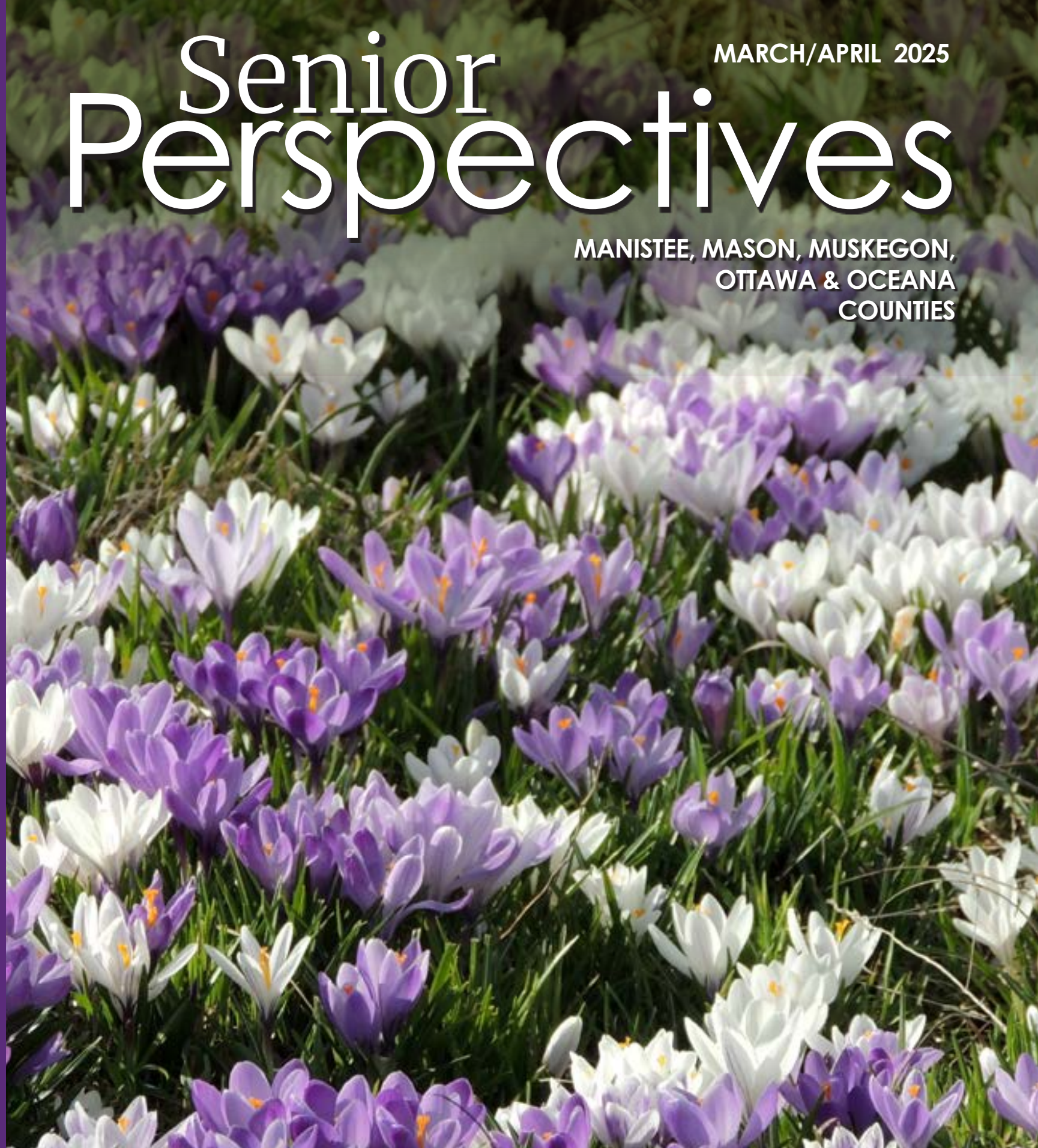


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Senior Perspectives

MARCH/APRIL 2025

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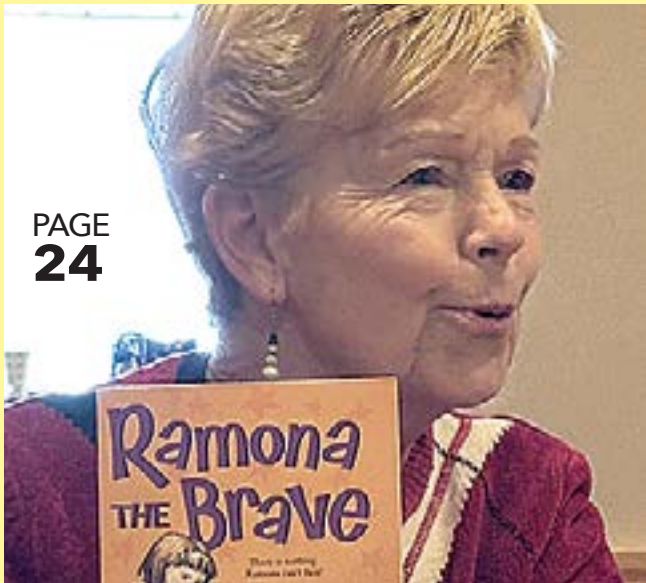
spring



PHOTO BY GLENN RUTGERS



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COVER PHOTO & SPRING PHOTOS BY GLENN RUTGERS

Season of Renewal

Ahh, Spring! After a cold and snowy winter, the arrival of Spring with its vibrancy found in the budding of trees, blooming of flowers, sunshiny days and the return of birds that wintered elsewhere, is a cause of celebration.



BY LOIS
TOMASZEWSKI
EXECUTIVE
EDITOR
SHORELINE
MEDIA

While all seasons have their moments of glory and beauty, spring goes beyond that by refreshing the soul. Holidays will be marked in various ways, people will venture out of the places where they have wintered and our spirits will be lifted. We have survived snow, ice and gale-force winds. We have weathered Mother Nature's worst personality and are ready to enjoy the benefits of her other sides - especially spring.

While I love experiencing the four seasons, spring and fall are my favorites. In one, the world is winding down (fall) and in the other, the world is awakening to beauty and possibilities. Personally, I like this season of renewal, ready to welcome those stalwarts of my



life that have made it through the doldrums and look ahead to adventures in which a parka is no longer needed.

It's an extension of our "do over" that we get with a new year. When Spring arrives, it is time to make plans for the rest of the year and reconnect with the earth, nature, family and friends.

In Spring, gardens are envisioned and the foundations laid. Color is abundant, from the crocus, daffodils and tulips to the wild flowers found in the forests. Lake Michigan looks less angry and the sky is its brilliant blue - at least until the April showers usher in the May flowers.

As we head into this season, it's OK to let out a breath and inhale the season of new life. Enjoy the buds on the trees that will eventually yield fruit. Rejoice in your faith. Gather with your friends and family and welcome spring - with open arms and Easter bonnets.



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Social Security and Scam Awareness



BY
HILLARY
HATCH -
PUBLIC
AFFAIRS
SPECIALIST

Social Security imposter scams continue to be widespread across the United States. Scammers use tactics to deceive you into providing sensitive information or money. If you receive a suspicious letter, text, email, or call, do not respond.

We will NEVER:

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- As part of our enhanced security when accessing your personal my Social Security account.

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We encourage you to report suspected Social Security imposter scams — and other Social Security fraud — to the OIG’s website at oig.ssa.gov/report. You can find more information about scams at www.ssa.gov/scam. Please share this information with your friends, family, and colleagues to help spread awareness about Social Security imposter scams.

I Spy



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The answer, along with winners’ names will be announced in the next issue. In the last issue, the snowflake was hidden in the spare tire of the ORV vehicle on page 21. See page 34 for winners.

Good start important to spiritual success



BY REV.
WILLIAM
RANDALL

Horace said, “What’s well begun, is half done”. Other brilliant minds have seen the value of a good beginning. We hear the saying, “The early bird gets the worm”.

If a good beginning is important in secular pursuits, how much more important is a beginning that will assure us of spiritual success. David the Psalmist said, “O God, thou art my God, early will I seek thee.” Robert Murray McCheyne said, “I ought to pray before seeing anyone.”

We need to seek the Lord early. If we don’t seek the Lord, the devil will start taking over before we realize it.

Our morning prayer can be a time to honor God by giving to him the first portion of the day. An Old Testament principle was to give God the first fruit of every harvest. It was a way of acknowledging that everything was from God and ultimately belonged to him.

We should think this way about the hours of our days. God is pleased when we give him time at the beginning of the day instead of just a few minutes that might be left at the end of the day.

Our morning prayer can be a time to outline the day’s schedule. In the making of our plans, we need to ask God’s will and not our own.

After seeking God’s guidance, we need to commit the plan to God and seek his blessing. Requests should be made according to the needs of the day.

When we plan our activities, our thoughts go to the people we will meet and be involved with during the day. Their needs also should be our concern. The witness of our lives to other people should be of utmost importance. Will they see Jesus Christ in our lives? We need and things begin to fall into place.

We need to pray as did the psalmist, “Open thou mine eyes, that I may behold wondrous things out of the law.” Then God’s Word becomes a lamp unto our feet and a light unto our path.

Our morning prayer can help us begin the day with confidence.

