doctors,” explains Diane Brown, PCA health promotion specialist, who coordinates the agency’s health workshops.

With the proper knowledge and tools, seniors can learn to take charge of their condition(s) and any associated symptoms, such as pain, depression and physical limitations. At the end of each workshop session, participants develop an action plan for the following week. While the emphasis varies from series to series, the workshops have a number of commonalities. All are highly interactive, focusing on building skills, sharing experiences, instilling confidence and providing support. They also are led by facilitators with at least one chronic condition. In many cases, facilitators have the same condition(s) as workshop participants.



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Strength-building exercises are among the strategies shared during PCA's health management workshops for seniors.

Mitigating chronic pain

Adrienne Clarke recently enrolled in the “Keep It Moving” pain management workshop to help manage the diabetic neuropathy, a condition of nerve damage caused by persistently high blood sugar, in her feet. “The program did not take away my pain, but it taught me how to better cope with it,” Clarke said. “I learned what can trigger pain, how to avoid those triggers, and easy exercises to help me stay active.”

Keep It Moving draws participants with arthritis, fibromyalgia, lower back and neck ailments, or other conditions that cause discomfort, stiffness and/or inflammation or nerve pain, like Clarke experiences. The program provides a toolkit to help empower older adults with alternatives to pain medications. That is especially relevant now, when opioid addiction is epidemic in the U.S and the prevalence of opioid use, misuse and abuse is rising steeply among older adults, according to registered nurse Danielle McKnight, PCA health promotion nurse supervisor. Non-medical strategies to deal with pain can include pacing yourself, resting and

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Health

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engaging in relaxation exercises. The program takes a holistic approach, addressing healthy eating, how to get a good night's sleep, weight management, and how to relieve anxiety and stress. "It's not just about managing chronic pain," Brown said. "It's about living a healthy life."

Managing chronic disease

Clarke, who has diabetes and arthritis, attended PCA's health workshops and found the program so helpful that she decided to become a facilitator for the "Help Yourself to Health" workshop. The series focuses on a range of chronic conditions, such as diabetes, hypertension, heart disease, asthma and stroke, and managing these conditions and associated symptoms.

Intent on finding better ways to manage her severe health conditions, Clarke learned to chart her medications to ensure she would take them correctly; practice specific exercises to help her stay active, even with limited mobility; and ask specific questions of her health care providers.

Ramona Reid participated in the Help Yourself to Health workshop to deal with her joint issues. "I was so interested in what it would take to feel better," this retiree said. "The workshops and materials gave me exercises that really helped me." The guided images, breathing and relaxation techniques she learned helped redirect her focus from her physical problems. Reid now understands her conditions better. "I can control these problems," she said. "They no longer control me."

Both Reid and Clarke are enthusiastic about the various health self-management programs PCA offers and their roles as facilitators, which enables them to pass on

the knowledge and sense of empowerment they've gained. "It is a benefit to get as much information as I can to help myself and others," Clarke said.

Dealing with diabetes

The third workshop series, "Common Threads," provides in-depth information geared to self-management of type 2 diabetes. "There is a heavy emphasis on nutrition," Brown said. "Participants are introduced to guidelines for healthy eating that address the role of protein, carbohydrates and fat in meals; and they have the opportunity during the workshop to actually plan a meal suitable for people living with type 2 diabetes."

Participants also learn about the American Diabetes Plate Method as another tool for planning meals and ensuring the recommended servings of carbohydrates and protein in their diet. This information helps with the management of diabetes-related health problems such as glaucoma, foot sores, and high or low blood sugar. Like the two other self-management programs, Common Threads also addresses the benefits of physical activity and teaches special exercises suitable for participants' health condition.

PCA provides these health self-management workshops for seniors in Philadelphia with support of the Older Americans Act, Title IIID federal funding channeled through the Pennsylvania Department of Aging.

For more information about these programs, see the calendar on pages 12-13 or call the PCA Helpline at 215-765-9040. To train as a volunteer facilitator or schedule a series at your location, contact Diane Brown at 215-765-90000, ext. 5119, or email Diane.Brown@pcaCares.org.

Marcia Z. Siegal is public relations manager for Philadelphia Corporation for Aging (PCA).

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Cemetaries

• continued from page 1

On Saturday, Oct. 13, from 10 a.m. to 2 p.m., HFH will celebrate Orchard Harvest in partnership with Philadelphia Orchard Project, a non-profit that plants and supports community orchards in the city. "We have figs, peaches, apples, plums and Asian pears," Warrington said. "We invite the public to share our fruit and learn our history."

For more information, call 215-844-1683, ext. 107 or email info@historicfairhill.com.

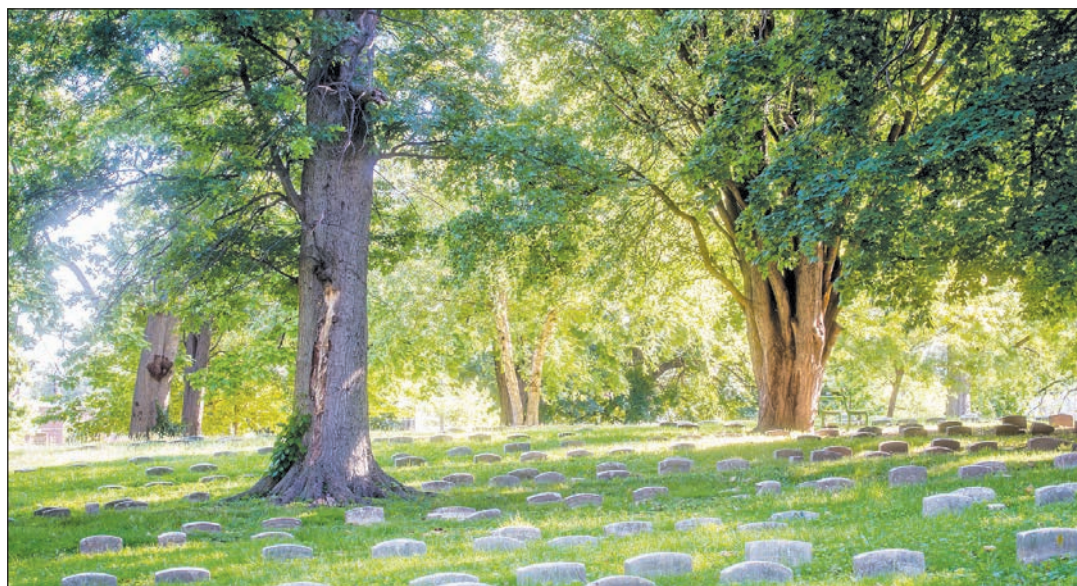
The Woodlands

At West Philadelphia's Woodlands Cemetery, 4000 Woodland Ave., across the street from a trolley portal, names on headstones read like a "Who's Who" among 19th- and early 20th-century Philadelphians. Founded in 1840, the Woodlands is a 54-acre National Historic Landmark, meaning that it has been recognized by the federal government for illustrating the heritage of the United States. The Woodlands has become the final home of controversial realist painter Thomas Eakins and distinguished cardiologist Jacob

