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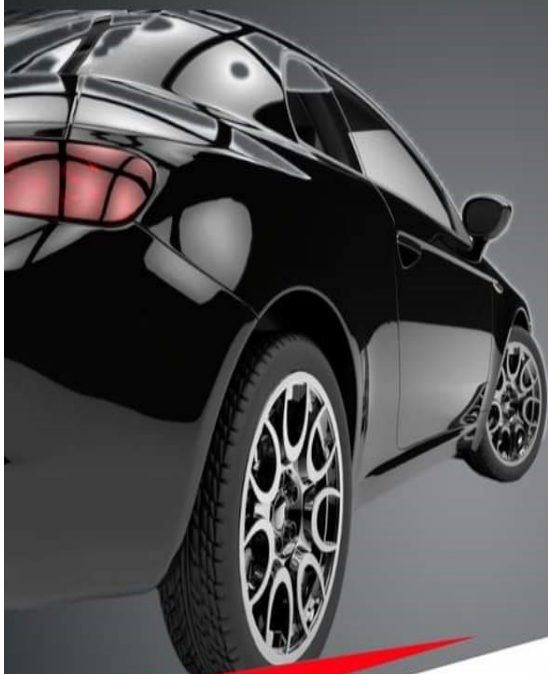
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PENSIONERS FRIEND

Booklet No.1

Free Issue



*In Loving Memory of my dearest
wife and soul mate*

Sharon-Ann Theron (1953-2023)
A Heart of Gold - Courage of a lion

*She had a burning passion to work
together with, or for the elderly
whenever or wherever she could.*

*The booklets name was her idea and
the first of the **52** 'Amanzimtoti'
issues was published in September
2018. Followed in July 2021 by the
'Gauteng South' version..
MHDS RIP*

A BIG WELCOME: To the NEW mini booklet for Senior citizens dedicated to Sharon-Ann's memory which is distributed by email or can be read, downloaded, listened to, or printed from our website: www.pensionersfriend@gmail.com. If you would you like to receive a personal copy please complete the form at the bottom of the page.

On special request we will be happy to add your WhatsApp group to our mailing list so even more seniors can enjoy reading it. If you have ideas on how we can distribute the booklet more widely, please email me at: errolandsharon@gmail.com

PENSIONERS FRIEND - JULY 2023

INDEX

- 1/3 Medication and Falls
- 4 The No1 key to a happy life
- 5 Tips for healthy ageing
- 6/7 What to avoid before bed
- 8 Medication and falls
- 9/10 Types of Laxatives and constipation
- 11 Falls and Balance
- 12 Proud Sponsors - The Rietvlei Car Wash

EDITORIAL - Errol Theron

Welcome to the July 2023 and the 1st issue of the new Pensioners Friend monthly booklet for seniors lovingly compiled and distributed to seniors as a non-profit community project.

Please read and enjoy reading this first issue as much as I enjoyed putting it all together especially for all our special seniors?.

We would appreciate when you have finished reading if you could kindly forward your copy to a friend or family member you think may find the articles interesting. Remember to tell your friends they can read, print or download a copy simply by logging in to our Website at:
www.pensionersfriend.com Our email: **errolandsharon@gmail.com**

THIS FREE BOOKLET

FOR THE ENJOYMENT
IN SOUTH AFRICA AND



IS PRODUCED WITH LOVE

OF ALL SENIOR CITIZENS
WELL BEYOND ITS BORDERS

10. Laxatives and constipation Cont....

Bulk-forming laxatives. These move through the body undigested, absorbing water and swelling to form stools. Commercial options of bulk-forming laxatives include Metamucil and Citrucel, which are available in powder and capsule form.

Stool softeners. These increase the amount of water absorbed by stools to make them softer and easier to pass. Stool softeners include docusate sodium and docusate calcium. They're available in pill or tablet form.

Lubricant laxatives. These coat the surfaces of stools and intestinal lining to keep in moisture, allowing for softer stools and easier passage. Mineral oil is an example of a lubricant laxative that's available in liquid or enema form.

Osmotic-type laxatives. These help the colon retain more water, increasing the frequency of bowel movements. Examples include milk of magnesia and glycerine. These are available as a liquid, caplet, enema, or in a suppository form.

Saline laxatives. Draw water into the small intestine/ encourage a bowel movement.



