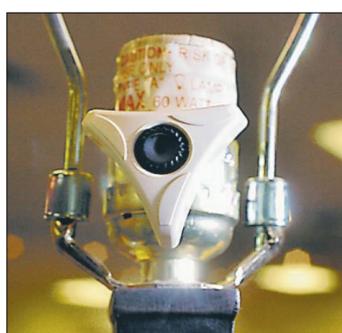


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Helping seniors stay independent

BY LINDA ESPENSHADE
Intelligencer Journal Staff

Choosing to live at home as you age instead of moving to a retirement home may necessitate buying some new gizmos and some practical innovations.

Lots of items are already on the market and more are in the offing as the first of 76 million boomers turn 60 this year.

Here are a few we found as we shopped around town and talked to people in the know. These products might make your life more manageable and safe.

• A variety of pill-dispensing systems combined with alarms are available. Some simply sound an alarm at pre-set times to remind a person to take his or her medicine.

Others, such as Health Watch's MD.2 Personal Medication System, not only sound a personal message ("Mom, it's time to take your medicine"), but also keep reminding her until she pushes the machine's button and dispenses the medication in little cups packaged by a caregiver. (It holds up to 60 doses.)

If the unit sounds for 45 minutes without a response from the patient, a Health Watch monitor begins to make calls to caregivers and, ultimately, to emergency workers.

Visit www.health-watch.com for details.

• Uplift power seats are portable cushions that gradually lift you out of a sofa, armchair or recliner. Made of high-density, slow-release memory foam, the seat holds up to 300 pounds but only weighs 12 pounds. The person sitting on the seat activates it by pulling a lever. The electric-powered seat is available at Ephrata Medical Equipment. More details are available at www.up-lift.com.

• Numerous companies offer "Help, I've fallen and I can't get up" systems. Each year, their capabilities become a little more sophisticated.

Typical systems, such as Vital Link (800-752-5522) and Lifeline (738-6458), allow a person to press a pendant or wristband button to get help. The electronic signal from the pendant sends a message through an emergency response unit installed at your home to a 24-hour monitoring service. A person at the monitoring service can speak directly to the senior citizen through an intercom system. Most units are functional within a few thousand square feet, but the range is affected by the design of your home.

If the patient is unresponsive and can't tell the monitor what he or she needs, the monitor has a predetermined list of people to call who can check on the situation, including family and/or emergency medical personnel.



Health Watch

Health Watch's MD.2 Personal Medication System plays a personalized reminder to take medicine, then dispenses the medicine in individual doses packaged by the caregiver.

Health Watch (1-800-226-8100) offers an added feature that alerts the monitor if the person falls. According to Richard Brooks, president of Health Watch, the sensor, which clips onto a person's belt or fastens into a waist pack, measures acceleration, impact and change of position to determine if a person fell.

When the sensor alerts the monitor of a possible fall, the monitor will speak to the customer over the two-way speaker to find out if he or she needs help. The patient has 15 seconds to cancel a false alarm.

• If a family or a home health care agency needs to monitor a senior's activities on a 24-hour basis, home sensor systems are available, said Daniel George, coordinator of the National Aging in Place Council. Motion sensors are placed strategically around the house to



Suzette Wenger / Intelligencer Journal photos

David Lerch of Ephrata Medical Equipment, above, sits in a wheelchair and demonstrates how a grabber enables someone with limited mobility to pick up items that are not easily reached. Top left, Bill Cameron of Ephrata Medical Equipment uses a portable uplift seat; center, a closeup of an alternative lamp switch; top right, Deb Schaefer demonstrates the use of a zipper pull.

Please see INDEPENDENT page B11

New technology may keep baby boomers at home

BY LINDA ESPENSHADE
Intelligencer Journal Staff

As experts look into baby boomers' futures, they see technology playing a major role in keeping aging seniors at home.

"It's the baby boomers who have essentially invented technology," said Daniel George, coordinator of the National Aging in Place Council. They get just as excited now about using it as they did then.

On the forefront of technological changes are emergency response systems that can be used anywhere, not just at home. Currently, those systems are responsive only when the person is within a few thousand square feet of the base unit, powered by their homes' electrical system.

Using Global Positioning Systems and satellite-based navigation, the new emergency response systems will allow emergency personnel to find a senior citizen anywhere — whether it's on a path in a nature preserve or in the car.

Anytime an older adult has an emergency, he can push the pendant around his neck or wrist. A message

will be sent to the monitoring company, which can pinpoint the person's location so emergency services can be dispatched.

