



## CARE AT HOM

## VALLEY HEALTH & LIFE READERS, IN THIS ISSUE OF OUR

magazine we turn the spotlight on one of our health system affiliates that delivers services outside the walls of an office or hospital: Holyoke Visiting Nurse Association & Hospice Life Care.

As the president of Valley Health Systems, it is my job to provide the resources and the support to our affiliated entities; however, my support for home care and hospice has much deeper roots than my job duties.

I started my healthcare career as a physical therapist and worked for a home care agency for several years. It was during that time that I developed a deep appreciation for the work that is done by our home care clinicians every day. The unique challenges of working alone, living your work life out of a car and being creative by using items available in clients' homes (soup cans make excellent training weights) require a special breed of people. On the other hand, along with the challenges, come special rewards. Working with clients in their homes allows achievements to instantly transfer to their own environment; they can walk up and down their own stairs during therapy, use their bed to practice getting up and sitting down, be checked by a nurse while sitting in their favorite chair, and heal and recuperate in their own comfort zone. In this issue we pay tribute to those special caregivers who make a difference in people's homes every day.

My experience with the mission and work of hospice comes from a very different sphere of influence in my life. About 18 years ago, my beloved mother-in-law, Karin, was diagnosed with terminal cancer. She left her hometown in Michigan and came to live with our family in New Jersey for the last months of her life. She passed away in our home under the care of hospice.

Following that experience, I had no other contact with hospice until I arrived at Valley Health Systems. I was delighted to find out that our system included Hospice Life Care and that it has an excellent service record in our community. With every patient we are honored to serve, and many have served us and our country in the armed forces, I am given an opportunity: The opportunity to support hospice so that it can continue to treat our patients with dignity, compassion, respect and kindness, the way I would want my loved one to be treated. In this small way, I am able to pay tribute to my beloved Karin.

I know that many of you have had your own "Karin" in your lives. As we contemplate our own human mortality, let's take a moment to salute those who have dedicated their lives, either professionals or volunteers, to easing the physical and emotional

pain of the terminally ill and their families.



Best Regards,

## SPIROS HATIRAS PRESIDENT AND

CHIEF EXECUTIVE OFFICER, HOLYOKE MEDICAL CENTER & VALLEY HEALTH SYSTEMS, INC.



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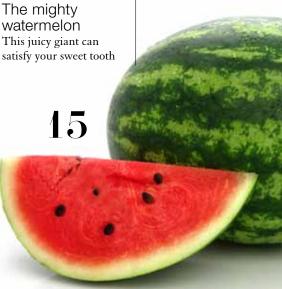


- HOLYOKE MEDICAL CENTER
- HOLYOKE VNA HOSPICE LIFE CARE
- RIVER VALLEY COUNSELING CENTER
- WESTERN MASS PHYSICIAN **ASSOCIATES**

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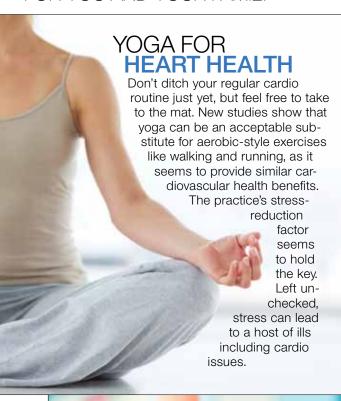
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Material contained herein is intended for informational purposes only If you have medical concerns seek the quidance of a health care professional.



## **HEALTHY** HABITS

FOR YOU AND YOUR FAMILY





## THE BEST HUE FOR YOU

People who get more of their nutrients in red, orange and yellow have smaller waists. The reason: Brightly colored fruits and vegetables are chock full of vitamin C, which reduces the stress hormone cortisol. So top your fish with mango salsa or add red pepper to your turkey burger.



## WELLNESS EVENTS

Our lineup of upcoming seminars and programs is designed with your health in mind. Join us!

## **WELLNESS WEDNESDAYS**

Schedule a mammogram or a bone-density screening, relax with a chair massage, enjoy free door prizes and more at these conveniently scheduled, late-afternoon events focusing on women's health. To schedule a mammogram or bone density screening, call 413.534.2594.