After seeking God’s will, you have a purpose and sense of direction. You don’t think of killing time. Even the most routine job is bearable when you have a purpose and know that God is with you.

If one’s employment doesn’t offer opportunities for fulfillment, there are unlimited opportunities during free time. There is always the challenge of being a blessing to someone if Christ lives in you.

When you begin with prayers, you know that God will bless your day because Jesus said, “Ask and is shall be given you, seek and ye shall find, knock and it shall be opened to you; for everyone that asketh receiveth and he that seeketh findeth and to him that knocketh is shall be opened.”

If we begin our day with God, as its close we can look back and praise God for his faithfulness in answering our prayers. A good beginning will assure you a good ending. Try it!

Rev. William Randall resides at Village at the Oaks in Muskegon and is the Associate Pastor at Family Bible Church in Muskegon





BY
CHRISTINE
WISTROM

Let's face it: if you're alive, then you're getting older. You would think that would mean most of us would be a bit more accepting of older adults. After all, we're all on the same journey. Unfortunately, there are many ways that our society sends a strong message that getting old is a bad thing. It's a time when we become wrinkled, hard of hearing, can't see clearly and are less productive. Ageism is a way of thinking about older people and stereotypes we have related to aging. Quite often it's something we do while unaware that we're doing it. It may be as simple as treating older adults as if they all have dementia, or it may be in the comments, jokes and other negative messages we have

about aging. Ageism is one of the most widespread forms of prejudice in America, and unfortunately, it's also one of the most socially accepted. Ageism can result in poor health care, like when an older adult is denied treatment options based on how old s/he is, or having depression go undiagnosed due to the belief that all older adults are depressed. Sometimes older people are told that pain is a normal part of aging while a younger person would receive pain control medications. Pain is consistently undertreated in elderly patients. In the healthcare industry, elderly individuals are less likely to be included in clinical trials and are less likely to receive preventive care. They've been taught to think that all older adults are depressed, crabby and unhappy...so much so that when we have a bad day, even we

believe it's normal! Prejudice in the workplace is not uncommon when you're elderly. If you don't retire at 65, people begin to question whether you're still capable of doing the job. You may not be taken as seriously because of the belief that all older people struggle with memory issues. Ageism in advertising is common. Think of how many commercials you've seen lately that show an older person in a positive manner. Usually it's targeting how they need life insurance so they don't leave their children responsible for their financial debt, or how they've fallen and can't get up! Age affects each of us differently. We age at different rates. We are all unique. Yes, some people will develop dementia or become deaf or blind with age. Some might become incontinent or show other signs of age-related disorders...but

not everyone! Ageism limits us and encourages us to deny a time in our lives when we can contribute so much! Don't think of old age as a time of loss. Think of it as a normal part of life. Not when we forget all we knew but recognizing that we have a lifetime of experience and are more certain of ourselves. We are each distinct and extraordinary...just as we were when we were younger. Let's celebrate older adulthood, not as a time when things are reaching an end but recognizing the experience and wisdom that have brought us this far into the golden years! *Chris is a Gerontologist and a former Long-Term Care Ombudsman. As an Independent Living Specialist at Disability Network Lakeshore, she specializes in assistive technology, emergency preparedness planning, and service dog training.*

ASK THE DOCTORS:

Bird flu has symptoms similar to standard influenza virus



BY EVE GLAZIER,
M.D. AND
ELIZABETH KO,
M.D.

Hello, dear readers, and welcome to a bonus letters column. Bird flu is in the news these days and, as we are also in the midst of an active "regular" influenza season, we are fielding quite a few questions on the topic. We will take this opportunity to remind you it's still not too late to get the flu shot and the COVID-19 vaccine. Being vaccinated lowers your chances of infection and of being hospitalized if you do become ill. And now, onward to your letters. -- A reader who recovered from a bad case of a respiratory illness wondered how she can know which virus she had. "We keep chickens, and when I got sick with the flu after Christmas, my husband asked how I knew it wasn't bird flu," she wrote. "Are there different symptoms than with the regular flu?"

The symptoms of H5N1, also known as bird flu, and those of the standard influenza virus are similar. However, the respiratory symptoms of bird flu can be more severe. It can also cause teary or watery eyes, as well as conjunctivitis, or pink eye. Diagnosis is through lab analysis of secretions swabbed from the nose or throat. People who spend time with birds are at higher risk of H5N1. Anyone who suspects they may have come into contact with an infected animal can contact their health care provider or their local health department. -- We have received several letters gently taking us to task for being imprecise when we write about medical professionals. This includes one from a reader in Virginia: "In a column about burning mouth syndrome, you said it is common for 'a doctor and a dentist to work together.' But 'doctor' could include a Ph.D. degree or a divinity degree," she wrote. "Therefore, the word 'physician' should have been used instead." Thank you to everyone

who wrote to remark on this. You make an excellent point, and we will be more precise in future columns. -- In a column about vitamin D, we discussed the process by which the body manufactures the nutrient through exposure to sunlight. This prompted a reader to ask about how to do this safely. "For those of us living in Southern California, at what time of day is it best to expose our skin to the sun in order to get sufficient vitamin D, and for how long?" she asked. Midday sun is most effective for vitamin D production in any region. And because the needed exposure is brief, the risk of sun damage is

lessened. For those with light skin, five to 15 minutes of full sunlight on bare arms, legs or torso a total of two to three times per week is adequate. Due to the protective effects of melanin, darker skin requires longer exposure. People with a history of skin cancer should rely on diet and supplements to get their daily allowance. As always, we thank you for taking the time to write. Your questions are often fascinating, and your close reading of the columns, along with the subsequent comments and suggestions (and occasional corrections) are a real pleasure.

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- Have a friend hold you accountable

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Grief



BY LISA M. TYLER
COMMUNICATIONS
DIRECTOR
SENIOR RESOURCES

Grief – defined by the Cambridge English Dictionary as “very great sadness, especially at the death of someone.”

she had been vibrant, happy, and active just a day before the stroke.

My grief has been overwhelming at times, and writing this just two months after she died, I’m just starting to go a couple of days without crying. I’ve described myself as feeling ‘unmoored’ – a boat no longer tied in place. My mom was always there, and I called her often – to share some big news, to ask for advice, and sometimes just to share some simple thing about my day or about her grandkids. Not being able to pick up the phone and hear her voice is what I miss the most – even more than physically seeing her and hugging her.

I’ve always been an emotional person, as was my mom. We were the ones crying at sad movies, becoming emotional over a thoughtful gift, so my crying bouts aren’t unusual. But not crying is also OK. We all process grief differently.

Most of us have experienced grief at some time, and certainly by the time we are older adults. It’s one of the hard parts of aging – knowing that death will come to family and friends. Logically, we know that everyone dies. In our hearts, however, we are often unprepared. I know I was when my beloved mother died unexpectedly in November.

Despite being 85, we were not prepared to lose Mom so quickly. A stroke and ultimately a massive brain bleed took her from us, when

There have been said to be five stages of grief: denial, anger, bargaining, depression, and acceptance. These stages aren’t linear – you can go from anger to bargaining and back to denial, all in the course of an hour. (Ask me how I know.) There also isn’t a timetable for grief. When I commented about crying every day, my husband compassionately said, “If in a couple of years you’re crying every day, then maybe you should be concerned. Right now, that’s normal.”

Tips for Healing

- 1. Allow Yourself to Feel:** It’s okay to cry, to scream, or to simply sit in silence. You may cry, but you may not. Don’t feel guilty about any reaction (as long as it isn’t harmful to you or others).
- 2. Seek Support:** You may talk to friends and family, join a support group, or seek professional help; however you find support, sharing your feelings can provide comfort and perspective. I find that talking about my mom, especially to others who knew her, provides a lot of comfort.
- 3. Keep to a Routine:** Establishing a daily routine can bring a sense of normalcy and control during a time when everything feels chaotic. Because Mom died before the holidays, the busyness of Thanksgiving and Christmas provided comfort and routines. I needed to decorate, bake, and shop. I had many thank you notes to write on behalf of our family. That all helped me focus and put one foot in front of the other on days when I just wanted to stay in bed.
- 4. Honor Their Memory:** Find ways to celebrate the life of your loved one. There are all kinds of ways to do this. What we did immediately included setting

up memorials in Mom’s name, sharing stories, and giving each other Christmas gifts that reminded us of her.

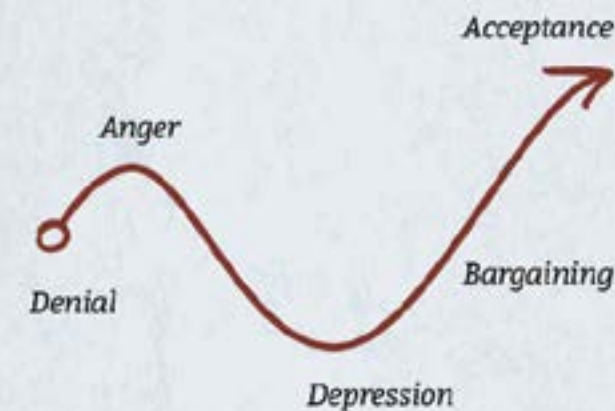
- 5. Take Care of Yourself:** Grief can take a toll on your physical health. Make sure to eat well, exercise, and get enough rest. Self-care is crucial during this time. I found I took naps because I wasn’t sleeping well at night, and I tried to alleviate the guilt I felt about that by reminding myself that sleep was essential to my health.
- 6. Be Patient:** Healing is not linear. There will be good days and bad days, and that’s okay. Give yourself the grace to heal at your own pace and give others the same understanding if they don’t grieve the same way you do.
- 7. Remember that Others are Hurting, too.** A lot of attention was given to me and my siblings,

and our children since we lost our mom/grandma. Not as much was given to our husbands, who also loved their mother-in-law and were deeply saddened by her death. Aunts and uncles lost their sister, cousins lost a beloved aunt, friends lost someone important to them. Sharing and recognizing that shared grief can provide another level of comfort when you realize how loved someone was.