Mendez Da Costa, M.D., who served as an assistant surgeon during the Civil War, during which he did one of the earliest studies of anxiety disorders in soldiers, at first called "irritable heart."

The Woodlands' beginning dates to 1766, when William Hamilton inherited 356 acres of land in West Philadelphia, then known as Blockley Township. In 1770, Hamilton built a magnificent porticoed house with a view of the Schuylkill River. An anglophile, he visited England after the war and enlarged his house based on what he'd seen there, transforming it into the country's first federalist mansion. Some of the rooms have geometric shapes, including his drawing room, America's first Oval Office. Visitors may take regularly scheduled tours of the mansion Thursdays, April through October, at 10 a.m., 12 p.m. and 2 p.m. The cost is \$10 per person or \$8 for seniors

Today, the Woodlands provides lush, green,



Courtesy: Historic Fair Hill Cemetery and Garden

Historic Fair Hill Cemetery and Garden in North Philadelphia provides a tranquil space to relax, learn about the area's history or purchase organic produce that's grown on the grounds.

healing quiet to 40,000 visitors a year. "People walk, jog, and picnic here," said Emma Max, program and operations manager. "We also have wildlife walks and bird-watching with our resident bird expert."

Several special events are scheduled for this month. HollyWoodlands, on Friday, Oct. 12, from 7-10 p.m., will feature a screening of the original Ghostbusters film for a suggested donation of \$10. Halloween Family Funday on Sunday, Oct. 21, from noon to 3 p.m., includes a scavenger hunt involving the stories of some of the Woodlands' permanent residents. See upcoming event information at woodlandsphila.org/events-calendar.

Laurel Hill

If you venture to Laurel Hill Cemetery, established in 1836, you'll follow in the footsteps of Philadelphians from times past. In the 1840s, not only funeral-goers but also pleasure-seekers visited this 265-acre site, a National Historic Landmark in the East Falls section of Philadelphia on the banks of the Schuylkill River. Philadelphia residents used to arrive by steamboats on an hourly circuit between Fairmount and the falls of the Schuylkill. Nearly 30,000 people entered the gates between April and December of 1848, according to the cemetery's archives.

At Laurel Hill, 3822 Ridge Ave., several gravesites – including those of six passengers of the Titanic – still draw visitors. There are also 43 Civil War leaders buried here, including Gen. George Gordon Meade, who defeated Confederate commander Gen. Robert E. Lee at the Battle of Gettysburg in 1863. Bacte-

riological chemist and refrigeration engineer Mary Engle Pennington also rests here. She helped to develop refrigerated boxcars.

Laurel Hill Cemetery's gates are daily from early morning until early evening for self-guided walking, driving or mobile tours; and for exercise, nature walks, dog-walking, biking, picnics or relaxation. Scheduled activities include outdoor yoga sessions and theater performances, including Shakespeare, murder mysteries and adaptations of Poe, and an annual 5K run. Laurel Hill offers tours from the sublime to the spooky. "True Tales from the Tombs" at 7 p.m. Friday, Oct. 12, will spotlight scandal, mystery and murder. At 1 p.m. Sunday, Oct. 14, actor Bill Barker, 65, a Villanova graduate in history who has portrayed Thomas Jefferson at Colonial Williamsburg for 25 years, will present "The Worlds of Thomas Jefferson."

"We'll take a leisurely two-hour stroll to the graves of Jefferson's friends and foes at Laurel Hill," said Barker. "It's a passion for me."

"Oddly Departed: Mischief Night Mysteries," a tour at 6 p.m. Tuesday, Oct. 30, caps off the month. For more information see thelaurelhillcemetery.org/events or call 215-228-8200.

Laurel Hill also is a certified arboretum. "Whether you come for a tour or a picnic on your own, October is one of the best times of the year to visit," said Emma Stern, director of programs. "With all the leaves changing color, it's spectacular."

Native Philadelphian Constance Garcia-Barrio writes about many topics, including black history.

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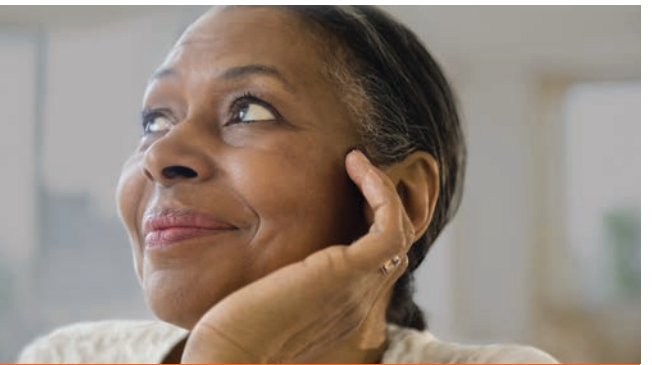
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Oct. 18 at 10 a.m.
Tiffany Diner
9010 Roosevelt Blvd.
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Oct. 19 and Nov. 2 at 11 a.m.
East Oak Lane Library
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October 2018

MONDAY

1

To the Polls. Phila. Mural Arts curator Conrad Benner discusses how art can encourage civic participation through voting. 448 N. 10th St. 6-8 p.m. 215-685-0750.

TUESDAY

2

Chronic Disease Self-Management Program: Help Yourself to Health. 10 a.m. Center on the Hill. 215-247-4654. (Tuesdays through Nov 6.)
Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Ralston Center. Register: 1-888-735-4416.