**Date:** Wednesdays, August 12 & 26 **Time:** 4–6 p.m.

**Place:** The Women's Center at HMC, 2 Hospital Drive,

Holyoke

## **ALL ABOUT KIDNEYS**

Join Jonathan Slater, M.D., of Renal & Transplant Associates of New England for an informative discussion about kidney health, including chronic kidney disease and treatment options for end-stage kidney disease. Hear from a panel of patients on dialysis as well as former patients who have had a kidney transplant. Please pre-register by calling 413.534.2789 to ensure that materials are available.

Date: Tuesday, September 22

**Time:** 4–5:30 p.m.

Place: HMC Auxiliary Confer-

ence Center

For more upcoming events, please visit holyokehealth.com/events.

## **BOOSTING BRAIN POWER**

Encourage your kids to run, jump, hop, swim and chase each other around and you substantially improve their ability to think, according to a groundbreaking study by researchers at the University of Illinois at Urbana-Champaign. Specifically, kids who were physically active experienced a major boost in their executive-function skills—their ability to mentally multitask and maintain concentration.



## SNOOZE YOUR WAY SLIM

If you're sleeping less than six-and-a-half hours a night, consider getting an extra hour-and-a-half of shut-eye. Not only will you be more rested, you'll be less likely to crave high-calorie snacks for energy. Researchers found that folks who got the extra sleep were 63 percent less likely to crave junk food.



## **GOTTA GO?**

One-third of men and women ages 30 to 70 have experienced loss of bladder control at some point in their adult lives, but they don't have to live with the condition. Urologists can help with treatments ranging from pelvic muscle exercises and medications to minimally invasive surgery. Find a urologist in your area at holyokehealth.com.



HAVE YOU BEEN PROPERLY PROTECTING YOUR PEEPERS?

## WINDOWS TO THE SOUL?

The eyes may be that, but they're also a precious part of your good health. To guard your eyesight, get regular eye exams and "eat a healthy diet—lots of vegetables—and don't smoke," says Kevin Hulseberg, M.D., of Pioneer Valley Eye Associates in Holyoke. With his help, we highlight six eye issues and reveal which pose a danger.

## STARING AT A COMPUTER SCREEN

WORRY? No, but....No studies have proven that a long day in front of the monitor causes serious eye problems. That doesn't mean there are no side effects. According to Dr. Hulseberg, the computer screen isn't the culprit. "It's 'dryeye' syndrome. Whether you're looking at a

computer screen or a book, if you're staring at something and not blinking enough, your eyes are going to get dry," he says.

WHATTO DO: "Use moistener and remember to blink your eyes often as you're reading," says Dr. Hulseberg.

## **WATCHING 3-D MOVIES**

WORRY? Probably OK. "We really don't know in children, but I think they're probably safe," says Dr. Hulseberg. And while it's likely that watching 3-D movies won't harm your eyes, it could offer a clue to existing eye problems.

WHATTO DO: If your or your child's eyes get tired during a 3-D movie, or you develop a headache or nausea, that could be an alarm signal for other issues. See your ophthalmologist and get your vision checked.

## READING ON A KINDLE, IPHONE, IPAD OR OTHER DEVICE

WORRY? Maybe. People tend to hold an electronic display closer than a

## WHEN TROUBLE'S IN SIGHT

THE BLOSSOM IMAGES BELOW SHOW FIVE WAYS YOUR VISION CAN BE DISTORTED BY EYE CONDITIONS:



### MACULAR DEGENERATION

What it is: Deterioration of the macula, which lets you see details. Warning signs: Blurred central vision, sometimes with a blind spot. Straight lines may appear crooked. Who gets it: Smokers, the obese, women more often than men, and people with a family history of it. The condition is far more common among whites than African Americans. But the greatest risk factor is age. Prevention: Stop smoking, lose excess weight and eat a balanced diet, with lots of green, leafy veggies.



## **GLAUCOMA**

What it is: Damage to the optic nerve from fluid pressure. Warning signs: Glaucoma is painless and often "silent" until peripheral vision begins to erode. Tunnel vision is the ultimate outcome. Who gets it: African Americans, people over age 60, and those with a family history of the condition. Prevention: Cannot be prevented; early detection and treatment are critical.