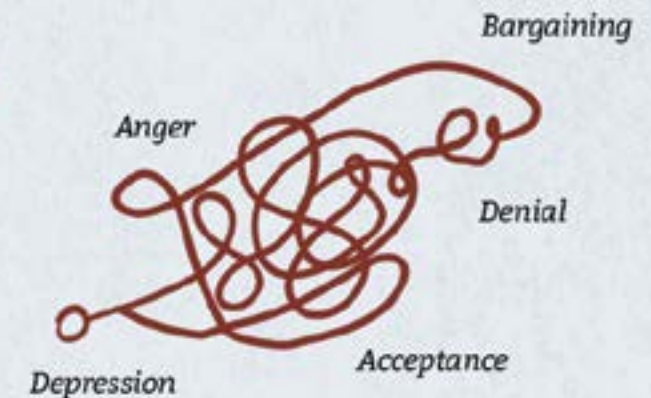
I lost my dad in 2008, so I know that grief is a long journey and

Stages of Grief

The experience you expected:



The experience you got:



it’s one that doesn’t really end. Acknowledging that and the sadness that comes – sometimes randomly – reminds me of this quote, said by Queen Elizabeth to British families who lost loved ones in the 9/11 attack:

“Grief is the price we pay for love.”

And how lucky I was to be loved beyond measure by my mom and my dad. Their legacy is their family. And love. And I will forever treasure and honor that.

Lisa Tyler is the communications director for Senior Resources. Lisa is also an alumnus of MSU, enjoys scrapbooking, reading, travel, and being involved in her community. She is treasurer of the Muskegon Area Intermediate School District Board of Education, vice president for the board of CALL 2-1-1, board member of the Muskegon Rotary Club, and member of the Greater Muskegon Service League.

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Walk Safely



BY
JACK R.
WYDECK

What if I were to say that you can take one pill that will improve your mood, help you lose unwanted pounds, improve your heart health,

reduce your risk of chronic diseases like type 2 diabetes, improve your sleep, alleviate joint pain, delay the onset of varicose veins, stimulate your digestive system, boost your immune system, keep your bones strong, enhance your creativity, and increase your energy and longevity. Would you buy it? The answer

hopefully is No. No pill, ointment, cream, lotion, or elixir could do all of these things.

The one thing you can do that will do all of these things is walk. Simply walk.

To experience health benefits, you don't need to walk any certain distance every day, or a specific number of steps. The American Heart Association recommends 30 minutes of brisk walking, 5 days a week. However, every step counts, so even short-distance walks are beneficial.

Walking is something the human body is designed to do. You don't

need special skills or talents, or any expensive equipment. You just need a good pair of walking shoes. However, that doesn't mean it comes without risks. Emergency medical service agencies in Muskegon County respond to 25 vehicle vs Pedestrian accidents every year.

A report looking at vehicle fatalities from 1975-2021, published by the Insurance Institute for Highway Safety (IIHS) in 2023, showed that around 15% of the people who are killed in vehicle accidents were pedestrians. With a deep dive into the numbers, they

found the average victim is a male between 45-69 years of age. The accident likely occurred between 6 pm and Midnight, on an unlit, urban, arterial roadway, with a speed limit of over 40 MPH. If the accident involves an SUV the risk of a fatality increases by 81%.

The Centers for Disease Control (CDC) found that in 2021 there were 104,000 emergency department visits for non-fatal injuries. They found that 49% of the Vehicle vs Pedestrian accidents, involved the use of alcohol.

Community and car manufacturers are beginning to

make changes to mitigate the risks.

Communities can take steps to make themselves safer. Having and maintaining sidewalks, increasing street lights, lowering speed limits, and enacting cell phone use laws help make sharing the roads with pedestrians safer.

Drivers may not be able to see a pedestrian on the side of the road, they may not expect someone on the side of the road, but vehicles can be designed to be safer for pedestrians. Even though SUVs are more popular and are getting bigger every year, crash avoidance technologies that detect pedestrians and automatically apply the brakes before an impact help reduce the severity of injuries. IIHS found that vehicles with those technologies have a 27 % lower rate of crashes.

Pedestrians can take some easy steps to make themselves safer. It is important to understand the risk

and follow these tips to make sure you are safe when you are out on the roads.

- 1) When available use the sidewalks or pathways. When possible keep yourself away from vehicles.
- 2) If you are walking on the road, walk against traffic. This way you can see the cars coming at you, and get out of the way if you have to.
- 3) Cross at crosswalks or intersections only, this is where a driver should be expecting someone to be.
- 4) When crossing the road, be sure to Stop, and look both ways.
- 5) Avoid using electronics like earbuds which can cause distractions.
- 6) Avoid using alcohol. Don't go walking after you have been

drinking, you need to be able to react if you are in a dangerous situation, and alcohol will slow your reaction time.

- 7) Increase your visibility by carrying a flashlight, or wearing reflective clothing. Make your presence known to all the drivers on the road.

We made it through another Michigan winter. This is the tax we have to pay to live in Michigan, and we get rewarded with amazing spring days. So, get outside and listen to the world come out of hibernation, and see the overwhelming beauty of nature as it comes back to life.

Walking has several health benefits and is undoubtedly good,

but be sure to talk to your healthcare professional before you start any new physical activity. If you get outside and decide to try walking for fun, make sure you are doing it safely.

Jack has been an active member of the Muskegon Charter Township Fire Department for 11 years. He is a proud father of 2 teenage daughters and enjoys long walks with his Boxer puppy (Sisco). He can be reached at jack.wydeck@mcd911.net with any questions.



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Tips to make soup more nutritious

Soup is a dish that wears many hats. When the weather becomes chilly, people often turn to soup to warm themselves up from the inside out. Soup, especially when soup is paired with a favorite sandwich, also can be a simple and light meal when one doesn't want to spend too much time in the kitchen. Soup has been heralded as a remedy as well, a reputation that dates back thousands of years. In the twelfth century, Egyptian Jewish physician Moshe ben Maimonides prescribed chicken soup as a treatment for respiratory tract issues. And Penn Medicine suggests eating soup while ill is a good idea because the meal is nourishing, easy to digest and often full of nutritious components.

People may wonder what they can do to tweak their favorite soups to make them even more nutritious, as many modern soups have gained a reputation as being sodium-heavy. These ideas can

give soup a powerful boost.

- Use a higher ratio of vegetables in the soup when compared to meats and grains. Vegetables are notoriously high in nutrients that the body needs to stay healthy, including antioxidants and vitamins.

- Make your own soup stock from fresh ingredients. Doing so helps retain control over what goes into the soup, helping to reduce potential additives or other ingredients like sugar and sodium.

- Vary the color of the vegetables. Aim for vegetables of at least three different colors. The colors of the vegetables often correspond to the nutrients and phytochemicals they contain. For example, carrots are high in beta-carotene. Beta-carotene converts into vitamin A, which is necessary for eye health, healthy skin and a strong immune system.

- Replace the cream in soups with healthier ingredients. Soups that are cream-based tend to be loaded with calories and saturated fat. Instead, use Greek yogurt at the end (to prevent curdling) or even low-fat cottage cheese to amp up the protein content and give the soup a creamy consistency without the fat. Silken tofu or even a vegetable purée made from potato and cauliflower can add creaminess as well.

- Swap meat for lean proteins in the soup. Lentils, for example, are a plant protein rich in flavor and nutrition. According to UC Davis Health, lentils have about 18 grams of protein per cup and also are high in fiber. Relatively inexpensive, lentils also can help keep meal budgets in check. Alternative legumes also can work in soups, as can seafood or lean poultry.

- Add texture to the soup. Pumpkin seeds or flax seeds have taste and

texture, and can be a healthier option for topping soups over buttery croutons or crackers.

- Keep ingredients “whole” in the soup. Lean on whole grains, fibrous vegetables, fresh herbs, and lean meats to build a well-rounded soup that's bursting with nutrition.

- Add some turmeric and ginger. If the flavor profile allows, incorporate some fresh turmeric and ginger to the soup. Health magazine says these ingredients are part of the same plant family and have been used in traditional medicine in India and China for centuries. Both are known for reducing inflammation and alleviating symptoms of digestive disease.

Experiment with different ingredients to create soups that are not only delicious, but nutritious as well. TF251583



Warm up with Irish stew this St. Patrick's Day

Nacho flavors run the gamut from Latin-inspired to chili-covered to everything in between. These “Outrageous Barbecued Nachos,” courtesy of “Virgil's Barbecue Road Trip Cookbook” (St. Martin's Press) by Neal Corman, pair the smoky flavor of slow-cooked barbecue with the zip of some nacho standards like jalapeño peppers and cheese.