SUNDAY

7

Old City Fest. Block party with crafts, exhibitions, food & drink. 11 a.m. to 6 p.m. North 3rd & Arch streets. 215-592-7929.

Outfest! Celebrate the LGBT community with awards & live entertainment. Noon to 6 p.m. 13th & Locust streets. 215-875-9288.

COLUMBUS DAY

8

Spinning Yarn. Enjoy a relaxing evening of knitting & crocheting. Fumo Family Library. 6:30 p.m. 215-685-1758.

9

Kinship Care Meet-Up. All kinship caregivers of children welcome. Cyberbullying prevention tips, storytelling & refreshments. 10 a.m. to noon. Phila. Corporation for Aging. Register: 215-765-9000, ext. 5300.

14

Sempre Vivaldi. Baroque performances of works from composer Antonio Vivaldi. 4 p.m. Great Hall at Bryn Mawr College. 610-688-2800. \$

15

La NOCHE! Live bands perform rhythms of the Caribbean & Latin America. 8 p.m. Kimmel Center. 215-893-1999.

Managing Sugar Cravings. Understand why you are craving sweets & how you can gain control. 10 a.m. PSC - Allegheny. 267-286-1455. \$

16

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Journey's Way. Register: 1-888-735-4416.

September & October Birthday Party. Celebrate members' birthdays with lunch, cake & special entertainment. 11:45 a.m. KleinLife: Northeast Phila. Register: 215-698-7300.

Milestones™

Events that end with a "\$" require an entrance fee or advance ticket purchase. Free events may request donations or sell items. Please call the number listed for pricing or other details.

Send your calendar items to:

ATTN: Milestones Editor
PCA, 642 N. Broad St.,
Philadelphia, PA 19130
Phone: 215-765-9000, ext. 5081
Fax: 215-765-9066

Email:
milestonesnews@pcaCares.org

Event submission deadline: 25th of the month for publication in month after next.

21

AIDS Walk Philly. The region's largest HIV/AIDS fundraiser features a 5K walk & 5K run. 6:30 a.m. Eakins Oval, Phila. Museum of Art. Register: aidswalkphilly.org.

22

CPR Training. 3 p.m. Paschalville Library. 215-685-2662.

Health Benefits of Functional Food. The seminar focuses on foods with dietary components that may reduce the risk of chronic diseases. 10 a.m. PSC - Allegheny. 267-286-1455. \$

23

Mural Dedication: Water Gives Life. Join Philadelphia Mural Arts to dedicate a new mural from artists Eurhi Jones & David McShane that celebrates the connection between Philadelphia's rivers & local horticulture. Noon. 13th & Arch sts. 215-685-0750.

28

Philly Farm & Food Fest. Enjoy seasonal food & drink from more than 200 local vendors. 11 a.m. to 4 p.m. Phila. Navy Yard. \$

29

How to Save a Constitutional Democracy. Authors Tom Ginsburg & Aziz Z. Huq discuss the Constitution. Noon. Constitution Center. 215-409-6645.

Staying Warm with Healthy Foods. Meals for effective weight loss. 10 a.m. PSC - Allegheny. 267-286-1455. \$

30

This Is What Democracy Reads Like: A Conversation with Wilson Goode. Former Phila. Mayor discusses his new book "Black Voters Mattered: A Philadelphia Story." 6:30 p.m. Lucien E. Blackwell West Philadelphia Library. 215-685-7422.

WEDNESDAY

3
AARP's We Walk PHIL. Community walk to explore Phila. & meet new people. 6-8 p.m. Outside Please Touch Museum. 877-926-8300.

Red Cross & You. Learn how to be "Red Cross Ready" at home. 9:30 a.m. Klein-Life: Northeast Phila. 215-698-7300.

10

Who Was John Milton? Rediscover this great poet. 11 a.m. Parkway Central Library. 215-686-5331.

Volunteer Fair. 10 a.m. to 1 p.m. Klein-Life Northeast Phila. 215-698-7300.

17

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Goldstein Apartments. Register: 1-888-735-4416.

UNITED NATIONS DAY **24**

CPR Training. 10 a.m. West Phila. Senior Community Center. 215-386-0379.

Who Was William Blake? Learn the truth about this fiercely independent poet, painter & engraver. 11 a.m. Parkway Central Library. 215-686-5331.

HALLOWEEN **31**

Harvest Party. Celebrate the fall harvest with entertainment & refreshments. 1:30 p.m. PSC – Avenue of the Arts. 215-546-5879. \$

THURSDAY

4
Chronic Disease Self-Management Program: Help Yourself to Health. 10 a.m. Center on the Hill. 215-247-4654. (Tuesdays through Nov 6.)

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Deliverance Church. Register: 1-888-735-4416.

11

Chinatown Ye Shi Night Market. Explore Chinatown at night with mobile food vendors & live entertainment. 7-11 p.m. 10th & Arch streets. 215-922-2156.

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Juniata Park Older Adult Center. Register: 1-888-735-4416.

Faith & the Founding Fathers. 6 p.m. Constitution Center. 215-409-6645.

The Transformative Power of Mindfulness. 7-9 p.m. Holy Family University. 267-341-3687

25

Trip: Clef Club. Enjoy a live show, movie & boxed lunch. Noon to 3:15 p.m. Presented by Marconi Older Adult Program. 215-717-1971. \$

FRIDAY

5
Oktoberfest Philly. Bavarian beer festival featuring German fare & live entertainment. 7:30 p.m. 23rd Street Armory. 267-909-8814.

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. William Way Community Center. Register: 1-888-735-4416.

PCA's Senior Strut: A Health Event in the Park, Presented by PA Health & Wellness. 9:30 a.m. Lloyd Hall. Register: 215-765-9000, ext. 5055. \$

19

Community HealthChoices Community Meeting. 10 a.m. to noon or 1-3 p.m. Samuel Tabas Apartments. Register: 1-888-735-4416.

Outdoor Movie Night: 'The Incredibles.' 7-10 p.m. Starr Garden Playground. 215-686-1782.

26

Parkway 100 Celebration. Music, food & live performances. 5-10 p.m. Benjamin Franklin Parkway. parkway100.org.

SATURDAY

6
Philadelphia International Dragon Boat Festival. 8 a.m. to 5:30 p.m. Schuylkill River Trail. 610-642-2333.

Midtown Village Fall Festival. Noon to 8 p.m. 13th & Chestnut streets. 215-670-4323.

