



The **MARCH** Yorktown Assisted Living Newsletter

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Dear Residents, Families and Friends:

Well, February had only 28 days this year but it did not affect our activities and special events. On Valentine's Day, we were treated to an interesting Valentine's Day history documentary, a special lunch and a scrumptious sweet treat cart. Last but not least, we learned about the Chinese' Year of the Snake and enjoyed a festive Super Bowl tailgate party. We are looking forward to a very busy March!

Our March poem:

**March arrives with skies so bright,
The world awakens to fresh light.
Birds sing sweetly, a welcome sound,
As hints of spring spread all around.**

**With warming days and fields so green,
A time of cheer, a joyful scene.
Festivals bloom with laughter and song,
As hearts embrace where we belong.**

**March reminds us, loud and clear,
New beginnings now appear.
So let us gather, laugh, and cheer,
For spring's first joy is finally here!**

-- Catherine Pulsifer

All the best to you and yours,

Joan Marie Whalen

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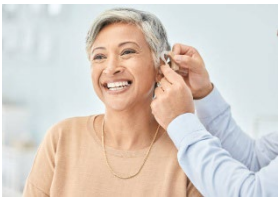
Everything You Should Know About March

Welcome to the third month of the year – or if you were born before 150 B.C., the first! According to the oldest Roman calendars, one year was ten months long, beginning in March and ending in December. It may sound crazy, but you can still see traces of this old month-naming system in our modern calendar because December was the tenth month. It was named for the number ten in Latin (decem), just like September was named for seven (septem). So, what about January and February? They were just two nameless months called “winter,” proving that winter is literally so awful it doesn’t even deserve a spot on the calendar

So, if so many months were named for their Latin numbers, why wasn’t March called...unnumber? Firstly, because that sounds ridiculous and secondly, because the Roman gods had dibs on it. March was actually named for the Latin Martius – aka Mars, the Roman god of war and a mythical ancestor of the Roman people via his sons Romulus and Remus. With the winter frosts melting and the ground becoming fertile for harvest again in the Northern hemisphere, March was historically the perfect month for both farmers to resume farming and warriors to resume warring.

And we have all heard it uttered, but what does “beware the Ides of March” actually mean? On the Roman calendar, the midpoint of every month was known as the Ides. This day was supposed to correlate with the first full moon of the year, but thanks to Shakespeare’s Julius Caesar, we know it for another reason.

Supposedly, in 44 BC. A seer told Julius Caesar that his downfall would come no later than the Ides of March. Caesar ignored him, and when the fated day rolled around, he joked with the seer saying “the Ides of March have come.” The seer replied: “Aye, Caesar, but not gone.” Caesar continued on to a Senate meeting at the Theatre of Pompey and was summarily murdered by as many as 60 conspirators. So, if someone tells you “Beware the Ides of March,” they are probably just letting you know they have read Shakespeare.



The Hidden Risks of Hearing Loss

Hearing loss is frustrating for those who have it and for their loved ones. But recent research from Johns Hopkins reveals that it also is linked with walking problems, falls and even dementia.

In a study that tracked 639 adults for nearly 12 years, Johns Hopkins expert Frank Lin, M.D., Ph.D., and his colleagues found that mild hearing loss doubled dementia risk. Moderate loss tripled risk, and people with a severe hearing impairment were five times more likely to develop dementia.

“Brain scans show us that hearing loss may contribute to a faster rate of atrophy in the brain,” Lin says. “Hearing loss also contributes to social isolation. You may not want to be with people as much, and when you are you may not engage in conversation as much. These factors may contribute to dementia.”

As you walk, your ears pick up subtle cues that help with balance. Hearing loss mutes these important signals, Lin notes. “It also makes your brain work harder just to process sound. This subconscious multitasking may interfere with some of the mental processing needed to walk safely.”

Everything from genes and noise exposure to medications, head injuries and infections can play a role in hearing loss. Trouble detecting soft or high-pitched sounds is often the first sign that stereocilia — the delicate hair cells that convert sound waves into electrical signals within the ear — have been damaged. Soft sounds include phone conversations or background noise in settings such as restaurants. High-pitched sounds may include children’s voices. Ringing in the ears, called tinnitus, is another early signal of possible hearing loss.

Can hearing aids reduce these risks? Lin hopes to find out in a new study, still in the planning stages. “These studies have never been done before,” he notes. “What we do know is that there’s no downside to using hearing aids. They help most people who try them. And in those people, they can make all the difference in the world—allowing people to reengage with friends and family and to be more involved again.”