Irish Guinness Stew with Lamb 6 servings

8 cups lamb or beef stock; divided	3 cloves of garlic, minced
1 cup pearl barley	3 large carrots, peeled and roughly chopped
3 lb. lamb shoulder, cubed	12 fluid ounces Guinness stout
Salt, to taste	1 bunch fresh parsley
Freshly ground black pepper, to taste	1 bunch fresh thyme
3 tablespoons oil	1 bunch fresh rosemary
1/2 cup unbleached all-purpose flour	3 large potatoes, peeled and cubed
4 stalks of celery, washed, trimmed and chopped	2 teaspoons cornstarch
2 large yellow onions, peeled and chopped	4 teaspoons water

1. In a medium saucepan set over medium heat, bring 3 cups of stock to a boil; add barley. Reduce heat to low and gently simmer for 20 minutes. Set aside.
2. Meanwhile, pat the meat dry with paper towels. Season the meat with salt and pepper. Heat the oil in a 6-quart Dutch oven. Brown the meat on all sides over medium-high heat. Using a slotted spoon, remove the meat from the pot. Sprinkle flour over the meat, shaking off any excess; set aside.
3. Add the celery, onions, garlic and carrots to the pot and saute until onions are soft and translucent. Add Guinness and deglaze the pot, scraping up all the caramelized bits on the bottom and sides of the pan.
4. Chop the leaves of the parsley, reserving the stems. Tie the parsley stems and several sprigs of thyme and rosemary into a bundle; drop the bundle into the pot. Chop the remaining thyme and rosemary; set chopped herbs aside.
5. Return the meat to the pot. Add the potatoes, barley and enough stock to cover the meat and vegetables. Bring to a boil over medium heat. Reduce heat to very low and simmer for 2 to 3 hours, or until meat is fork tender. Stir occasionally, adding remaining stock as necessary.
6. Check seasoning; adjust to taste. Stir in chopped parsley, thyme and rosemary. Mix cornstarch in water and stir. Add to stew, stirring to incorporate. Cook over low heat for 5 to 10 minutes or until stew thickens. Ladle into bowls. Serve with crusty bread and of course more Guinness if desired.



Smoked Gouda and Roasted Red Pepper Grilled Cheese 4 servings

8 1/3- to 1/2-inch-thick slices Pullman bread	1 medium jarred roasted red pepper, drained, dried and thinly sliced
4 ounces smoked gouda, very thinly sliced with a cheese slicer	2 cups baby arugula
4 slices muenster cheese (about 4 ounces)	6 tablespoons unsalted butter, softened

1. Lay out 4 slices of the bread on a work surface. Layer each with some of the smoked gouda, 1 slice of the muenster, a thin layer of sliced red pepper (about 2 tablespoons), 1/2 cup of the baby arugula, and another layer of smoked gouda. Close the sandwiches with the remaining bread. Thinly and evenly spread the butter on both sides of the bread using 1 1/2 tablespoons of the butter for each sandwich.
2. Place 2 sandwiches into a medium nonstick skillet over medium heat. Cover the skillet with a lid and cook until the bread is evenly golden brown, about 2 minutes. Flip, cover again and cook until the bread is golden brown and the cheese is visibly melted, about 2 minutes more. Repeat with the remaining sandwiches.



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Part 2 - Our Pulmonary System

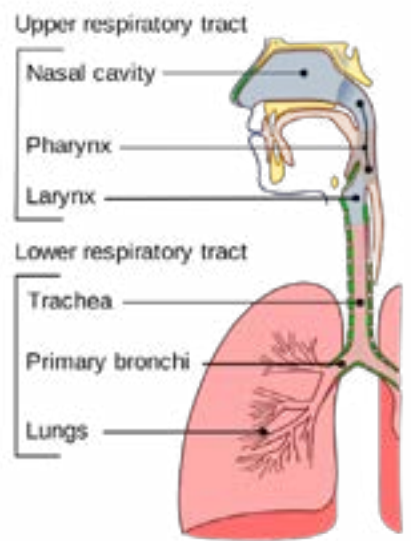


BY HOLLY
LOOKA-
BAUGH-DEUR

Anyone in health care will tell you that a fundamental concept in managing medical emergencies is to think “ABC” – Airway, Breathing, Circulation – which is why the first two systems we are covering in 2025 are Cardiac Conditions (Part I of Health Priorities series) and Pulmonary Conditions – Part II. The focus of today’s read is to identify the top 5 pulmonary conditions plaguing older adults as well as to list and describe red flags, screening methods, self-assessment tools and key prevention strategies for great pulmonary health. Respiratory issues can be very limiting and debilitating to activity and overall happiness, often preventing us from living our best life. With almost a quarter of the United States’ population expected to be 65 or older by 2060, efforts to prevent and manage pulmonary conditions are paramount.

Respiratory disorders disproportionately affect older adults. Poor immune systems and weakening muscles paired with age-related changes that cause nasal passages to become less flexible can increase the risk of respiratory disorders and infection in the elderly. “Upper respiratory”

conditions are related to sinuses, nasal cavities, and throat, while “lower respiratory” refers to the main bronchi and lungs. Chronic lower respiratory tract diseases are the third leading cause of mortality among individual aged 65 or older.



(Photo credit: National Institute of Health, 2024)

Signs and symptoms of the most frequent lung problems often go unnoticed or un-diagnosed in older adults. One key difference, comparing younger and older adults, is that the physiology of aging may complicate symptom manifestation. Older adults may present with less pronounced symptoms with cough and sputum production less prominent overall. Dyspnea, defined as shortness of breath, may be the only clue that a problem is

brewing, and other co-morbidities such as cardiovascular disease or musculoskeletal issues may interfere with a deeper look at respiration on its own. Age-related decline in strength may reduce the ability to mobilize secretions through effective coughing, putting the individual at risk for pneumonia – an infection of the lung. Let’s take a look at our top 5 priority pulmonary health conditions:

1. COPD: Chronic Obstructive Pulmonary Disease. This refers to a family of pulmonary problems including emphysema and chronic bronchitis, that is quite simply a chronic and progressive reduction in airway size, preventing efficient oxygen-carbon dioxide exchange in the lung. Over time, an individual with COPD will adopt postures to help them exhale carbon dioxide, such a leaning on their arms bent forward while sitting. The chest may become distended and barrel-like as the disease progresses over time. COPD affects 10% of adults over 40 worldwide, and 25% of adults over 70 years of age. There are new guidelines called “GOLD” – Global Initiative for Chronic Obstructive Lung Disease- for health care providers to be more investigative and thorough in their risk screening and assessment of COPD.

Screening and Prevention:

Screening and diagnosis of COPD is typically confirmed with a pulmonary function test where breathing capacity and fast, speed inhalation (breathing in) and exhalation (breathing out) are measured. The test is quick and absolutely painless. COPD can be prevented with a healthy lifestyle of good nutrition, regular activity and avoiding irritants that cause pulmonary inflammation such as smoking or living in areas of heavy pollutants.

2. Asthma: Asthma is also a chronic airway illness. Typically associated with younger adolescents and adults, asthma can also arise in later life. 8% of adults over age 65 are reported to have asthma. Managing asthma in later life becomes more complicated with medication interactions and other potential health issues often interfere with a clear picture of what is happening. Medication management and patient education are critical components of care of the asthmatic patient.

a. Screening and prevention: Identification of potential triggers for airway constriction episodes and regularly monitoring lung function through spirometry and pulmonary function tests are important methods of preventing an adverse asthmatic event. Education about proper medication use is essential as well. Lung function tests where how

much air can be forcefully exhaled from the lungs is measured is considered to be the gold standard for monitoring disease progression. Patients often use a peak flow meter at home, monitoring changes in airflow, identifying potential asthma exacerbations.

3. Pneumonia: A key cause of hospitalization in older adults, pneumonia can start with a “bad cold” and quickly escalate into a life-threatening situation. Older adults may show atypical signs of pneumonia; for example, instead of a fever and productive cough, someone may present with confusion and lethargy, again delaying diagnosis. Pneumonia can result from either a bacterial or viral infection. Bacterial infections respond to antibiotic therapy whereas viruses do not. Pneumonia can result from exposure to a variety of pathogens, and even being in the hospital can increase risk for infection.

Screening and Prevention: Again, the key to screening for early diagnosis is recognizing symptoms and sharing them with family members and health care providers. Even subtle changes can be very important. Prevention through vaccination cannot be emphasized enough. Vigilance with germ management with hand washing and home cleanliness can make a difference. Pulmonary hygiene with deep breathing and coughing strategies are discussed at the end of this article.

4. Interstitial Lung Disease (ILD): This group of pulmonary disorders is characterized by

inflammation and scarring of lung tissue, typically manifests first with symptoms of shortness of breath, fatigue, and persistent cough. Diagnosis and treatment may be delayed because these symptoms can be attributed to many different conditions. ILDs often exist in the presence of other diseases such as type II diabetes or heart disease.

Screening and Prevention: Report any persistent cough beyond 10-14 days to your doctor. Simple and specific pulmonary function tests performed early can assist in effective treatment prescriptions before disability and loss of function. Frailty, defined here as the increased susceptibility to stressors and lack of physiological reserve, contributes to the impact of ILDs. If you are unable to do the things you used to do without becoming short of breath, alert your physician.