Revolutionary Germantown Festival. 10 a.m. to 4 p.m. Cliveden of the National Trust. 215-328-7312.

13
Fishtown River City Festival. Enjoy live music, food trucks & craft beer by the river. Noon to 6 p.m. Penn Treaty Park. 610-761-6896.

Philly Cheesesteak & Food Fest. Celebrate our city's signature sandwich with food vendors, kid's carnival & beer garden. 1-6 p.m. 2300 Arena. 888-827-8340. \$

20

Pysanky: The Art of Ukrainian Egg Decoration. Learn the unique method of creating colorful intricate patterns on eggs. 2:30-4:30 p.m. Tacony LAB Community Arts Center. 267-686-7420.

27

South Street Pumpkin Fest. Celebrate Halloween with circus performances, horse & wagon hayrides, & activities for kids. Noon to 5 p.m. 2nd & Pine sts. 215-413-3713.

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Health Care



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Getting needled for her health: One woman's acupuncture odyssey

By M.L. Polak

Through a chance recommendation from a holistic friend, I started going to an acupuncturist about 25 years ago – and for me, it was love at first needle. Acupuncture is a holistic or alternative health technique from traditional Chinese medicine (TCM) in which trained practitioners stimulate specific points on the body by inserting filament-thin needles into the skin to galvanize the flow of qi (pronounced “chi”), or energy, along internal pathways called meridians. Don’t worry – the needles are stainless steel and sterilized. They are used just once, then discarded.

Since originating in China about 5,000 years ago, acupuncture has become widely practiced in the West. Supposedly, it was first brought to the U.S. in 1971 after Henry Kissinger visited China and New York Times reporter James Reston, who was there covering the visit, received the treatment following an emergency appendectomy. Reston’s public endorsement of acupuncture’s soothing, pain-killing properties provoked curiosity.

As for me, I was more than curious since learning acupuncture’s goal is to bring the body and mind back into balance. Balance was what I wanted. All my life I had been highly allergic to many prescription drugs and other pharmaceuticals, including antibiotics and over-the-counter products. Somehow Western Medicine didn’t work for me. Doctors never seemed to understand whatever was wrong with me. The longer my medical history, it seemed, the shorter their attention span. And yet, in mere minutes of my undergoing that first acupuncture session

and experiencing a complete and utter sense of relaxation, acupuncture became my health care of choice.

Typically, my session lasts about an hour. I either wear loose-fitting clothes to the appointment to give the acupuncturist access to different parts of my body or change into a gown when I arrive. My acupuncturist often will start my appointment by studying my tongue color and coating as an early indicator of possible problems and taking my pulses on three points of each wrist because in TCM there are multiple pulse points to consider. My practitioner likely will ask how I am feeling. He or she tends to listen supportively – without watching the clock. Then I stretch out on a comfortably cushioned cot and receive a configuration of removable needles in various points of my body depending on how I “am” on the day of my visit. Most of the time, I don’t even feel them being slipped into my skin. Sometimes my acupuncturist will twirl them to activate the waiting energy. In the background, soft music plays. I like the lights off; others may prefer them dimmed. I close my eyes and breathe deeply. Sometimes I fall asleep. I have never experienced any side effects from a treatment.

There are various versions of acupuncture – Chinese, Japanese and Korean, for instance. Each focuses on placing needles in various parts of the body, including the hands, ears and feet. Having tried several varieties, I prefer classic acupuncture, a basic regimen which can also include herbs you take between sessions in the form of tea, pills, powder or capsules.

• continued on page 17

Recipe Box

Bloomin' baked apples taste like a crustless pie

Did you know that Pennsylvania grows more than 400 million pounds of apples each year, making it the fourth largest producer in the country? The state's most famous fruit is in season from July through October, but Pennsylvania-grown apples are available year-round through cold storage. This easy dessert recipe for fall combines the flavors of warm apple pie with those of a caramel-coated apple.



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Bloomin' baked apples

(Servings: 2)

Ingredients:

2 Honeycrisp apples or other crisp apples
2 tbsp. butter
3 tbsp. brown sugar, packed
1 tbsp. flour
1 tsp. cinnamon
4 soft caramel candies
Optional toppings: vanilla ice cream,
caramel sauce and ground cinnamon

Directions:

Preheat the oven to 375 degrees.

To get the blooming apple look, you need to cut the apples. Slice off the top $\frac{1}{4}$ to $\frac{1}{3}$ of the apples. Scoop out the core with a melon baller or stainless steel measuring spoon.

Use a thin paring knife to make two, deep circular cuts around the center of each apple. Next, turn the apple upside-down and make

narrow, vertical cuts all the way around the apple. Flip it back over and you can see all of the cuts.

Place the apples in an oven-safe dish and put two caramels into the center of each apple.

Put the butter and brown sugar in a microwave-safe bowl and heat for 30 seconds. Stir the mixture and continue heating for an additional 30 seconds. Remove from the microwave and stir in flour and cinnamon. Pour half the mixture over the top of each of the two sliced apples.

Bake the apples for 25-30 minutes, or until tender. (Some apples can take 45 min to 1 hour to soften.) Use a large spoon to move the apples into bowls.

Top with a scoop of ice cream, drizzle with caramel and/or sprinkle with cinnamon, if desired.