The technology is available now, said Arthur Hoffman, executive director of Vital-Link, an emergency response system. However, his company isn't convinced the units are reliable enough yet to use them, nor are they affordable.

At Health Watch, another company that sells emergency response systems, the barrier is size, vice president Steven Abate said. Right now they are too cumbersome for customers to wear, he said. Company developers are figuring out how to fit the technology into a pendant-size tool.

They expect the GPS emergency response systems to be available sometime within the next year or two.

Doctor visits could become more tech-based in the future, too, using Webcams and tele-medicine for evaluation and diagnosis, George predicted.

Tele-medicine, already used in tandem with some home health agencies, is likely to expand for mainstream use, said Eric Kiehl, public affairs officer for Pennsylvania Homecare Association.

Tele-medicine, as it is used in home care, allows a patient to take his own weight, blood pressure, glucose level, oxygen level and pulse. The information is transmitted by phone line to the home health nurse's computer. The nurse, then, can monitor a person's health between home visits. Some units come with video cameras, so the nurse and patient can talk to each other.

Use of home sensors is expected to become more popular and probably more sophisticated as they become more commonplace and more affordable, Kiehl said.

The potential to add cameras to the home systems is there, but so far privacy concerns have limited consumer demand.

However, some families do use Web cameras, with the senior's permission, so a family member on the other side of the world can know if Mom is moving around normally or if something is wrong, George said.

The cost associated with aging and increasing health care is always an issue as people age, but boomers aren't as afraid to go into debt as their parents were, George said. Boomers are more likely to use reverse mortgages, for example, to pay for their care, he said.

This & that

Women's health

WOMEN'S HEART FAIR: Ephrata Community Hospital has rescheduled a Women's Heart Health Fair for Saturday, from 10 a.m. until 2 p.m. at Ephrata Health Pavilion, 175 Martin Ave., Ephrata.

The event is free, and will include a risk assessment for women; a 10:30 a.m. program on "Nutrition: Little Changes That Can Make a Big Difference;" a program on "A Woman's Heart Needs Special Care" at 12:30 p.m.; cooking demonstrations, free educational materials and more. A light lunch will be served.

Reservations are not necessary; for more information, call the hospital at 738-3556 or visit www.ephratahospital.org.

POWs



POW ANNIVERSARY: This month marks the 33rd anniversary of the first American POW releases in Vietnam. According to a new book, "Open Doors: Vietnam POWs 30 Years Later," 660 of the 725 POWs held in Vietnam survived.

The last to be released was Robert White, who'd been held in solitary confinement for more than three years, on April 1, 1973.

To learn more about the POWs and the book, visit www.opendoorsbook.com.

Heart health

CHELATION STUDY: If you are age 50 or older and have had a heart attack, you might be eligible to take part in a government study testing the effectiveness and safety of chelation therapy, an investigational treatment for people with heart disease.

The study is sponsored by the National Institutes of Health and is the largest of its kind. Chelation therapy is a process in which a synthetic or manmade amino acid called EDTA is delivered intravenously. EDTA binds with molecules, such as metals or minerals, and holds them tightly so they can be removed from the body.

More information on the study is available at the NIH National Center for Complementary and Alternative Medicine's Web site, www.nccam.nih.gov/chelation, or by calling 1-888-644-6226.

Support group

COPING WITH SUICIDE LOSS: When someone dies from suicide, those left behind may find it helps to share their questions and pain with others who understand this type of loss. Hospice of Lancaster County's PATHways Center for Grief & Loss will offer a six-week support series, "Coping With Suicide Loss," on Monday evenings beginning March 20, from 6:30-8:30 p.m. at Hospice of Lancaster County, 685 Good Drive.

Space is limited and registration is required by calling 391-2413.

Benefit

AUTHOR'S LUNCHEON: Chris Bohjalian, best-selling author of "Midwives" and "Before You Know Kindness" will appear at the sixth annual National Library Week Author Luncheon hosted by The Council of Public Libraries and the Library System of Lancaster County.

The event is scheduled for Tuesday, April 4 at noon at the Ballroom at Donecker's Artworks Building, 100 N. State St., Ephrata. Tickets are \$35; call Ronnie Kepchar, 569-6850 to purchase tickets.

Bohjalian has written nine novels. "Midwives," in addition to being a #1 New York Times Bestseller, was named Publishers Weekly Best Book and an Oprah's Book Club selection. His work has been published in 15 languages and two novels have been made into television movies.

For more information, visit www.lancasterlibraries.org.



Chris Bohjalian