5. Lung Cancer: Lung cancer is the leading cause of cancer-related deaths in both women and men in the United States. The median age for lung cancer diagnosis in America is age 70. Primary lung cancer originates in the lung, but the lung is also one of the top sites for metastasis of other types of cancer such as breast, colon, or prostate cancer. Again, diagnosis is often delayed due to the mixing of signs and symptoms with other conditions related to aging. High risk behaviors that contribute to lung cancer are history of smoking, chronic inflammatory lifestyle (stress, decreased sleep, poor nutrition), exposure to secondhand smoke or other environmental factors. Advances in lung cancer

care, particularly in the area of immunotherapy have been profound over the past few years.

a. Screening: This is one disease that can be detected through screening through imaging such as CT scan or even xray. Multiple publications support and encourage routine scans for anyone who has smoked more than 10 years; however, this screening process has not yet been embraced by the medical insurance community. Advocating for oneself and keeping your primary health care provider abreast of changes in breathing, unexplained weight loss, chronic coughing, and fatigue are essential prevention practices.

The health care community needs to continue to strive towards the use of “precision medicine” to treat conditions and the complexities of managing older adult health. Precision medicine encourages the development of individualized, intensive treatments based on genetic, molecular and lifestyle factors. Many barriers interfere with this process – availability of skilled gerontologists and physicians, financial constraints, access to care such as transportation and communication, and ageism (bias focused on older adults; may lead to under-treatment.). Advances in immunotherapy have been significant over the past 5 – 10 years, offering new hope for patients with chronic lung disease. Innovation in medicine, such as monoclonal antibodies targeting specific inflammatory pathways, offer life-changing solutions to

Depending on the source, the top 5 pulmonary problems in older Americans are:

- **COPD:** Chronic Obstructive Pulmonary Diseases. (Includes emphysema and chronic bronchitis)
- **Asthma**
- **Pneumonia**
- **Interstitial Lung Disease**
- **Lung Cancer**

chronic disease management. Even lung transplants, a life-saving measure for end stage pulmonary disease, have come so far with eligibility criteria changes, better surgical methods, and post-transplant successful outcomes. We must educate ourselves constantly about changes in medicine and options for treatment – home care services, telehealth options, use of self-monitoring tools, smart inhaler devices, and more – and try to embrace opportunities that technology provides for us as we age.

Holly Lookabaugh-Deur is a physical therapist with board certifications in geriatrics and oncology, with a doctorate in geriatric clinical medicine. She serves on the faculty for 5 universities in their residency training programs for various specialty topics, and she is the VP of Education for the APTA MI Oncology SIG. She serves as Associate Editor for Oncology Rehabilitation in Practice Journal, and has traveled with One World Surgery for mission work in Honduras. For more information or requests, please submit comments to hjldeur@gmail.com.



How Does Your Garden Grow? Hope is a Thing with Petals



BY
JANET
HASSELBRING

"March is the month of proclamation," stated Emily Dickinson. Her garden comes to life after a long cold winter in Amherst, MA.

"Buds swell on the branches, elbowing into the longer, warmer days. Songbirds charm the trees. Dormant plants, metabolisms slowed during the long Massachusetts winter, wake up. The first flowers to bloom each year are the little bulbs." (Emily Dickinson's Gardening Life, McDowell)

What does March proclaim?

1. March proclaims Hope.

If hope is "things with feathers" - birds, to Dickinson, then it's also "things with petals" - bulbs. In autumn, we plant little food sacs, which rest dormant under the frozen ground, unseen for the remainder of the year, and then, Voila! they burst forth in spring in a profusion of color, stunning the landscape with beauty

and hope, rewarding those who braved the cold autumn day with gloves and trowel.

Emily Dickinson a gardener? Her name brings to mind a well-known image of a sixteen-year-old girl in a white dress staring boldly out of a daguerreotype - Emily Dickinson the poet, of course; yet beyond the stuff of literary legend, Emily loved plants. The love of gardening inspired many of her poems. Her trowel and pen went hand in hand.

Her crocuses are "vassals" of the snow, and "martial" - standing in the frozen ground like soldiers.

Another of her favorites was the tulip, which she describes as asleep and forgotten, save by the gardener:

"She slept beneath a tree -
Remembered but by me.
I touched her Cradle mute -
She recognized the foot -

Put on her Carmine suit
And see!" (Dickinson 15 1858)

And the daffodil. With usual cryptic clarity she pens :

"I dared not meet the Daffodils -
For fear their Yellow Gown
Would pierce me with a fashion
So foreign to my own - " (I Dreaded That First Robin So, Dickinson)

2. March proclaims Faith

I have a vested interest in bulbs. Last fall I knelt on the cold hard ground in my shade garden and gently placed pudgy little pouches into their winter abodes with a prayer that in due time, they would awake from sleep, put on their colorful costumes, and "see!" I figured if St. Francis could preach to "things with feathers," I could invoke blessings on "things with petals."

Planting bulbs, in fact, gardening in general, becomes a spiritual experience,



when one realizes that just as flowers emerge from the deadness of winter, so God raised Jesus from the dead on the first Easter, and will also resurrect those asleep in Him.

"Our Lord has written the promise of the resurrection not in books alone, but in every leaf in springtime." (Martin Luther)

The garden for me, like Emily, is my church. It's there I drink in the wonder of rebirth and ponder the cornerstone of my faith - the resurrection.

"Some keep the Sabbath going to Church -

I keep it staying at Home -
With a Bobolink for a Chorister -
And an Orchard for a Dome -
Some keep the Sabbath in
Surplice -

I, just wear my Wings -
And instead of tolling the Bell, for
Church -
Our little Sexton - sings.



"God" preaches, a noted Clergyman -

And the sermon is never long,
So instead of getting to Heaven,
at last -

I'm going, all along." (Dickinson 236, 1861)

3. "and the greatest of these..."
March proclaims Love

A defining quality of Love is selflessness. Things with petals add beauty and color (and nectar!) to the world while asking nothing for themselves.

Plants above ground may not provide as dramatic a renewal as bulbs, but they too appear dead and



lifeless during winter, only to sprout green with the arrival of Spring.

"Just remember in the winter,
far beneath the bitter snows,
Lies the seed, that with the
sun's love,

In the spring becomes the rose."
(The Rose, McBroom)

"A sepal, petal, and a thorn
Upon a common summer's
morn.

A flash of dew, a bee or two -
A breeze, a caper in the trees -
And, I'm a rose!" (Dickinson)

How does your garden grow?

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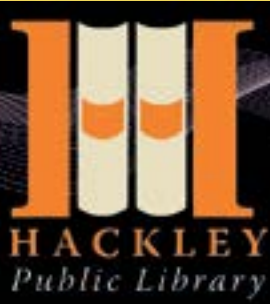




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Jobs

BY
KEITH SIPE

Have you ever sat and wondered, “why am I doing this”? I’m talking about your job, the job you are doing to make money. Why did you pick this job? Was it to purchase your first car? Maybe to help support your family? Maybe an expensive girlfriend? Whatever the reason, you are working a ‘job’.

I am sitting in a rocker on my daughters veranda and thinking “why did they pick this job”? Let me explain, one morning around 0900 hours these men started digging a hole right off the veranda for an in-ground swimming pool. Sort of a kidney shape, style. Within three hours the pool was dug and the soil that was removed was roughly graded around the area of the pool. The second day, the rebar workers came in to bend and shape yards and yards of rebar into the desired shape that my daughter and son-in-law wants their pool to look like.

Which brings me to my

question, “why are they doing this...job for a living”? Taking many yards of rebar, cutting and forming it into a certain shape for a pool, just doesn’t seem like a profession that one would want. Like, “hey Keith, what do you want to do for a job when you grow up”? “Oh, I can’t wait until I grow up and become a rebar bender and form it into a pool”! Are you following me and understanding where this might be heading? Just sit back and think of all the jobs in this world a person could be doing to make a living. There are many, many jobs that one can do. As Andy Rooney used to say at the end of his editorial, “Why is That”!

I’m a senior now and when I sit back and think about what I want to be when I grow up, I still have no idea!!!

But there is another thought that I realized after a few days of this pool construction. Towards the end of construction, there is an art to putting this pool together. The designing, digging, forming, the gunite spraying, the whole project. Yes, there is an art to this project,

which could be the reason for someone to pick this as a job to do.

There are many reasons for someone to choose a job.

I have a cousin who knew exactly what she wanted to do for a job. Throughout her early years of education, she worked hard to get the education she needed for this job she wanted.

I have no idea how a person can enjoy only one job for their entire life. A job that you pursued and educated yourself to spend your entire life at it. Unbelievable. As I look back on my life, I just got tired of what I was doing and needed a change from time to time. Oh well.

Have you thought about your past and ever wondered if you.... actually had a job you loved and did it every day of your life? A job where you couldn’t wait for Monday morning to come, so you could get right back at it. I would guess it wouldn’t be work.

Let’s say you are 15 years old, and in a few months you will have your drivers license. Your folks picked up a pretty decent

car for you to drive. Can you remember that far back? It was when you hit that wonderful age of independence....16.

While waiting for your independence day, your birthday, you might have started to wonder more about your future. Like... how am I going to put fuel into my car. I’ll need to get a job to pay for gas and some other things that come with the car. What jobs are out there for me? Then you might stumble on to other ideas about more than a part time job, what about my future. You think “What about My Future”. It really hits you, now what am I going to do?