Source: *TheGunnySack.com*

Acupuncture

• continued from page 16

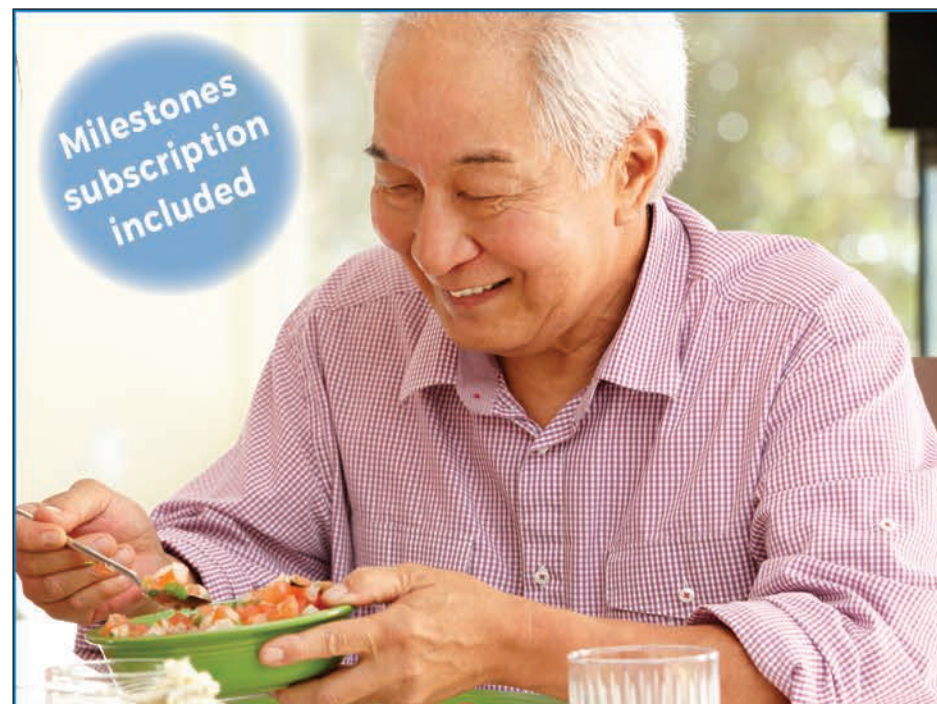
If healing is a belief system, then I "trust the process" of acupuncture. What impresses me again and again about the acupuncturists I've encountered is how well they listen to my health concerns. Over the years, I have been successfully treated with acupuncture and Chinese herbs for carpal tunnel syndrome, bronchitis, anxiety and stress, cat allergies, tension, digestive issues, pain, Lyme disease, banged-up knees, sleeplessness, pulled muscles, and even grief.

These days, I have monthly acupuncture appointments, for maintenance – to keep my assorted minor ailments at bay. I've found acupuncture to be especially helpful with whatever I am experiencing on the day of my

appointment. And if there's a sudden health crisis – like the return of my old carpal tunnel symptoms after I transcribed 132 voice-mail messages for my last job – I can go for more frequent appointments until the symptoms alleviate.

In my experience, the results of acupuncture can be immediate or gradual, relative or absolute. One session or a series of three or more appointments may be recommended, depending on the condition and how I respond to the treatment. Each session is over before I know it. I get dressed, and I leave relaxed, energized and refreshed, ready to face whatever life has in store with a song in my heart.

M.L. Polak writes, edits, draws cartoons and gardens in Philadelphia.



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Medical visits

• continued from page 1

“The focus on successful medical visits is a matter of thinking through what it means to be a patient and your role in the management of your health,” said Diane Brown, health promotion specialist at Philadelphia Corporation for Aging (PCA). “Above all, taking care of one’s own body is the ultimate responsibility of all adults.”

Before any doctor’s visit, it is recommended that you review your own health history, medical problems and medications. “Your own understanding of the purpose of the visit is key,” said Katherine Galluzzi, D.O., who has been practicing geriatric medicine in Philadelphia for 25 years and is chair of PCA’s board of directors. “Recent medical emergencies, illnesses and falls are of great importance, and therefore, all paperwork about those instances needs to be presented.”

Keeping a symptom diary about new problems also is a valuable tool. It’s imperative that you write down a list of any concerns, symptoms and questions ahead of time to share with your doctor

during the appointment. It may also be helpful to share concerns, problems, fears and recent medical history when you schedule the appointment, as well as with the medical assistant or nurse who may precede the doctor during your visit. Galluzzi also strongly advises doing as much paperwork as possible in advance. Many practices send forms to the patient in advance, and by completing those forms before the visit, patient-doctor time can be maximized. “You wouldn’t haphazardly show up for an airplane trip,” she said.

Medications are an important aspect of your visit because they have the potential to affect your health and how you manage chronic conditions. “Your physician needs to know what’s working for you, what’s not working, and especially whether you’re having adverse reactions that may even be dangerous and could worsen your condition,” said registered nurse Danielle McKnight,

PCA’s health promotion nurse supervisor. It’s a good idea to bring every prescription and over-the-counter medication to every visit. This “brown bag reminder,” as Galluzzi calls it, allows you to have all of your medication information at your fingertips.

Communicate openly

It’s best to prioritize your symptom diary or listed concerns so those that are most troubling to you are given attention at a medical visit, when time is a precious commodity. It is your responsibility to be focused. “Most of all, make sure that this list, which should bring your physician up to date on your current health, is carefully prepared, prioritized and discussed,” Brown said. “It’s important to your health provider and to you.”

Also, take notes during the visit. You may not remember everything that transpired when you’re back home, so your notes will help you later.

During appointments, be prepared to be completely honest with your physician, including about whether you have been following your doctor’s instructions. “State not only what you have been doing, but also the things you were supposed to do, but didn’t, as well as the things

you shouldn’t have done, and did,” Brown said. “Withholding seemingly unimportant information from your physician may result in problems.”

This information-sharing may involve uncomfortable topics. In addition to discussing physical concerns, McKnight advises patients to share any and all emotional challenges, including any bouts of depression or suicidal thoughts. Doing so allows you to get these concerns addressed.

If you are nervous about the appointment or want another pair of eyes and ears with you, you may consider having a family member or trusted friend accompany you. That’s a personal decision that should be made with consideration of your own comfort level, as well as how to ensure you can process information that may seem overwhelming.

Sally Friedman has written for the New York Times and other publications.



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**Keep a symptom diary
and prioritize health
concerns for your doctor.**

Ask the Expert

Programs help older workers re-enter workforce

QUESTION:

I retired several years ago but am now getting bored and would like to start working again to bring in some extra money. Are there programs to help seniors find employment?

ANSWER:

Philadelphia Corporation for Aging (PCA) funds two employment programs that provide information and resources to seniors at no cost. These services help older workers build job skills and find employment.

The Senior Community Service Employment Program (SCSEP) is a federal community service and job training program that provides training for income-eligible, unemployed adults 55 or older. Through the U.S. Department of Labor and Pennsylvania Department of Aging,

SCSEP provides paid training opportunities that help eligible seniors to enter or re-enter the workforce. PCA subcontracts with the Mayor's Commission on Aging (MCOA) to administer SCSEP services in Philadelphia. For information, call MCOA at 215-686-8450.