### **CATARACT**

What it is: Clouding of the lens of the eye. Warning signs: Dull or blurry vision, colors that seem faded, frequent eyeglass prescription changes, poor night sight. Who gets it: People over 40—although it usually isn't detected until age 60 or later. Surgery is the treatment. Prevention: Wear good sunglasses and a hat outdoors, quit smoking and eat a balanced diet.



### **COLOR BLINDNESS**

What it is: A lack of certain pigments in the nerve cells in the eye. Warning signs: Difficulty distinguishing red from green, or blue from yellow. Who gets it: About 10 percent of men; few women. Prevention: None. It's usually congenital.



## **MYOPIA**

What it is: Near-sightedness caused by the length of the eyeball or steepness of the cornea. Warning signs: Blurry distance vision. Who gets it: More than 40 percent of the population. Prevention: It usually can't be prevented, but it can be corrected with lenses or surgery. Avoid aggravating the condition with too much close work.

book, and the closer you hold something, the more you open yourself up to eyestrain.

WHAT TO DO: Hold your device about 14–20 inches away, and if it has the capability, set the background to black and the type to white, which will put less strain on your eyes, says Dr. Hulseberg.

## RUBBING YOUR EYES WHILE WEARING CONTACTS

WORRY? Probably not, as long as you're fairly gentle. "But I'd rather see people using eye moisturizer than rubbing," says Dr. Hulseberg. WHAT TO DO: Do it lightly. Also figure out what's making you rub your eyes. If they're itching a lot, you may have an allergy. Then, when choosing a moistener, do your homework. "Some drops are not safe for contacts," says Dr. Hulseberg. He recommends not using drops with preservatives, or ones that promise to make your eyes less red: "That could make it harder for me to diagnose the problem." He also suggests putting the solution in your refrigerator. "The cooling can help

your eyes feel better," he says.

## **SKIPPING SUNGLASSES**

WORRY? Yes. There are many studies showing that ultraviolet light is a factor in cataracts. And don't think you just need them in summertime. "People worry about wearing sunglasses in the summer, but the most naturally reflective surface is...snow! And with all the snow we get here in Massachusetts, it's important for people to be aware of this," says Dr. Hulseberg. WHAT TO DO: Buy good-quality glasses, and check the label to make sure they provide UVA and UVB protection. If you're in doubt, have your eve doctor check the quality and effectiveness of your sunglasses.

## **WEARING EYE MAKEUP**

WORRY? Maybe. Eye makeup can be a problem if it covers glands in the eyelids that produce essential oils, which prevent your tears from evaporating too quickly.

WHAT TO DO: When applying eyeliner, avoid the thin line of tissue between the lashes and the surface of the eye.

## EAT RIGHT FOR BETTER SIGHT

WHICH OF THESE TWO CHANGES IS BETTER FOR YOUR EYE HEALTH?

- EAT MORE CARROTS.
- CUT DOWN ON ARTIFICIAL SWEETENERS.

Surprisingly, it's the second option. The critical nutrient in carrots is beta-carotene; this converts into vitamin A, which is good for your eyes. But in the U.S., vitamin A deficiency is extremely rare, notes Jeffrey Anshel, O.D., president of the Ocular Nutrition Society. Consuming too much artificial sweetener, on the other hand, can be bad for your eyes. "It breaks down into a type of ethanol that is toxic to the mitochondria," says Dr. Anshel. "Mitochondria are energy producers, and the rods and cones inside the retina have the highest percentage of mitochondria." Consuming artificial sweeteners can ultimately reduce your ability to withstand bright light.

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VALLEY HEALTH & LIFE



## THERE'S NO PLACE LIKE HOME

THE VISITING NURSE ASSOCIATION HELPS A HOLYOKE NATIVE HEAL AFTER SURGERY.

## AT 6'4", RICHARD MOYNIHAN IS A BIG GUY. BUT HIS STATURE

didn't matter when he had surgery this past spring. He was flat on his back after the operation, and it was the home care he received from the Holyoke Visiting Nurse Association (HVNA) that got him back on his feet.

At 57, Moynihan looked back on years of playing basket-ball—for Holyoke High School and Holyoke Community College—and the toll it took on his knees. After he underwent a knee replacement at Holyoke Medical Center (HMC) in April, his orthopedic surgeon, Khaled (Kelly) Instrum, M.D., asked Moynihan if he wanted to receive physical therapy services in his apartment or in a nursing home. "I'm not that old, so it was an easy decision," he laughs. "I went home."