Give it some thought, would there have been any changes in your life now that you are retired. I’m so confused!!!



Keith Sipe has been writing for over 20 years. He served 21 years in the U. S. Air Force and the U. S. Army. Keith has many interests like writing, photography, flying, cooking, history, and traveling. Keith may be reached at rightseat625bg@gmail.com Please drop him a note, for he loves the attention, well, he would love to hear from you.

Quietly helping the heroes

BY
JOE
STAPEL

My whole goal when I was young was to grow up and become a police officer. I can remember vacationing in Canada and getting my picture taken with a Canadian mounted police officer in his sharp looking red and black uniform.

When I graduated from College from Ferris State University with a degree in Police Administration my dream came true .

I was hired as a police officer at Norton Shores Police Dept in 1974, three months after graduation. I met some great fellow officers who became friends, I still see many of them today once a month for lunch .

I worked 3 and 1/2 years there as a patrol officer. It was great. A great department and a great City to work in.

I had an opportunity in late 1977 to go to a large Retail company in Grand Rapids as their First Safety Specialist working out of their corporate loss prevention department.

As time went on, I still worked as a part time officer, and I finally retired from police work in the early 90s.

I started to have some problems with watching my cop shows, especially the blood and guts ones. I started to cry when watching

them.

I also started thinking more and more about the tragic incidents I had witnessed during my full time years as an officer. I had several, the worst being removal of a body from a cardboard baler when I was an intern for the PD. Then my Sergeant and myself had to deal with a young child accidentally run over by a school bus, and then a double fatality on US 31 on a Friday afternoon in August. Add to that a person stuck and killed by the car in front of mine. I had always assumed that all police officers remembered all of their fatal accidents and let it go at that.

Well I found out that was not the case, and found out by accident at age 67 that I had cumulative PTSD while talking to my fellow classmate who was working for the Muskegon County Veterans Administration. I then started to see a therapist twice a month who to this day helps me deal with the aspects of

having cumulative PTSD and the things I can do to deal with it.

Mental health therapy is the most recommended way to deal with PTSD. After a few years of therapy I decided I needed to help other First responders who would be retiring and not have them find out by accident like I did. So I founded Help Michigan Heroes as a non profit in March 2023 that will pay for the copay on their mental health therapy sessions. These copays run between \$20 and \$140 a session.

By accident I ran into a retired



fire fighter who has the almost identical symptoms that I do. I listened to him tell me about the tragic incidents he saw that no person should ever have to witness but First Responders do almost daily. He said he worked as a fire fighter in the White Lake area , and was now retired. He had been seeing a therapist but did not go sometimes because he did not have the money to pay his copays.

I said I have a solution for that and explained what we could do for him. He was so appreciative of us doing that for him because he knows the therapy sessions really help him and he wants to go more often. It felt so good to assist a fellow Muskegon County first responder in need.

I was able to take checks to his therapists for his copays, \$500 to each therapist. Both of the people I gave the checks to were very impressed with the program we have developed. I asked if they had other First responders from Muskegon County who are

patients there and have PTSD, and if so we would like to get connected so we can help them with their copays. The first fighter from the White Lake area said he almost cried when heard his therapists had been paid. I told him it was a great honor to assist him with his PTSD therapy sessions. It made my day for sure.

If you know of a retired or on the job first responder who may have PTSD please have them contact me at jyalan@comcast.net so we can try and set them up with a therapist or if they are seeing a therapist already and we will contact the therapist and send a check to them to pay for their mental health therapy.

We are a very shy group and we do not want anyone to know about us and that we might have PTSD. You can also make a donation to Help Michigan Heroes like the fire fighter by sending a check to Help Michigan Heroes, 2363 Blodgett St., Muskegon Michigan 49441 .

Thank you.

G A M E P A G E

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	3			5				
8							6	
9			6					7
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	8		7			6	3	

Level: Intermediate



Game
Page
Answers
on
Page 34



CELEBRITY CIPHER
by Luis Campos

Celebrity Cipher cryptograms are created from quotations by famous people, past and present. Each letter in the cipher stands for another.

" HNPAGBR NB XGDUJ HYLPL SYL
UNBLX'J UNPL GUZNPSCBS SYCB SYL
VPLCSGFGSX, G TOJS ... WNB'S KLLD
VNUKNPSCEDL." - ROX ZLCPVL

TODAY'S CLUE: K equals F

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WHAT'S THE DIFFERENCE?

There are four differences between Picture A and Picture B.



Answers on page 34

Game Page is brought to you
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CROSSWORD

	1	2	3	4					5	6	7	8	
9					10				11				12
13						14		15					
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53								54		55			
56									57				
	58								59				

CLUES ACROSS

- 1. Take heed
- 5. One's superior
- 9. Prepped meat
- 11. Tighten anew
- 13. Type of textile fiber
- 15. Animalistic
- 16. When you hope to get somewhere
- 17. Offender
- 19. Former NYC mayor Ed
- 21. Type of cryptocurrency
- 22. Mauna __, Hawaiian volcano
- 23. Herring-like fish
- 25. Popular PBS program
- 26. Congressman (abbr.)
- 27. Flightless Australian birds
- 29. Defrosted
- 31. Prior Yankee sensation Kevin
- 33. Nasal mucus
- 34. Some are southern
- 36. A place to construct
- 38. Popular beer brand
- 39. Shouts of farewell

- 41. Network of nerves
- 43. Make a mistake
- 44. Showed old movie
- 46. Body parts
- 48. A divisor
- 52. Congressional investigatory body
- 53. Papers
- 54. Most unnatural
- 56. Judge the worth of something
- 57. Makes sounds while sleeping
- 58. Which
- 59. Hungarian Violinist

CLUES DOWN

- 1. Pages
- 2. Head pain
- 3. A loud utterance
- 4. Large brown seaweed
- 5. Hulu's chef Carmine
- 6. Greek mountain
- 7. Made final
- 8. Bar
- 9. Tai subgroup
- 10. What you eat
- 11. Teaches again
- 12. Small constellation

- 14. Type of berry
- 15. Cows fattened for meat
- 18. A way to hoof it
- 20. Exaggerated a role
- 24. About two
- 26. Long upholstered seat
- 28. What employees earn
- 30. Fiber from a coconut husk
- 32. Digits
- 34. Polish by rubbing
- 35. Liquid body substances
- 37. Furniture with open shelves
- 38. Edible part of a chicken
- 40. Satisfy
- 42. Tool used to remove
- 43. Icelandic poems
- 45. Swiss village
- 47. Drunks
- 49. Evergreen plant genus
- 50. Light precipitation
- 51. Ribosomal ribonucleic acid
- 55. An informal debt instrument

Answers on page 34



- Pub One Eleven, 111 W. Colby St.
- Red Rooster Tavern, 2998 N. Scenic Dr.
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REVISITING OUR CHILDHOOD BOOKS



BY
LOUISE
MATZ

What a lovely change of venue was enjoyed by all the members of my book club at our December Christmas lunch meeting this year. We are a group from the Stillwater Springs condo complex and open to all residents. Currently, we are a group of ten. When planning our December meeting, we decided to go out for lunch. Marlene suggested why don't we each select and read a children's book and report on it at the Christmas party meeting in December. What a lovely and interesting idea it turned out to be.

Books were selected from childhood, a teaching or library

experience, related to children or grandchildren, or even random. Marcia gave a report on the Nancy Drew series, educating us to the fact that the books were not written by a single author but by a team of authors. Sydney presented a book written by her and her family and illustrated by Sydney's artistic talent. She explained how each family member would become involved at different stages in the story. Kay selected a book with a sing-song rhythm, Sue MacDonald Had a Book. She read it aloud and it was delightful to hear. Rosie talked about reading books with her sister. Janet told us about It's Not Easy Being A Bunny.

The presentations opened a treasure trove of memories and inspired additional personal comments that gave us insight into

the early lives of each other.

All the books were highly recommended by the presenter and in most cases recommended for a particular age range. Ramona the Brave was my presentation and I think the age range is very specific. This book would be very meaningful and helpful to a young girl age six in the first grade. Well, maybe I can expand the age to five, six, or seven. Keel reported on a book bordering fantasy, Jeremy Thatcher, Dragon Hatcher. Rosie reported on Thee, Hannah, which is historical fiction about a Quaker girl. It takes place before the Civil War. Jan described Pat the Bunny, which is ideal for a toddler as it allows them to reach into the book and make things happen. Marlene selected The Christmas Cookie Sprinkle Snitcher. When she was

teaching, her very young students loved this book.

At the end of the meeting all members commented on what a warm and delightful meeting it was. It was enthusiastically enjoyed by all.



Louise is a national award winning writer. She has been writing for Senior Perspectives for over 15 years. She enjoys family time, reading, traveling, biking, golf, pickleball and mahjongg. She and her husband spent over 20 years enjoying bow hunting for deer in the Upper Peninsula, hunting turkeys, and fishing in the Florida Keys. She is currently re-inventing her life as she lost her husband of 62 years in November of 2023.