JEVs Career Solutions for 55+ Program assists unemployed seniors of all income levels who are out of work. JEVs' services include referrals to full- and part-time jobs, assistance with resume writing, help finding training opportuni-

ties, career and job search counseling, computer training, and seminars on networking and interviewing. For information, call JEVs at 267-647-7137.

For information about additional senior employment programs, contact the PCA Helpline at 215-765-9040.

Mattie Kersey is a program manager and oversees senior employment programs at Philadelphia Corporation for Aging (PCA).



PCA's Mattie Kersey

It's your turn!

Send Milestones your questions about aging-related issues. We will print select questions – along with answers from experts at Philadelphia Corporation for Aging (PCA) – in upcoming issues. Submit your name, address, phone number and question to: milestonesnews@pcaCares.org or:

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Health Care

How to navigate Medicare's annual open enrollment period

By Marcia Z. Siegal

The annual open enrollment period for Medicare starts October 15 and extends through December 7. If you are already enrolled in Medicare, the country's health insurance program for those 65-plus (and also for people younger than 65 who have certain disabilities and health conditions), you have the opportunity to change your Medicare health plan and prescription drug coverage for the following year. It is recommended that you review your plan every year to evaluate whether the same or another plan would best meet your upcoming needs. During open enrollment, you can also add Part D prescription drug coverage if you do not have it already. Any changes to your Medicare plans made during open enrollment will take effect Jan. 1, 2019. (New to Medicare? See our primer on page 21.)

When it comes to Medicare, there are numerous choices available and navigating open enrollment can seem overwhelming, according to Lorraine Ryan, public affairs officer for the Philadelphia Regional Office of

Avoid fraud with the new Medicare cards

The Centers for Medicare and Medicaid Services (CMS) began a year-long process of sending all Medicare beneficiaries a new Medicare card in April. Beneficiaries in Pennsylvania should have received their new cards by now. The new cards have a unique Medicare Beneficiary Identifier (MBI) instead of your Social Security number to help prevent fraud and identity theft.

You will still need to protect your Medicare card and your identification information. Never share or confirm your Social Security number or MBI with anyone who contacts you by phone, email, or in person unless you have given that person permission to contact you in advance. If you suspect any scam or fraud involving your new Medicare card or if you have not yet received your card, call 1-800-MEDICARE (1-800-633-4227).

the Centers for Medicare & Medicaid Services (CMS). "But don't be intimidated," Ryan said. "There is a lot of information and support available to assist you in making the best decisions for your personal situation."

Ryan offers these tips to help navigate open enrollment.

Review your Medicare materials

Before the annual open enrollment period begins, Medicare health and prescription plans will send you documents, often titled "Evidence of Coverage" and "Annual Notice of Change." Read them thoroughly. Medicare plans can change each year with regard to cost, coverage, providers and pharmacies in the network, and other factors. If your plans are changing, make sure they will still meet your needs for the coming year.

"One of the biggest mistakes people can make is not to read the information about how their plans are changing," Ryan said. "Failing to review those changes, and how those changes will impact their coverage and costs for the following year, can have serious consequences for them if they stay in that plan."

Decide what matters most to you

Is it most important to keep your doctors and have them considered "in-network?" Are there medications you need to have covered? The answers will be different for each person, and knowing what matters to you most will help guide your health plan decision. "Have all your important health information at your fingertips when you are making your enrollment decision," Ryan said. This includes a list of the medications you take, including doses; the names of your health care providers; and your preferred hospital and pharmacy. "Consider what your medical needs will be for the coming year," she said. "Have you developed any new medical conditions? Take note of changes to your health, which can mean new specialists, treatments and medications."

Also, consider whether you need to enroll in a prescription plan if you do not have one or are losing coverage. You may want to change prescription plans because one or more of your medications may not be cov-

ered in the coming year under your current plan.

Choose a plan that fits your budget

Your financial circumstances may have changed – for instance, you may have more medical expenses than you used to, or a drop in income due to retirement. Even if your finances are stable and you are happy with your plan, it is wise to "shop around" and compare pricing on the various plans.

There is a wealth of information on the Medicare site, Medicare.gov, including a link to the Medicare plan finder. "You may find a plan that offers the same level of coverage but at a lower cost," Ryan said. "Every year, more people are taking an active role in reviewing their options and switching plans that cost less for the same coverage." However, it is important to note that if you are happy with your current plan and it meets all of your health and medication needs at a price you can afford, you can stay with your current plan. If you are doing so, you do not need to do anything.

Compare plans' quality ratings

In addition to cost comparisons, the Medicare.gov Medicare plan finder provides a one- to five-star rating system to grade plans. Ratings are available for several factors, including complaint resolution, customer service, customer experience, overall plan performance, and helping members to manage chronic conditions or stay healthy with screening tests and vaccines.

"A lot goes into those ratings," Ryan said. "You want to consider the quality of your Medicare and prescription drug plan to ensure you are getting the most for the services you are paying for."

Get help with Medicare

How one navigates Medicare choices and decisions is up to the individual. "You may be comfortable 'shopping' and enrolling online yourself," Ryan said. "Or you may want to consult with a broker or your financial advisor or take advantage of the free Medicare counseling programs available."

Take a deep breath and avail yourself of



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the resources that are there for you. These resources include the following:

- The Apprise program offers Medicare beneficiaries free personalized assistance including help with reviewing Medicare coverage options and enrollment. (For more information on APPRISE, see story on page 21.)
- The Center for Advocacy for the Rights & Interests of the Elderly (CARIE) makes presentations about Medicare for groups year-round and provides one-on-one counseling to beneficiaries during open enrollment. For more information, contact CARIE at 215-545-5728.
- Medicare.gov offers information about all the parts of Medicare and supplemental insurance (Medigap), as well as online tools to enroll in or change health and prescription drug plans, including costs and coverage information, and plan comparison tools. Information is also available by calling 1-800-MEDICARE (1-800-633-4227). TTY users can call 1-877-486-2048.
- The Social Security Administration's website, ssa.gov, provides information about applying for Medicare; the Extra Help program, which provides help with Medicare prescription drug plan costs; and rules for Medicare beneficiaries with higher incomes. Information is also available by calling 1-800-772-1213. TTY users can call 1-800-325-0778.

Marcia Z. Siegal is public relations manager for Philadelphia Corporation for Aging (PCA).