Moynihan is familiar with home care; his mother has a nurse who visits her. And HMC made the process easy for him. "Holyoke Medical Center took care of everything," he says. "They contacted the HVNA, which contacted me."

His home care lasted for 10 days, one to two hours each day. The physical therapists started each session by taking his vital signs and asking him questions—What's your pain level? Are you taking your medication? Then the "work" would begin. "I was scared of what they were going to do to me, that the therapy was going to hurt," Moynihan recalls. "And it was painful, but it benefited me so much. It laid the foundation for my recovery. I wouldn't have the mobility that I have today without it."

As it turned out, Moynihan "loved" the two HVNA physical therapists who came to his home, despite their very different personalities. His weekday therapist, Marcia Merithew, made friends with Moynihan and his

cat, A Rod, whom she "wanted to take home."

The three of them—therapist, patient and patient's pet—bonded. (A Rod even tried to do the exercises with his owner.) And that bonding put Moynihan at ease. "Marcia made me feel very comfortable," he says. "She was tough, but fabulous."

Barbara Kelly-Kinney, his weekend physical therapist, was much more outgoing. She bonded with Moynihan through sports; she has relatives in Baltimore, and he's a huge Baltimore Orioles fan. Even though their allegiances sometimes differed—she's a New England Patriots fan, while he follows their rivals, the New York Giants—they still used sports to connect with one other.

Throughout his therapy, both Merithew and Kelly-Kinney pushed Moynihan to his limit, helping him get through the pain by telling him that what he did now would help him in the long run. "Once I got that in my head," he says, "I looked forward to them coming."

About halfway through the 10-day process, an occupational therapist, Kristina Manniello, visited to make sure Moynihan could master the everyday tasks necessary to take care of himself. He passed with flying colors, and is expected to make a full recovery. In fact, Moynihan plans on shooting baskets with his grandson this summer and returning to his job as a custodian for the Holyoke Public School System.

Meanwhile, he's receiving outpatient physical therapy two times a week at HMC. "I have yet to meet a physical therapist that I haven't liked, either at home or at Holyoke Medical Center," he says. "The care I've received has been fantastic."

## >> HOME CARE 101

Most of us would prefer to be cared for at home when recovering from an illness, injury or surgery. That's possible with the help of a certified home health care agency like the Holyoke Visiting Nurse Association (HVNA), which has been serving Hampden and Hampshire counties and portions of Franklin County since 1905.

HVNA offers a wide range of services that promote independence, safety and quality of life in the privacy and comfort of your own home, including physical, occupational and speech therapy; skilled nursing; symptom and disease management; wound care; diabetes manage-

ment; infusion therapy; and hospice care.

The process starts with a referral from your doctor. But you also can arrange home health care services directly by contacting HVNA's Clinical Resources Department at 413.534.5691. The HVNA team will work with you and your doctor to develop a home care plan.

If you are enrolled in Medicare, check your plan for specific coverage. If you have Medicare Supplement Insurance (Medigap) or other health insurance coverage, inform your doctor or other healthcare provider to ensure that your bills are paid correctly. The HVNA also can help you research your eligibility.

# HOSPICE LIFE CARE BRINGS COMFORT TO FORMER SOLDIERS.

HOSPICE CARE IS SOMETHING THAT NO ONE— ESPECIALLY PROUD veterans—wants to ever need or think about. But the end of life is a reality, and Holyoke Visiting Nurse Association (HVNA) & Hospice Life Care, an affiliate of Holyoke Medical Center (HMC), can ease this most difficult of transitions for patients and their families.

Hospice Life Care provides compassionate care to people with a life expectancy of six months or less, making them as comfortable as possible and managing their symptoms so that their last days may be spent with dignity and in peace. Services are provided at home, or in assisted-living or long-term care facilities. Much of the hands-on work is done by Hospice Life Care, but it also involves a team of dietitians, social workers, volunteers and a chaplain.

Unfortunately, many veterans, spouses and even children of older vets don't know what hospice care is or that it's available. That's where people like Larry White, HVNA's veteran liaison, come in. White, a Vietnam veteran, says: "I'll walk up to a vet I've never met and we'll have a 15-minute talk, about our experiences, anything. He might not open up to another person, but he'll talk to me." As a result, White finds himself serving as a 24/7 information source, fielding phone calls from veterans and their families and friends.