Sharon-Ann As a wind up Doll at Mooi Hawens Oldies Games fancy dress show in Jan 2015

9. Types of laxatives

Stimulant laxatives. These speed the movement of the digestive system to induce a bowel movement. Stimulant laxatives are available as tablets, pills, powders, chewables, liquids, and suppositories under brand names like Ex-Lax, Senokot and Dulcolax. These over-the-counter laxatives will begin to work within a few hours or it may take a few days to take full effect.

Though over-the-counter laxatives can be very helpful in alleviating constipation, using them too often can cause electrolyte disturbances and changes in body salts and minerals. So If you're looking to achieve regularity, why not try incorporating some natural laxatives into your routine. They can be safe and inexpensive alternatives to over-the-counter products and also have minimal side effects.

Natural laxatives: Fibre is a natural treatment and one of the first lines of defence against constipation. It moves through the intestines undigested, adding bulk to stools and encouraging regularity.

Studies have shown that by increasing your fibre intake you can increase stool frequency and soften the stools to ease their passage.

Chia seeds: are particularly high in fibre, containing 9.8 grams in just 1 ounce (28.4 grams). They mainly contain insoluble fibre, but about 7–15% of the total fibre content comprises soluble fibre. Soluble fibre absorbs water to form a gel, which can aid the formation of softer stools to ease constipation.

Berries: Most varieties of berries are relatively high in fibre, making them a great choice as a mild natural laxative.

Strawberries: contain 1.8 grams of fibre per 100 grams, **Blueberries** provide 3.6 grams of fibre per 150 grams, and **blackberries** boast just under 8 grams of fibre per 150 grams.

Berries are unique as they contain **two types of fibre:** soluble and insoluble.

Soluble fibre: such as that in chia seeds, absorbs water in the gut to form a gel-like substance that helps soften stools. **Insoluble fibre** does not absorb water but moves through the body intact, increasing the bulk of stool for easier passage.

1. Medication and Falls

THE FOLLOWING ARTICLE IS INTENDED TO HIGHLIGHT THE POTENTIAL PHYSICAL DANGERS OF CERTAIN PRESCRIBED MEDICATIONS FOR OLDER ADULTS.

For older adults, falls are a big deal. They can be a real source of worry, and for good reason. Falls increase the risk of hospitalization, disability, and even death. One way to minimize the risk of falls is to review your or a loved one's medication list.

Certain medications can make you more likely to lose your balance and fall.

And taking multiple medications on a daily basis can make falling even more likely. Keep reading to learn more about nine types of medications that may increase your risk of falls.

1. Antidepressants: Certain antidepressants may increase fall risks more than others. Tricyclic antidepressants (TCAs) seem to carry a higher risk than other classes of antidepressants. Examples include: Amitriptyline, Nortriptyline. Another class of antidepressants — selective serotonin reuptake-inhibitors (SSRIs) may also increase the risk of falls in older adults. Examples of SSRIs include: Escitalopram (Lexapro), Sertraline (Zoloft), Citalopram (Celexa)

If you or an older adult in your life needs an antidepressant but is at risk of falling, please talk to your doctor about the different options available as they will be able to suggest the one's that are best for you.

2. Sleep medications: It probably comes as no surprise that medications used to treat insomnia or help with sleep **can make falls even more likely**. Examples of popular medications for insomnia include: Zolpidem, Eszopiclone, Zaleplon. The good news is that there are safer and more effective options to help with sleeping difficulty over the long term. In fact, **experts recommend behavioral therapy as the first-choice treatment for insomnia.**

Behavioral therapy will help you develop habits that can improve your sleep. Plus, it will also change the way you think about sleep. And spare you the possibility of any potentially dangerous side effects.

2. Medication and Falls continued

3. Anti-anxiety medications: To help with anxiety and/or sleep. Many seniors take benzodiazepine medications. But similar to sleep medications these drugs can also make falls more likely in older adults.

Examples of benzodiazepines are: Lorazepam (Ativan), Diazepam (Valium), Temazepam (Restoril), Alprazolam (Xanax). These medications can be especially risky when used long term (**more than 2 weeks**). If you have been using them for a long period of time, talk to your provider about gradually decreasing the dosage when you're ready to stop taking them. **This will help minimize your chances of falling.**

4. Muscle relaxants: Similar to sleep and anxiety medications, muscle relaxants can cause serious side effects in older adults. **Drowsiness and confusion in particular can increase the likelihood of falling. Examples include:** Diazepam (Valium), Methocarbamol (Robaxin), Cyclobenzaprine (Flexeril, Amrix), Metaxalone (Skelaxin), Chlorzoxazone (Lorzone, Parafone Forte, Norflex co).

