



WELLCAP

Issue No 10 - December 2009
Publication of the Wellness Office

End of Life Care

Recently I have been sorting thru a large box of family photos that were taken when I was a child. There were pictures of my grandparents, aunts and uncles and family friends. Most of them have been dead for many years. I have many wonderful memories of these people. This has caused me to reflect on how quickly our lives pass, but also how these people remain a part of my life to this day.

Henri Nouwen says in his book Our Greatest Gift:

“Our death is meant to bear fruit in other peoples lives.”

How we live and how we die can have a profound effect on our family, our community and even the world.

At the last local ministers meeting the provincial and the council asked me to do a presentation on end of life issues and medical care.

My talk centered on the following question:

How do we make decisions about surgical procedures, tests, and expensive treatments that are prudent, ethical, compassionate, and also take into consideration the cost in both dollars and human suffering?

In making these decisions we must always **honor the person** and their wishes. To do this we must understand what their **values** are and what is important to them. By discussing these things we will better be able to give them the best possible care. At death nears we may want to switch from **Intensive Care to Intensive Caring**. This is where Hospice and Palliative Care come in.

After the presentation I met with the council to determine how we could start a conversation among the friars about how we will care for each other as “Sister Death” approaches.

In our death defying culture, this is not always an easy topic to address.

“Is death something so terrible and absurd that we are better off not thinking or talking about it? Is death such an undesirable part of our existence that we are better off acting as if it were not real? ... Or is it possible to befriend our dying gradually and live open to it, trusting that we have nothing to fear?”
Henri Nouwen

There are several things that we will be doing in the coming year to facilitate discussions with one another. You will all receive Nouwen’s book along with a letter from the provincial. I will be talking to you about end of life care and what you would like to see happen within your houses and community and how we can best facilitate that. Vince Reyes has offered to partner with me in exploring your feelings hopes and dreams for the future.

Mary Hague RN



Fido May Save Your Life

Can sensitive canine noses detect cancer, predict seizures and warn you that your blood sugar is low. Researchers are finding that this may indeed be the case.

For the past 10 years Michael Mc Culloch the research director at the Pine Street Foundation in California has been training and testing dogs. In 2003 they trained dogs to smell lung cancer 99% of the time and breast cancer 88 % of the time.

As the results of these and other test results being published, scientists are hearing remarkable stories from dog owners across the country.

One dog owner who is diabetic and suffers from unstable blood sugars wrote to say: "My blood sugar suddenly goes low and I don't wake up. I don't feel anything and suddenly there will be a 130-pound golden retriever jumping on me."

Devin Grayson is 36, lives in Oakland and has been diabetic for half her life. Once roused she checks her blood sugar to make sure Cody is right. A diabetes dog does not get its owner out of a finger prick to draw blood and test. Grayson goes low at night three times a week, and Cody hasn't been wrong in six months.

He's a more accurate predictor than the meter, because his nose picks up a trend downward in blood sugar that the meter won't. If Grayson were to become non-responsive, Cody has been taught to find help and lead it back, which Grayson describes as a "Timmy's-in –the-well."

If you will forgive a pun, the day may come where we go in for dog scans instead of cat scans.

Want to look trim and fit?

Some recent studies indicate that our excessive intake of sugar may be one of the causes of increased abdominal fat. We have gone from eating an average of 13 grams of sugar to eating 285 grams a day. We can reduce this amount by reading labels and becoming more conscious of what we are eating and drinking. Soft drinks and juice drinks are especially high in sugar and corn syrup. If you can reduce your sugar intake to 20 grams a day, you will notice a positive effect on your waist line and also reduce your risk of diabetes.



Sharpen your Brain

It is important to continue to make new connections in our aging brains.

One way to do that is to play games that require you to react quickly to some stimulus, or to solve a problem.

There is a free website where you can find lots of these games at: www.sharpbrains.com

Good brain health depends on a number of things that we have control over. Dr. Daniel Amen has scanned 1000's of brains of people who had relationship problems and he discovered that we can do thing to have a healthier brain which result in healthier relationships.

These things included:

- Improve circulation to the brain by eating a heart healthy diet, by not smoking and by exercising.
- Avoid toxic substances such as excessive alcohol
- Think positive thoughts

More at his web site:
www.amenclinics.com

Prostate Health

The prostate gland is located just below the bladder. It surrounds the urethra—the tube that carries urine from the bladder to the outside.

At puberty, the prostate is about the size of a chestnut. Then in most men, it starts growing again around age 50. As it grows bigger it narrows the urethra like a clamp around a garden hose. It may get big enough to slow the flow of urine and keep you from emptying your bladder. As it gets harder to urinate the walls of the bladder begin to thicken from the effort.

Because you don't empty your bladder you may notice that you have to urinate more frequently and you may have to get up several times at night. Your stream may stop and start and at times you may have a lot of urgency. It can also lead to bladder, prostate, or kidney infections. Sometimes men are unable to urinate at all and need a catheter or need to self cath several times a day.

This condition is known as BPH or benign prostate hyperplasia. This condition can be treated with medications such as Flomax. Although medication may ease the symptoms, surgery may be necessary. It is usually done through the urethra. The excess tissue from the prostate, that is blocking the flow of urine, is removed surgically or with a laser.

Prostate cancer is one of the most common in men affecting about one in six men in this country. This is why it is so important to have regular check ups. Prostate Cancer does not always cause symptoms., but can be felt during a rectal exam as a hard lump. Cancer also raises the PSA level.

Better Bladder Control

Prostate problems can also lead to urinary incontinence. Overflow incontinence occurs when the bladder doesn't empty completely.

Another type is urge incontinence which results in involuntary urination often on the way to the bathroom. Diuretics and other medications sometimes increase the problem.

Incontinence can also be caused by other conditions such as bladder infections. Medical conditions such as strokes, Parkinson's and multiple sclerosis can also effect bladder control.. A small percentage of men who have prostate surgery become incontinent.

There is help available so you should talk to your urologist to get an accurate diagnosis. Four things that may lessen the symptoms include:

1. Moderate your fluid intake

How much you should drink depends on a number of factors

including the food you eat (fruit contains lots of water), how much you exercise, and heat and humidity. Drinking 6-8 cups of fluid a day from all sources is usually sufficient. Limit what you drink after the evening meal to lessen your night time trips to the bathroom.

2. Cut back on caffeinated beverages

Caffeine stimulates the production of urine and increases bladder contractions. Carbonated beverages and citrus also cause a problem for some people.


3. Strengthen your pelvic floor muscles

These exercises are called Kegels. The standard tip is to tighten up as if you were trying to keep from passing gas or trying to stop the flow of urine. More information on these exercises can be found at : www.health.harvard.edu/healthextra

4. Retrain your bladder

If you have gotten in the habit of going to the bathroom frequently your bladder may begin signaling an urge to go before it is full. This can lead to an overactive bladder.

Bladder retraining consists of gradually increasing the amount of time between voids. A common goal is three hours between voids.



*I wish you a
Blessed
Christmas and
A Very Healthy
New Year*

Mary

mhague@thecapuchins.org