Typically, hospice is noninvasive care. The focus is on the quality of the patient's remaining time, rather than trying to prolong life. "Care and comfort is the primary goal," says Steve Chevalier, R.N., who works with patients at the Holyoke Soldiers' Home, a state-sponsored facility where many vets receive care from HVNA & Hospice Life Care.

Since the goal of hospice is different from traditional medical care, so is the treatment. "A hospital is high-tech. We're low-tech," says Pam

Quirk, GCNS, B.C., CDONA, director of nursing at the Holyoke Soldiers' Home. "We provide more in the way of TLC. We have volunteers come in and read to patients. We don't have IVs sticking out of them. Instead, we swab their mouths, hold their hands, care for their skin, things like that."

While the number of hospice patients is on the rise at the Holyoke Soldiers' Home, there's still a learning curve for families. Says Quirk: "The biggest challenge we have is education. The families often wait too long to come to us. They wait until the last week [of the patient's life], when they should be looking at a six-month window."

As for the hospice workers, the emotional demands of the job can be high, but the HVNA staff soldiers on. "It's an ongoing learning process," says Chevalier of his calling; he has been working with terminally ill patients for 13 years. Christine Waldie, R.N., HVNA hospice director, confirms the commitment that her staff has to their profession: "We're a hospice provider, and we provide hospice care anywhere the patient calls home"—whether it's a traditional home or a place like the Holyoke Soldiers' Home, where HNVA & Hospice Life Care is the provider of choice for hospice patients.

It's clear that HVNA & Hospice Life Care is crucial for many patients—veterans and civilians alike. "Holyoke is very much committed to these patients, and to the level of care that's specific to each patient's needs," says Quirk. White, who has been with HVNA for seven years, concurs and is proud of the role he plays in the process. "They [HVNA] are absolutely committed to serving veterans," he says.

The We Honor Veterans Program has awarded Hospice Life Care a Level Two partnership, recognizing the commitment that HVNA has made to ensure that veterans have access to quality end-of-life care.



## SWEETE

## TRY THESE TIPS TO KEEP YOUR PIGGIES WELL AND PRETTY.

## **MASSAGE**

- Get your foot's circulation going with this trick: Prop one foot on your lap, grasp it with both hands, then slowly move your thumbs from the top of your toes to the bottom of your heel and back. Repeat for as long as you like.
- For added relief—and relaxation— while moisturizing, use your thumbs to apply extra pressure to your foot's ball and arch. Then squeeze your Achilles tendon with your hand, one leg at a time, for five seconds. You can repeat this technique up to three times.

## **MOISTURIZE**

- Want supple soles? Use an emollientenriched skin lotion daily. The American Podiatric Medical Association's (APMA) choice: Ureacin-10 Lotion. Just be sure to get rid of excess lotion in nails or between toes leaving it could encourage a foot infection.
- Another APMA tip: Before bed, lightly wrap cellophane around your entire foot to lock in moisture. By morning your feet will feel superbly soft.

## **PROTECT**

• Those "barely there" sandals may look sexy, but they don't offer your feet much covering. Avoid that pesky top-of-the- foot burn by applying a waterproof, oil-free sunscreen of SPF 15 or higher whenever you step out in the sunshine.

### SOAK

- Wash your feet daily with soap and lukewarm water, but also try an occasional foot bath to soften the soles and rejuvenate the soul. Fill a basin with warm water, and place it in front of a comfy chair. Then to add a little "something special," put in three to six drops of essential oils. For a relaxing soak, try lavender or rosewood oil; for an invigorating one, opt for tea tree, lemon or peppermint oil—or mix different oils to create your own personalized concoction.
- Soak your feet for at least five minutes—but feel free to relax for even longer!

## **SMOOTH**

- Slough away dead skin with a damp pumice stone or foot file (like Dr. Scholl's Dual-Action Swedish Foot File).
- For extra softening, you can rub an exfoliating scrub over your entire foot and lower leg, then remove the scrub with a damp towel.