If you need a muscle relaxant, experts recommend only short-term use where this is possible. The good news is there **are many safer ways** to help your muscles relax.

Older adults can also try: Hydrotherapy, low-impact exercise, physical therapy

5. Anti-seizure medications: Anti-seizure medications (anticonvulsants) often cause dizziness, confusion, and sedation as side effects in older adults. **And these side effects can increase the chances of you falling.**

Examples of anti-seizure medications include: Carbamazepine (Tegretol), Valproic acid (Depakene), Lamotrigine (Lamictal), Oxcarbazepine (Trileptal), Topiramate (Topamax), Gabapentin (Neurontin)

While these medications are diagnosed to prevent seizures, they are also sometimes used to reduce behavioral disturbances in older adults with dementia or Alzheimer's. If you or a loved one is currently taking any of the above medications, please talk to your provider about whether the medication is definitely needed.

7. What should you avoid before bed

Create a night time routine: Put your cell phone away — read a book or do some meditation before bed to calm your brain and slow it down so you can start winding down. Try a relaxing routine before bedtime, which can help your body transition from being active and awake to resting and relaxing for a better night's sleep.

The bottom line

Eating a balanced diet — rich in a variety of vegetables, fruits, whole grains, lean proteins, and healthy fats has been linked to better sleep and overall health and well-being. Focus on eating a Mediterranean-style diet and avoid highly processed foods, large meals, caffeine, or alcohol before bedtime for a more restful sleep. Sleep is an essential part of healthy living, and so is nutrition — both play a role in how our bodies heal and perform.

8. Medication & Falls continued

When it comes to medication please remember that if you can't decrease your dosages or switch to a different medicine option, there are some simple exercises that can help you improve your balance.

You can do many of these while seated in a chair.

A few minutes a day can go a long way to decreasing your risk of falls over the long term.

The bottom line

As you age, it's common to feel less stable on your feet.

An easy way to decrease the chance of falling is to review your medication list.

There are several different kinds of medications that increase the likelihood of falling, especially in older adults. However, in most cases, your provider can help you make adjustments, like decreasing your dosages or changing to a different option.

Optimizing your medications can help you stay steadier longer.

6. What to avoid before going to bed

It's best to avoid some foods and drinks as they can disrupt sleep. Let's take a closer look at some of the foods and drinks you should avoid close to bedtime:

Coffee contains high amounts of caffeine and should be avoided just before bed. For most people, it's recommended to avoid caffeine 6 hours before you sleep. Other foods and drinks that contain caffeine, which may also disrupt sleep, include cold drinks, green, herbal and black teas, and chocolate.

Alcohol, although it may make you feel drowsy and fall asleep faster, actually it disrupts the quality of your sleep. If you are having trouble sleeping or wake up feeling tired, it may be best to avoid that nightcap.

Spicy, acidic foods, like tomatoes and hot peppers, and large meals should be avoided at least 3 hours before bedtime. These foods may increase heartburn and worsen symptoms when lying down.

Tips for getting a better night's sleep

The American Academy of Sleep Medicine (AASM) and Sleep Research Society (SRS) recommend that adults need 7 or more hours of sleep per night. What's more, 1 in 3 adults do not get the recommended amount of sleep.

This statistic is alarming as sleep is a critical part of our overall health. So, what are some ways we can improve our sleep? Aside from proper nutrition, other factors can help influence your sleep, such as your sleeping environment and how much exercise you get during the day. Tips for getting proper shut-eye include:

Get active: It's recommended to get at least 30 minutes of physical activity per day. Walking, running, gardening and swimming are all great choices. Any movement, whether it be big or small, can help.

A good speech should be like a woman's skirt. Long enough to cover the subject and short enough to create interest.

Winston Churchill.

Compliments: Just Doone it our Way—Julian Carter

3. Medication and Falls continued

6. Antipsychotics: Antipsychotic medications are also used to treat agitation in older adults with dementia. Common side effects can include sedation, dizziness, and blurred vision. **These can all contribute to instability and falls.**

Examples of antipsychotics include: Haloperidol (Haldol), Fluphenazine (Prolixin), Perphenazine (Trilafon). Please talk with your provider if you or a loved one takes any one of these medications. While it may not be possible to entirely avoid the medications, maybe changing the dosage will **help decrease the risk of falls.**

7. Severe Pain medications: Opioid painkillers can increase the risk of falls in older adults. Some examples are: Oxycodone, Hydrocodone, Hydromorphone, Fentanyl, Tramadol/Tramacet and Morphine. The danger is these medications are potent and can have a lot of unwanted side effects, **like constipation**, slowed breathing, and drowsiness. They should always be used at the lowest possible effective dosage and for as short of a time as possible. Understandably, in certain situations they may be necessary — like after surgery or for cancer pain treatment.