Medicare basics: Learn your A, B, C and D's

Medicare is the federal health insurance program for people 65 or older, and some younger people with disabilities. Each of the four different parts of Medicare covers different services. Parts A and B are known as Original Medicare and cover the majority of in-patient and out-patient care. Part C allows you to shop around for plans not offered through the government. Through Part D, you can add prescription drug coverage.

Medicare Part A covers most hospital, skilled-nursing facility, home health and hospice care deemed medically necessary. It is free if you have worked and paid Social Security taxes for at least 10 years. You will pay a monthly premium if you have worked and paid taxes for less time.

Medicare Part B is basic medical insurance. It covers most medically necessary doctors' services, preventive care, durable medical equipment, hospital outpatient services, laboratory tests, X-rays and mental health care, and some home health and ambulance services. You pay a monthly premium for this coverage, which varies depending on your income and when you enroll.

Medicare Part C is the part of the Medicare policy that allows private health insurance companies to provide Medicare benefits, known as Medicare Advantage plans.

These plans are offered by health maintenance organizations (HMOs), preferred provider organizations, private fee-for-service plans, special needs plans and Medicare savings account plans. Medicare Advantage plans must offer at least the same benefits as Original Medicare but can do so with different rules, costs and coverage restrictions. You may also get prescription drug coverage as part of your benefits package.

When you enroll in a Medicare Advantage plan, you continue to pay premiums for your Part B benefits directly to Medicare. In addition, Medicare Advantage plans often charge a separate monthly premium.

Medicare Part D provides optional outpatient prescription drug coverage. These plans are offered by insurance companies and other private companies approved by Medicare. They are not provided directly by the government.

You must have both Part A and Part B to join a Part D plan. Part D may charge a premium penalty if you don't sign up during your initial enrollment period and want it later. If you want Part D, you must choose Part D coverage that is compatible with your Medicare health benefits.

For more information, see page 20, call 1-800-633-4227 or go to Medicare.gov.

Free help with Medicare is available from Apprise

Choosing a Medicare plan can be a daunting task. But free help is available. Apprise is a federally funded health insurance counseling program for Pennsylvanians eligible for Medicare.

Professional and volunteer counselors can answer your questions and provide objective, easy-to-understand information about Medicare eligibility and enrollment. They can also counsel you on Medicare Advantage, Medicare Supplement (Medigap) and drug prescription plans.

Counselors work confidentially with you to determine your health care needs and preferences, compare health insurance options, and obtain Medicare and, if desired, supplemental coverage that fits your lifestyle and budget. Counselors also assist caregivers, professionals and others.

The Apprise program is administered in



PCA-funded

Philadelphia by Philadelphia Corporation for Aging (PCA). For more information or to make an appointment, contact the Apprise provider for your residence:

Apprise – Mayor's Commission on Aging: 100 S. Broad Street, 4th Floor, Suite 400; 215-686-8462; covered ZIP codes: 19102, 19103, 19104, 19105, 19106, 19107, 19112, 19121, 19122, 19123, 19125, 19127, 19130, 19131, 19132, 19133, 19134, 19137, 19139, 19138, 19142, 19143, 19145, 19146, 19147, 19148, 19151, 19153

Apprise – Einstein Medical Center: 5501 Old York Road; 215-456-7600; covered ZIP codes: 19111, 19114, 19115, 19116, 19119, 19120, 19124, 19126, 19128, 19135, 19136, 19138, 19140, 19141, 19144, 19149, 19150, 19152, 19154

The Statewide Apprise Helpline at 1-800-783-7067 can answer questions.



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If you are MARRIED and

have a total monthly income of less than \$2,058, and less than \$28,150 in resources

MEDICARE SAVINGS PROGRAM

Can help you with the payment of your Part B premium!

You may qualify for the Medicare Savings Program if:

If you are SINGLE and

have a total monthly income of less than \$1,366, and less than \$7,560 in resources

If you are MARRIED and

have a total monthly income of less than \$1,852 and less than \$11,340 in resources

Call today to find out if you are eligible and get connected to Free Medicare Insurance Counseling.

1-800-783-7067

APPRISE is a free service provide by the PA Department of Aging, and is funded in whole or part by a grant through the Administration for Community Living. The Pennsylvania Link to Aging and Disability Resources is part of a nationwide effort to assist seniors and adults with disabilities connect to supports and services.



Nostalgia

Mother's resourcefulness helps girls become princesses for Halloween

By Dorothy Stanaitis

In October 1944, the main topic of recess conversation at James Rhodes Elementary School, 4901 Parrish St. in Philadelphia, was what we would be for Halloween. This was an important decision for any 11-year-old, since we would be going door to door for trick-or-treat night with friends and didn't want to wear the same costume as the year before.

Anne Marie Ryan didn't care about that. She dressed every year as a newsboy, wearing her brother's cap, jacket and knickers. A copy of the Philadelphia Evening Bulletin, tucked under her arm, was always an important part of her costume. Carrying the paper made collecting treats in a bag from John's American Market a little bit awkward, but she wanted to make it clear that she wasn't just a boy. She was a newsboy, a very important job for a grade school student.

I don't know if it was due to slender budgets or wartime shortages, but aside from the 10-cent, half-face masks sold at Woolworth's Five and Ten, no one bought anything for a Halloween costume. The closets and bureau drawers at home supplied everything that was needed for a boy to become a hobo, pirate or sports star. Mother could supply makeup and dresses for those who wanted to pretend to be a lady. Her pretty scarves, bracelets and necklaces helped the little girls who wanted to dress up. The bolder children, who were not as concerned with impressing others, could use bed sheets to become a ghost.

But that year, my younger sister, Mary Lou, and I had our hearts set on being beautiful princesses. Sadly, my mother had no lacy or satin dresses fit for royal wear, and there were no tiaras lying about in her jewelry drawer.

One of our cousins had a beautiful flower girl gown that she had worn in a wedding. But which one of us would wear it? That would

have left one of us with nothing but a knee-length, frilly Easter dress. This simply would not do, since we were certain that princesses always wore long gowns.

We were becoming despondent at the thought of giving up our princess dreams, but our mother was not going to let her little princesses be unhappy at Halloween. She was quite busy taking care of our new baby brother and always took an afternoon nap while he took his. On the Saturday before Halloween, she skipped her nap and came into our bedroom. She took down our pretty, ruffled, pink polka-dotted Swiss curtains. We wondered why, since they had been freshly washed just a few weeks before.