## **PAINT**

- Remove old polish with non-acetone polish remover.
- Gently push back cuticles with a cuticle pusher or manicure stick, but never cut them. Cuticles provide a protective barrier against infection.
- Use a nail clipper to cut toenails straight across, then smooth the edges with an emery board. Don't round the edges too much, though, as this can lead to ingrown nails.
- Because polish locks out moisture, apply nail color only if your nails are healthy.



## PAIN, PAIN, GO AWAY!

How many times have you said, "Oh my aching feet"? If there isn't a specific reason for your pain—tight shoes, an injury—get your tootsies checked out by a professional, advises Walter Wolf, D.P.M., of Valley Podiatry Associates, PC., with offices in South Hadley, Springfield and Wilbraham. "Many people assume that it's OK for their feet to hurt, but you should evaluate why they hurt. If they don't get better with rest, seek appropriate medical attention."

Heel pain is a common complaint, according to Dr.

Wolf. Fortunately, "there are lots of treatment options, starting with orthotics." Another option: a breakthrough treatment called shockwave therapy, in which a high-intensity sound wave is delivered to the tissues of the body. This noninvasive procedure, which can be performed in a doctor's office and does not involve anesthesia, can be used to treat heel pain, inflammation and many other foot problems. "Essentially, it stimulates the body's healing response," says Dr. Wolf.



## CARDIAC BOOT CAMP

A NEW PROGRAM
KEEPS HEART
PATIENTS AT HOME
AND AT EASE.

## CONGESTIVE

heart failure
(CHF) patients walk
a fine line. They have to
be extremely careful after
they're discharged or they'll
wind up right back in the hospital.
And that's what Holyoke Medical
Center (HMC) staff members were
seeing all too often.

Members of the Holyoke team—including
Jean Smith, clinical liaison for the Holyoke
Visiting Nurse Association (HVNA), and Cherelyn Roberts,
HMC manager for the STAAR (State Action on Avoidable
Rehospitalizations) program—wondered what they could do to help
these people. The result: CHF Boot Camp, a five-day program designed to
teach patients how to manage their condition so that they stay out of the
hospital. The program, exclusive to Holyoke Medical Center, is about a year
old and has had 14 patients so far.

"Many patients going home need a little extra help to get them over the hump," says Roberts, noting that prime candidates for CHF Boot Camp are people who live alone or who have a history of re-admission for the disease. Cognitive function also plays a key role in determining suitability for the program. "Patients have to remember what you're telling them and what they need to do at home," Smith points out.

Here's how the process works. CHF patients are cared for at HMC until they are ready to leave the hospital. During their inpatient stay, suitability for Boot Camp is determined. Eligible patients are then released to one of several local rehabilitation facilities, where staff members have been trained in the Boot Camp curriculum by the HVNA.

Day 1
focuses on
understanding your
medications.

Day 2 is spent learning

about the signs and

symptoms of CHF. "It's about knowing if you're having a problem," says Roberts, who points out that gaining too much weight is a major red flag. "Monitoring weight is an important part of the self-management process for patients with CHF," she notes.

believes this is a crucial day because many people know a lot less about nutrition than they think. "Day 3 can be a real eye-opener," she says. "Nutrition is a huge piece of their treatment. The

Day 3 concentrates on managing your diet. Smith

real eye-opener, she says. Nutrition is a nuge piece of their treatment. The sodium content of food can be much too high, for example, and people may not realize it."

Day 4 is about the importance of physical activity and exercise.

Day 5 brings it all together and prepares patients for their return home. "By the time they leave," says Roberts, "they should be over the hump." (The HVNA also helps to ease the transition, providing care at home until patients no longer need their services.)

The goal of the program, according to Roberts, is to "improve patients' quality of life and keep them at home, where they want to be. A key to this program is self-management and making patients more of a partner in their own care." The Boot Camp is proving a success; of the 14 people who have gone through the program, 10 were not rehospitalized within 30 days. That's a statistic to be proud of!

## PAIN-RELIEVER RUNDOWN is the one you're taking right for you?

FIRST, THE GOOD NEWS: ALL FOUR OF THE POPULAR over-the-counter products—that's acetaminophen, acetylsalicylic acid (aspirin), ibuprofen and naproxen—are largely safe, effective and economical, rarely causing side effects. In addition to relieving pain, all four also reduce fever. So...

what's the difference? In most cases it's simply a matter of preference. But as the Food and Drug Administration pointed out when it called for label warnings on these products, no medicine is risk-free. Here's a quick primer on how these four choices differ.