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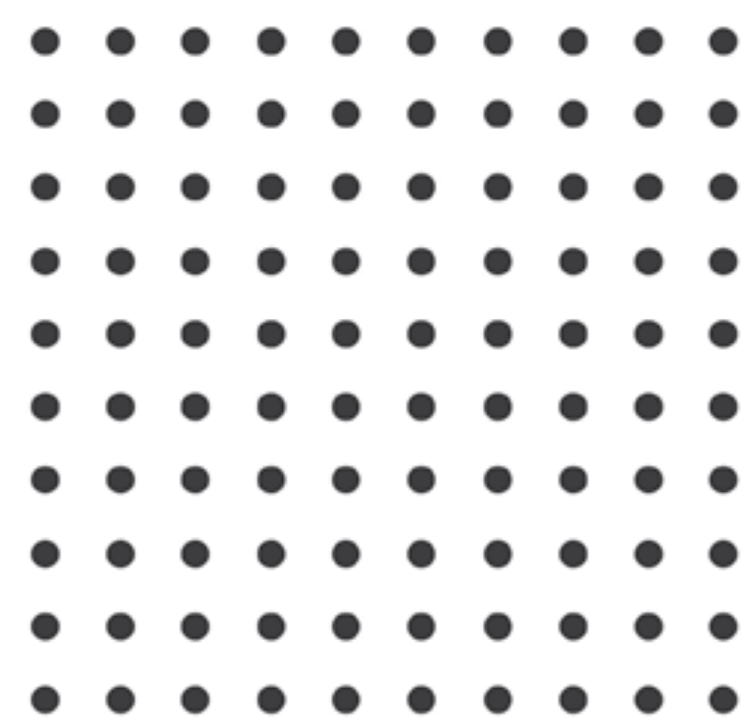
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THE FAMILY CIRCUS

By Bill Keane

3-1

Bill Keane

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MARCH | APRIL 2025

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SENIOR PERSPECTIVES

MARCH | APRIL 2025

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SENIOR PERSPECTIVES

Gardening safety

Longer hours of daylight and warming temperatures are hallmarks of spring and each of these variables do much to contribute to the reputation of a season that's become synonymous with rejuvenation. After months spent confronting cold temperatures and huddling up indoors, people might find the welcoming conditions of spring irresistible, which compels many to spend more time outdoors.

There's no shortage of things to do outside in spring, and the season marks a perfect time to reestablish one's green thumb and get down and dirty in the garden. Gardening is a rewarding and healthy activity, though some, particularly seniors, may need to approach springtime sessions in the garden with a heightened degree of caution. Seniors can keep these health and safety tips in mind as they celebrate the return of spring and what that means for their gardens.

• Recognize that gardening is exercise. The Centers for Disease Control and Prevention identifies gardening as a good form of exercise, and evidence supports the notion that gardening is a particularly beneficial form of physical activity. A 2024 meta-analysis published in the Journal of Neurology, Neurosurgery & Psychiatry indicated that individuals who engaged in low levels of leisure time physical activities such as gardening are likely to have a lower risk of stroke than peers who are sedentary. It's important to keep these findings in mind when gardening, which is perhaps more physically demanding than some may

recognize. Seniors can approach gardening just like they would other forms of exercise, taking the same precautions, such as stretching before and after each session and making a concerted effort to remain hydrated, while out in the garden.

• Incorporate rest into your garden routine. Rest is vital for anyone engaged in physical activity, including gardeners. Frequent breaks during gardening sessions can help avoid strains and sprains and provide opportunities to hydrate and get out of the sun. If possible, seniors can identify a shaded spot on their properties and place a bench there so they have somewhere to rest during gardening sessions.

• Utilize ergonomic gardening tools and other specialized products. The Center for Excellence in Disabilities at West Virginia University notes that ergonomics studies movements of a person's body during physical activities in an effort to produce tools that ensure a task has as little physical impact on the body as possible. Ergonomic tools are designed to lower injury risk, improve efficiency and increase satisfaction that stems from performing a particular activity. Before each gardening season, seniors can inspect their existing tools and replace them with ergonomic alternatives, if necessary. In addition, seniors can utilize specialized products, including long-handled gardening tools that reduce the need to bend over or kneel down, to further reduce their risk of injury while working in the garden.

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THE JOY OF SKIP-GEN TRAVEL, PITFALLS AND ALL



BY
CYNTHIA
HOGG

I had planned the trip for three years. I had the train tickets. The rental car. Hotel reservations. Non-refundable tickets for a musical, a lobster dinner cruise, and a whale-watching tour. All four girls were super excited: we were going to Prince Edward Island – just grandma and her granddaughters! But as I wrote about in last March's issue, less than 48 hours before we were supposed to leave, my 10-year-old granddaughter fell off the middle level of our back deck, breaking one wrist, spraining the other, and receiving a mild concussion.

Did we still go on the trip? You bet we did!

Actually, she was just taking a page out of her father's playbook: our son who fell off his bike and broke his elbow right before we left on a big trip to Yellowstone. But in both of those cases, their injuries rarely come up when we remember the trips. We just revel in all the fun memories.

I simply love "skip-gen" travel – that magical experience where it's just you and your grandchild (or grandchildren), with no parents along. It's just a different dynamic that's so special. But without parents along, you're also responsible for making sure everything goes well. Sometimes that feels like no small task!

There must be something about

10-year-olds. In 2019, my husband and I and a small group of other adult relatives took our 10-year-old grandson on a trip to Bastogne, Belgium, for the 75th anniversary of the Battle of the Bulge, a battle his great-grandfather fought in. The battle took place in deep winter – so that's when the anniversary celebration was held.

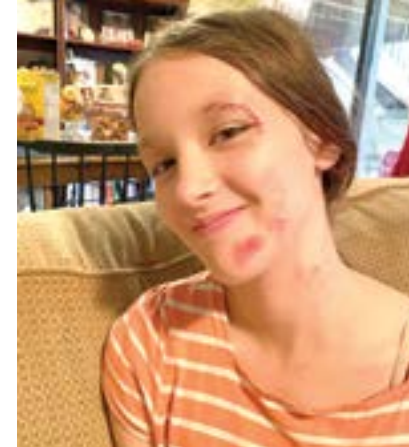
Our grandson showed up at the airport with no winter coat. (His parents thought it was in the car. It wasn't.) Fortunately, his older sister was wearing a puffy navy unisex winter coat which she reluctantly gave him.

That was just the beginning. Just for fun, when we got home, I made a list of everything that went wrong on the trip. There were over 20 things! Hearing that, you

might be tempted to think we had a terrible time. Nothing could be farther from the truth! We had a wonderful time making once-in-a-lifetime memories, including, on a side trip to England, a visit to the Tower of London. Most mishaps were minor and/or funny. At least in retrospect!

More recently, right before leaving for my Grammy Camp last summer, another granddaughter decided to rollerblade down a sloped concrete driveway – right into a tree. Yep, another concussion, plus six stitches!

The thing is, kids have accidents. They're exuberant and irrepressible. They can be thoughtless and clumsy and they don't always demonstrate much common sense. But that's



no reason not to plan and take trips with them. It's life, and if something unforeseen happens, it can be a way to teach kids to adapt and work through adversity. Don't throw in the towel. Push on.

If you're a grandparent, that means you raised kids. And if you raised kids, you know what I'm talking about when I say things will go wrong and accidents will happen. But wouldn't you go back and take (most of) those trips with your kids again if you had the chance?

The value of and the joys experienced during skip-gen travel will outweigh any mishaps that might happen along the way. Don't let worries about what could happen prevent you from the joys and precious memories that most certainly will happen when you travel with your grandchild. Summer is not that far away (no, really!) so the time to start



planning is now. They grow up so fast!

Cynthia Hogg is a freelance writer who splits her time between Grand Rapids and Ludington. She is the author of several books, including Miracle on the Mayflower: John Howland's Remarkable Rescue and Lasting Impact on America and is the founder of the blog www.skipgentravelguru.com. She can be reached at cindacord@gmail.com.



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The month of March has been home to many historical events over the years. Here's a look at some that helped to shape the world in March 1925.

- A military committee in France concludes that Germany committed gross violations of the Treaty of Versailles on March 1. The committee, led by Marshal Ferdinand Foch, accuses Germany of violating provisions related to the disarmament of its military.
- Huff Daland Dusters Inc., is founded in Macon, Georgia, on March 2. The company, which began as a drop dusting firm formed to combat a boll weevil infestation of cotton crops, would be sold near the end of 1928, at which time it is renamed Delta Air Service.

- The United States Congress authorizes the Mount Rushmore Memorial Commission on March 3. The initial design for Mount Rushmore initially featured each president depicted from head to waist. But funding for the sculpture dried up in 1941, so only President George Washington's sculpture features any details below chin level.
- The second inauguration of United States President Calvin Coolidge takes place on March 4. It is the first inauguration to be nationally broadcast on radio.
- Alan Rowe opens the chamber of the tomb of Hetepheres I on March 8 in Egypt. Rowe, who was serving as deputy director of the Harvard-Boston Expedition, is the first person in 4,500 years

to open the chamber.

- The state of Bavaria in Germany bans Adolf Hitler from speaking in public for two years on March 9. The ban limits Hitler to speaking only in private, closed meetings.
- Greek football club Olympiacos F.C. is founded in Piraeus on March 10. Olympiacos is now the most successful club in Greek football history, with 47 league titles to its credit.
- Cuba and the United States sign the Hay-Quesada Treaty on March 13. The treaty recognizes that the Isla de Pinos, now known as the Isla de la Juventud, is the territory of Cuba.
- Walter Camp passes away in New York City on March 14 at the age of 65. Camp, a college football coach considered the "Father

of American Football," created the sport's system of downs and the line of scrimmage.