But for less severe pain, non-opioid medications like acetaminophen (Tylenol) or paracetamol are good alternative choices **for older adults worried about falling.** Avoiding NSAIDs, (nonsteroidal anti-inflammatory drugs) like Advil and Aspirin as far as possible may actually help older adults decrease their likelihood of falling, too.

8. Blood pressure medications: There are many different types of blood pressure medications, and any one of them can increase the chances of an older person falling. So far, researchers haven't found that one type of blood pressure medication increases the chance of falling more than another type.

But the risk is higher in people who have a history of falling. The chance of falling is more likely when changes are made to the medication, like when adjusting the dose.

9. Antihistamines: Older types of antihistamines commonly cause side effects that increase the risk of falling — particularly in older adults. These side effects include blurred vision, sleepiness, and confusion. Some examples include: Diphenhydramine (Benadryl) and Dimenhydrinate (dramamine)

4. The No.1 key to a happy life: 'Social fitness'

Did you know relationships affect you physically. Ever notice the invigoration you feel when you believe someone has really understood you during a good conversation? Or a lack of sleep during a period of romantic strife? To make sure your relationships are healthy and balanced, it's important to practice "social fitness." We tend to think that once we establish friendships and intimate relationships they will take care of themselves. But our social life is a living system and it needs exercise. Social fitness requires taking stock of our relationships, and being honest with ourselves about where we're devoting our time and energy and whether we are attending to the connections that help us thrive.

How to take stock of your relationships: Humans are social creatures. Each of us as individuals cannot provide everything we need for ourselves. We need others to interact with and to help us. **Our relational lives have seven keystones of support**

Safety and security: Who would you call if you woke up scared in the middle of the night? Who would you turn to in a moment of crisis?

Learning and growth: Who encourages you to try new things, to take chances, to pursue your life's goals?

Emotional closeness and confiding: Who knows everything (or most things) about you? Who can you call on when you're feeling low and be honest with about how you're feeling?

Identity affirmation and shared experience: Is there someone in your life who has shared many experiences with you and who helps you strengthen your sense of who you are?

Romantic intimacy: Do you feel satisfied with the amount of romantic intimacy in your life?

Help (both informational and practical): Who do you turn to if you need some expertise or help solving a practical problem (e.g., planting a tree, fixing your WiFi connection).

Fun and relaxation: Who makes you laugh? Who do you call to see a movie or go on a road trip with who makes you feel connected and at ease?

5. Tips for healthy Ageing

It's never too late to start taking better care of yourself. Nor is it too late to become the person you really want to be. Many older adults feel it's too late to change. They're stuck in a rut, doing the same things every day. They may be bored and lack the energy to look into new interests.

Tips for Healthy Aging: Stay positive. Try to maintain an upbeat attitude. Avoid complainers and whiners if you can. Cut the conversation short when negative topics are brought up. **Keep your news watching to a minimum.** There is far too much information and news out there and most of it is depressing.

How old do you feel? If you didn't know your real age, how old would you think you were? Most of us would give an answer that is far younger than our biological age. Keep this in mind instead of worrying about how old you are as it's much healthier for you and helps you to be happier.

Do something creative. There are so many choices available now. Adult colouring books, adult paint by number kits. Used to play an instrument? Think about taking it up again. Bring music back into your life, known to increase the health of your brain.

Start walking. This is something we promise ourselves we'll do more of but keep putting off. Start small. Take a 5 minute walk before breakfast. Increase it a little each week and you'll find that it becomes a habit. **Don't like walking alone?** Look for a walking buddy or take a neighbour's dog for a walk.

A BLESSING OR A CURSE? As a doctor, I have seen many people die – some well, and some badly. There are many ways of dying. It can be fast, or it can be slow, it can be painless or painful, it can be horrible, even in the modern age (whatever some palliative care doctors might claim to the contrary) or a peaceful fading away. And sometimes it is dragged out with intensive care and resuscitation, which all too easily can become a charade, a dance of denial. But only rarely is dying easy, and most will end our lives in hospital (only a few die in hospices), in the care of strangers, with little dignity and no autonomy. Although scientific medicine has brought great and wonderful blessings, it has also brought a curse – dying, for many of us, has become a prolonged experience, even if severe pain is now only rarely a problem.