	ACETAMINOPHEN	ACETYLSALICYLIC ACID (ASPIRIN)	IBUPROFEN	NAPROXEN
BRAND NAMES	Tylenol	Bayer, St. Joseph	Advil, Motrin, Nuprin	Aleve
HOW IT WORKS	Acetaminophen blocks pain messages to the brain.	These nonsteroidal anti-inflammatory drugs (NSAID) block hormone-like substances called prostaglandins that cause pain by irritating nerve endings.		
USED MOSTLY FOR:	<ul> <li>headaches</li> <li>muscle aches</li> <li>toothaches</li> <li>back pain</li> <li>arthritis</li> <li>fever</li> </ul>	<ul> <li>mild to moderate pain</li> <li>cardiovascular</li> <li>protection (check</li> <li>with your doctor)</li> </ul>	<ul><li>headaches</li><li>toothaches</li><li>back pain</li><li>menstrual pain</li><li>minor injuries</li></ul>	<ul><li> arthritis and joint pain</li><li> menstrual pain</li></ul>
MAY BE A GOOD CHOICE IF YOU:	<ul><li> are allergic to aspirin</li><li> have stomach or intestinal problems</li></ul>	want to prevent cardiovascular disease	want to cut your risk of Parkinson's disease	<ul><li>have muscle aches from sports activities</li><li>prefer to take fewer pills</li></ul>
RELIEVES SWELLING?	No	Yes	Yes	Yes
DON'T TAKE IF YOU:	<ul> <li>have kidney or liver disease</li> <li>consume three or more alcoholic drinks daily</li> <li>also take another product with acetaminophen</li> </ul>	• are under 16	<ul><li>have kidney or liver disease</li><li>have heart disease</li></ul>	<ul><li>have a blood disorder</li><li>take a blood-thinning medicine</li></ul>
		<ul> <li>are pregnant (except on doctor's orders)</li> <li>are allergic to aspirin or other pain relievers</li> <li>have inflammatory bowel disease or experience stomach or intestinal bleeding</li> </ul>		
FELL YOUR POOTOR IT TOURS ALSO TAKING:	other cough, cold, pain or allergy medications	<ul><li>antidepressants</li><li>blood thinners</li><li>other salicylates</li><li>other NSAID medications</li></ul>	<ul><li>antidepressants</li><li>ACE inhibitors</li><li>blood thinners</li><li>lithium</li><li>diuretics</li></ul>	<ul><li>steroids</li><li>other over-the-counter cough, cold or pain medications</li></ul>

# 10 TIPS TO GUARD AGAINST IDENTITY THEFT



## **EVERYTHING COMES OUT ALL RIGHT**

in the 1946 movie A Stolen Life, in which Bette Davis plays identical twins, one of whom steals the other's identity. But if a thief steals your life, no happy ending is assured.

"Identity theft is a serious crime with serious costs for victims," warns Massachusetts Attorney General Maura Healey's "Guide on Identity Theft for Victims and Consumers." A hacker who gets hold of your personal data can open fraudulent credit card accounts and run up bills in your name. Your finances, credit—and reputation—could suffer for years. The "Guide on Identity Theft" warns that "victims of identity theft may lose significant money and time...affecting their ability to obtain loans, get approval for credit cards" and more. To avoid this fate, heed these do's and don'ts:

DO make sure a Web page is secure—that is, professionally encrypted against hackers—before entering personal data. Encrypted pages have Web addresses that begin with "https" ("hypertext transfer protocol secure").

DO monitor bank statements for unauthorized withdrawals. The "Guide on Identity Theft" also recommends that you get an annual credit report to check for suspicious activity. Under federal law, the credit-monitoring companies must send your report free on request once a year (visit annualcredit report.com). Scour the list of credit lines and make sure none of them are open without your consent.

DO stop credit card solicitations. Banks and other companies you're doing business with sell your name and address to direct-mail marketers, which use that information to mail you credit card offers. These mailings are dangerous because someone else could intercept them and set up a fraudulent account in vour name. The "Guide on Identity Theft" recommends destroying pre-approved credit card solicitations, and reducing them by going to optoutprescreen.com.