- An estimated 5,000 people are killed when a 7.0 magnitude earthquake strikes the Chinese province of Yunnan on March 16.
- Edvard Benes of Czechoslovakia proposes a "United States of Europe" on March 17. The proposal is an attempt to secure peace in Europe and includes a western bloc featuring nations including England and France, and an eastern bloc made up of countries including Poland and Austria.
- On March 19, Martha Wise confesses to poisoning 17 members of her family. Wise was connected to the crimes by Medina County, Ohio, sheriff Fred Roshon, who

had discovered a day earlier that she had recently purchased a sizable quantity of arsenic from a drug store.

- Clifton R. Wharton begins his diplomatic career on March 20. Wharton would become the first African American admitted to the United States Foreign Service and the first black U.S. envoy to Romania and the first black U.S. ambassador to Norway.
- The Butler Act takes effect in Tennessee on March 21. The act prohibits school teachers from denying the Biblical account of the origins of humanity and remains on the books until 1967.
- The Tokyo Broadcasting Station transmits the first radio broadcast in Japan on March 22.

The first broadcast includes a recording of the Beethoven opera "Fidelio."

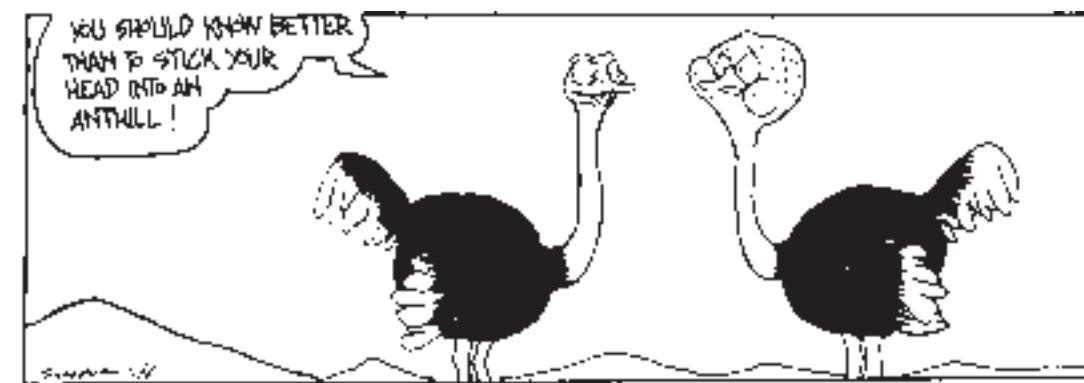
- Scottish inventor John Logie Baird publicly demonstrates the transmission of moving silhouette pictures at a London department store on March 25. A contemporary report in Nature magazine characterizes Baird's design as "television."

- Fascists and Communists engage in a fistfight within the Italian Chamber of Deputies on March 26. The fisticuffs break out on the day Benito Mussolini returns to the Chamber for the first time in more than a month.
- The Philadelphia Daily News begins publication as a tabloid morning newspaper on March 31.

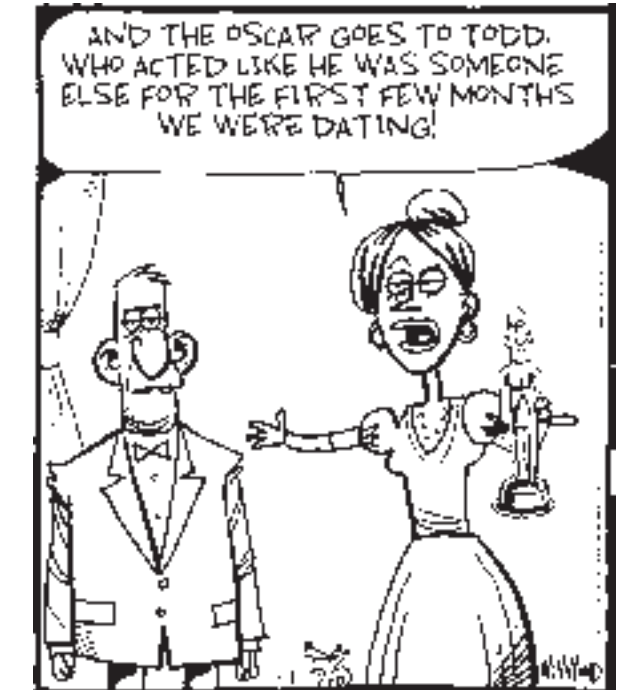
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S	E	A	R	E	D				R	E	S	E	A	L		
A	C	R	Y	L	I	C			B	E	A	S	T	L	Y	
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WHAT’S THE DIFFERENCE? — Answers:

1. Extra light on right
2. Missing mustache
3. Drink is now a milkshake
4. Shamrock on hat

CELEBRITY CIPHER — Answer:

Solution: “Working on films where the money’s more important than the creativity, I just ... don’t feel comfortable.”
— Guy Pearce

5	9	1	2	4	3	7	8	6
2	6	8	1	7	9	4	5	3
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8	7	3	9	1	4	5	6	2
9	5	4	6	2	8	3	1	7
6	1	2	5	3	7	9	4	8
7	4	6	3	8	1	2	9	5
3	2	9	4	6	5	8	7	1
1	8	5	7	9	2	6	3	4

I SPY — In the last issue, the snowflake was hidden in the top right image of the ORV vehicle on page 21. Winners from the last issue are Daniel Sisson of Luther, Sara Rudicil of Muskegon and Dawn Halbower of Shelby.



Fortunately Mary would eventually see Corinne Conry, LAC, MSOM at one of her talks, speaking about similar symptoms, and how she offers a real solution at the Acupuncture Center of Grand Rapids. “I just knew I had to see her. She was my last hope.”

“Almost all of our patients come to see us with a story similar to Mary’s. They’ve been everywhere else. They’ve been told there’s no hope. They’ve been told ‘it’s just part of getting older,’” shares Peter, a patient care technician, at ACGR. “It just breaks my heart, but I know how much we can help people like Mary, so I’m always happy when they walk through our door.”

Those diagnosed with peripheral neuropathy often face a very grim reality; Western medicine declares that there is no solution while most alternative therapies carry large price tags and offer little to no resolve.

Which is why Corinne Conry, LAC, MSOM and the staff at Acupuncture Center of Grand Rapids pride themselves on being ‘the last resort with the best results’.

Peripheral neuropathy is a result of damage to the nerves, and this damage is commonly caused by lack of blood flow in the hands and feet. A lack of blood flow results in a lack of nutrients; the nerves then begin to degenerate and die which causes pain ranging from discomfort to debilitating. Because neuropathy is a degenerative condition, once those nerves begin to deteriorate, they will continue to do so until they are completely expired, leaving those suffering with crippling balance issues. “In this case, the absence of pain is not necessarily a good thing,” shares Corinne. “This usually indicates that your nerves are hanging on by a fragile thread.” So how is Corinne able to reverse the effects of this degenerative disease? “Acupuncture has been used to increase blood flow for thousands of years which helps to get the necessary nutrients to the affected nerves. But the real magic happens when I integrate ATP Resonance BioTherapy™. This tech was originally developed by NASA to expedite recovery and healing.”

“I just can’t say enough about ACGR,” shared Mary through her tears of joy. My husband and I moved here three years ago and he walks to the lake almost every day. I always stay home because of the pain and discomfort. Yesterday, I went with him! And next

week we’re starting dancing lessons. I am truly living life these days.”

“According to Mary’s test results, she had seen a 74% improvement in pain and functionality, which is on par with the majority of our patients,” shares Peter. “But more important than those test results is the joy she’s expressed being here and hearing about all of the amazing things she’s able to do because she feels great!”

By seamlessly blending the ancient science of acupuncture with modern medical solutions, Corinne Conry, LAC, MSOM has achieved a 90% success rate in reversing the effects of neuropathy.

She starts each patient with an initial consultation during which a sensory exam is performed. “This not only aids in making a proper diagnosis but it helps to define just how much nerve damage has occurred,” says Corinne. “This is important because if a patient has suffered more than 95% damage, there is a little that I can do to help them. I’m familiar with the medical miracle, but I know my limits as a practitioner and the limits of my medicine.”

When it comes to treating peripheral neuropathy, regardless of its origin, early detection greatly improves your chances of a full recovery.

If you or someone you love are suffering with chronic pain that presents as burning, tingling, or ‘pins and needles’, or you’ve recently been diagnosed with peripheral neuropathy, it’s important to know that there are options. There is hope.

Call (616)-369-2121 to schedule an initial consultation, or visit acugr.com to read more incredible success stories.



BY
CORINNE CONRY
MSOM, LAC

Corinne Conry MSOM, LAC is a Licensed Acupuncturist in the State of Michigan. With over 10 years of experience, Corinne specializes in chronic complex conditions. She is an expert in chronic pain, neurological conditions, autoimmune conditions, geriatrics and more.



Peripheral Neuropathy? Call (616) 369-2121 to schedule a consultation! Visit acugr.com to learn more and take advantage of their New Patient offer!



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