We didn't have long to wonder, though. She called us into her sewing room and began measuring us with her long yellow tape.

Mother sewed most of our clothes. She worked on our fall dresses before school started in September, and she usually sewed our Christmas outfits after Thanksgiving. She'd take us to Diamond's Dry Goods Store to have us choose the fabric we wanted for new clothes. But this time, she didn't need to. The curtains would be the fabric she used to sew two beautiful princess gowns.

With no pattern to guide her, Mother cut and stitched all afternoon. We thought that our gowns were splendid, and so were the coordinating pretty fluffy headbands. Thanks to Mother's hard work and resourcefulness, we would be beautiful princesses for Halloween after all.

It wasn't until just before Thanksgiving that she made new curtains for our room. But we never regretted losing those pink, ruffled curtains for a single minute, especially not on Halloween.

Dorothy Stanaitis, a certified Philadelphia tour guide, writes about history and culture.



Courtesy: Dorothy Stanaitis

Dorothy Stanaitis, 11 (right), and her younger sister, Mary Lou, 8, dressed as princesses for Halloween in 1944.

Don's Column is taking a break. Don Harrison, Milestones editor emeritus, is on hiatus from his monthly Milestones column due to health reasons. We hope he will return to writing his column soon.

PCA wins 2018 Mature Media Awards

Philadelphia Corporation for Aging (PCA) has won four 2018 National Mature Media Awards, which annually recognize the best marketing, communications, and educational materials and programs for adults 50-plus, for outstanding writing and overall impression of its Milestones newspaper.

The prize-winning entries were:

Gold: "Grandfathers pass along traditions" by Marcia Siegal, PCA's public relations manager, published in September 2017

Bronze: "Downsizing tips from moving experts" by Alicia Colombo, PCA's editor and publications coordinator, published in January 2017

Merit:

- "Senior community centers are

portals to activities education and wellness" by Alicia Colombo, PCA's editor and publications coordinator, published in September 2017

- The Senior Center Issue: Published in September 2017

For the past 17 years, Milestones newspaper has been published monthly as a free public service by PCA. To subscribe to Milestones e-news, the newspaper's free weekly online companion publication featuring articles from Milestones newspaper and additional content, go to pcaCares.org and scroll to the bottom of the page. To download PDFs of the current or past issues of Milestones newspaper or to find a distribution site, go to pcaMilestones.org.



Stroke

• continued from page 6

- Eat better – The Mediterranean diet is especially recommended for stroke prevention.
- Lose weight or maintain a healthy weight
- Stop smoking

A basic recommendation for staying active is to engage in 30 minutes of activity that raises your heart rate at least four times each week. "Anything you can do to get moving helps," Yuan said. "Consider chair yoga, chores around the house, or water aerobics, which is great for people with bad knees."

The symptoms of a stroke

To identify the signs of a stroke in yourself or someone else, remember to "BE FAST":

Balance – Is there a sudden loss of balance or coordination?

Eyes – Is there sudden blurred vision, double vision or other persistent vision trouble?

Face – Is one side of the face drooping? A crooked smile may signal a stroke.

Arms – Does one arm drift downward? Is there weakness or numbness on one side? The inability to raise an arm (or a leg) is a symptom of a stroke.

Speech – Is speech slurred or garbled?

Time – Take note of when symptoms began, then call 911 for immediate medical attention.

"It's important to note that a stroke is a sudden-onset phenomenon, usually on one side of the body or in a localized area," Yuan said. "It's definitely something that happens quickly and strongly. Symptoms are often the worst at the onset. If symptoms last 10 minutes or more, even if they subside, go to the emergency room immediately."

Above all, it is important for people to realize that spotting a stroke and getting treatment fast may make the difference between life and death – or a full recovery and long-term disability.

Alicia M. Colombo is editor of Milestones.

Crossword

Strike zone

Across

- 1 Offspring
- 6 KGB cousin
- 9 A comic character
- 14 Uncaps
- 15 *Zwei* predecessor
- 16 Tigers' winter counterparts
- 17 Walk after this, if you can
- 19 Tapestry
- 20 Sphere starter
- 21 Fat liquid
- 23 A growing pain
- 24 Teachers' org.
- 25 Concerned with knowledge
- 27 Poetic contraction
- 28 Jackie's late mate, *et al.*
- 29 Charley horse
- 31 Go over carefully
- 34 Acapulco accommodations
- 37 "___ who asks, it shall be given"
- 38 Related, in a way
- 39 Fisherman, of a sort
- 42 Novelist William
- 44 *Palacio* inhabitant
- 45 *Corrida* cries
- 46 He had a salty wife
- 48 Bugged
- 50 Colloid
- 53 Former: archaic
- 55 Specific male, 1 Across
- 56 Musical Malcolm
- 57 Fall flower
- 59 End of a circuit
- 61 *Pietro ___ e Maria*
- 62 First person, in ancient Rome
- 63 Complete
- 64 Classified
- 65 Prepare hide
- 66 Wallace, in 60 Down perhaps?

Down

- 1 Cedar Rapids native
- 2 Malice
- 3 AL city
- 4 Disassemble
- 5 Foresight letters
- 6 Disappear!
- 7 Prepares potatoes
- 8 Let loose
- 9 *Oeufs ___ Russe*
- 10 Civitavecchia coin
- 11 In this, two must run
- 12 Dumb
- 13 Ruhr city
- 18 Architectural style
- 22 Actor Robert de ___
- 25 Imaginary trouble-maker
- 26 Provided viands
- 28 Made ___ of money
- 30 *Mas o ___*
- 31 Conglomerate initials
- 32 Neither's companion
- 33 He plays close
- 35 When the QE2 is due
- 36 Old Kobe coin
- 40 Compass directions: abbr.
- 41 Cog catcher
- 42 Miner king?
- 43 *Coeur d'___, ID*
- 46 Jumped
- 47 *Le Quai d'___, Paris*
- 49 NY or PA county
- 50 Place for andirons
- 51 Sign up
- 52 Mistrusting
- 54 Vision starter
- 56 Aged in Aachen
- 58 Staff
- 60 Inverness inn

Solution

The solution can be found on page 14.

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