DO shred outdated documents containing personal data. This includes receipts, insurance forms, physician statements, checks, bank and credit card statements, and expired charge cards. If available, use a crosscut shredder, which cuts paper into smaller pieces than a cheaper strip-cut shredder. (Shred the labels from used prescription bottles too.)

DO consider an identity theft protection service. For a monthly fee, companies such as LifeLock and AllClear-ID will monitor your data on an ongoing basis, alert you if your data is breached and help you recover your loss.

DON'T email personal data. If a company you're doing business with requests your Social Security number, credit card account number or other personal data, give the information through the company's secure online portal or over the phone. But first, call the company. Ask why they need your information and how they plan to use it. Also, don't reply to an email from an address you don't recognize.

DON'T fall for unbelievable deals.

Often, hackers masquerade as established retailers. They send falsely branded mass emails inviting you to "click here" for an outrageous discount, but the link activates a "spyware" program that intercepts your data.

ODON'T carry sensitive information. OThe "Guide on Identity Theft" urges you to avoid keeping your Social Security card, birth certificate or nonessential credit cards in your wallet or purse. Store them in a strongbox or other secure place to prevent loss or theft.

DON'T apply for credit at the point of purchase. Some chain retailers offer deep discounts on merchandise if you apply on the spot for their branded credit card. Discounts are great, but keep in mind that in such a situation you're giving a stranger (the salesperson) access to your information. Also be aware that opening that extra account could lower your credit score.

DON'T access even secure sites in public or use public ATMs or computers. In many public places, the WiFi typically is unsecure, and someone could be spying as you strike those keys. When an ATM is outdoors or in a supermarket, hackers can attach skimming devices to them that pick up your account and routing numbers. Use only the indoor ATM at your local bank. The "Guide on Identity Theft" warns that hackers can install software on public computers that logs your keystrokes.

# THE MISSING TO THE Watermelon

THIS JUICY GIANT CAN QUENCH YOUR THIRST, SATISFY YOUR SWEET TOOTH AND CONTRIBUTE TO A HEALTHY DIET TOO.

HAVE YOU EVER WONDERED HOW much of a watermelon is water? The delectable fruit's name, it turns out, is no lie—it's 92 percent. (By contrast, you're only about 50 to 65 percent water.) But many of us find it 100 percent delicious. The summertime staple was first harvested nearly 5,000 years ago in Egypt. Today, luckily, you can find it in just about any food store.

## **POWER UP**

Hydration is watermelon's best nutritional asset, but the sweet-tasting fruit also provides a healthy dose of vitamins. A

two-cup serving supplies your body with 30 percent of your daily value of vitamin C and 25 percent of vitamin A. It also contains vitamin  $B_6$ , potassium, magnesium and phosphorus. Eating watermelon is a guilt-free way to satisfy your sweet tooth too. Its water content makes it quite filling, and it can boost your energy while reducing your risk of kidney problems and heart disease.

## DID YOU KNOW?

Watermelon is the most consumed melon in the country in terms of weight, and the U.S. ranks fifth among nations

production.
(China's the runaway champ, and among U.S.

states Florida is the leader.) The U.S. was also home to the heaviest watermelon ever, according to the website Guinness World Records. In 2005, Lloyd Bright of Arkadelphia, Arkansas, grew a colossal watermelon that weighed in at an incredible 268.8 pounds!

## BUY/STORE/SERVE

Pick a watermelon that feels solid and heavy for its size. It should have little or nothing in the way of bruising, cuts, dents or other imperfections. But that big yellow spot on the bottom is OK; it's caused by the sun and shows that the fruit has ripened, or started to ripen.

Believe it or not, watermelons should be washed. The Food and Drug Administration recommends washing watermelon the way you do all fruits and vegetables—whether you plan on peeling it or using the rind. This is so that bacteria and dirt aren't transferred when you cut it. Store watermelons at around 55° F. Whole melons can stay at room temperature for seven to 10 days, while cut watermelon can be refrigerated for three to four days.

Slice it, dice it, cube it, chunk it or even juice it! There are myriad options when it comes to serving watermelon. You can even freeze the juice into ice pops that the kids will love. No matter how you consume it, watermelon is sure to benefit your body and please your taste buds.



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