Although nearly 27 million Americans age 50 and older have hearing loss, only one in seven uses a hearing aid. If you think your hearing has diminished, it’s worth making an appointment with an audiologist for a hearing check, Lin says. If you have hearing loss, don’t let the following myths keep you from getting help:

Hearing Loss (Continued)

“My hearing’s not *that* bad.”

Hearing aid users wait, on average, 10 years before getting help for hearing loss. But during that time, communication with loved ones becomes more difficult, and isolation and health risks increase. “Our findings emphasized just how important it is to be proactive in addressing any hearing declines over time,” says Lin.

“Wearing hearing aids means I’m old, and I’m not ready for that.”

It’s normal to feel worried that hearing loss means you’re aging—and to want to hide it. Plenty of people with a hearing impairment sit silently rather than joining in conversations and activities, because they fear that hearing problems will make them seem helpless or less than competent. The truth: Connecting with others can help your brain stay younger and keep you involved with life.

“I don’t like the way hearing aids look.”

Forget the old days of big, whistling earpieces. Today’s hearing aids and cochlear implants are smaller (and less conspicuous) than ever before. Even celebrities (like former president Bill Clinton and football Hall of Famer Mike Singletary) are wearing them proudly.

“I heard that hearing aids are difficult to use.”

There is a breaking-in period as you—and your central auditory system and brain—adjust to life with hearing aids. That’s why most doctors and hearing centers include a trial period, so you can be sure the type you’ve chosen—whether it’s a miniature behind-the-ear model or one that fits into your ear—is right for you.

Definitions:

Social isolation: Loneliness that can affect health. People who are socially isolated have little day-to-day contact with others, have few fulfilling relationships and lack a sense of belonging. Social isolation can increase the risk for poor eating, smoking, alcohol use, lack of exercise, depression, dementia, poor sleep, and heart disease.

Dementia (di-men-sha): A loss of brain function that can be caused by a variety of disorders affecting the brain. Symptoms include forgetfulness, impaired thinking and judgment, personality changes, agitation, and loss of emotional control. Alzheimer’s disease, Huntington’s disease and inadequate blood flow to the brain can all cause dementia. Most types of dementia are irreversible.

Cochlear (koe-klee-er) implant: A device implanted into the inner ear to stimulate the auditory (hearing) nerve. It’s used to help restore sound perception in children and adults with profound hearing loss.

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Tips for Talking to Your Doctor

Your grandmother probably remembers how the doctor used to make house calls, or how she could go into the office and talk to him (and in those days, it probably was a him) without an appointment. But the pace of modern medical care has changed that dynamic.

Today, it's normal for primary care providers to be pressed to see as many patients as possible in a day and for patients to bounce between practitioners in a group practice. Patients have their own busy schedules, too, and they want to get in and out of the office quickly.

In light of this, having a strong relationship with your primary care provider (whether you see a physician, certified nurse practitioner or physician's assistant) is crucial to getting the most out of each visit. When it comes to doctor-patient communication, women have an advantage, says Debra Roter, D.Ph., a professor at the Johns Hopkins Bloomberg School of Public Health who has studied doctor-patient interactions and communication dynamics for more than 40 years.

Whether you're already a great communicator or you feel like you want your doctor to understand you better, Roter offers four key elements to maximize your visit.

1. Set an Agenda

Many doctors' visits last only 15–20 minutes, so it's important to prioritize your concerns by setting an agenda, Roter says. According to her research, the length of an appointment matters less than its quality. Before the visit begins, create a list of topics that you want to address. Introduce them at the start of your visit.

“The way in which time is used really makes a critical difference,” she says. “Your outline doesn't need to be complex; it can simply be that you have medical problems, fears or worries that you want to discuss.”

2. Be Honest

Roter urges patients to be honest about worries and concerns. She calls this telling the “real deal.” “It's important to share things about your lifestyle, social obligations and relationships at home and at work,” she says. “Sometimes patients are fearful that the doctor isn't interested or that it isn't relevant.” But providing detailed information helps a doctor get the full picture of your overall well-being and assess lifestyle factors that might contribute to your health.

Also, don't be afraid to bring up pain or a feeling that's bothering you, even if it's embarrassing. Your doctor's job is to help you feel better, and he or she is required to protect your privacy.

Talking to your Doctor (Continued)

3. Ask Questions

Medical visits can be overwhelming and sometimes even the most well-meaning doctor can present too much information too quickly and in complex terms. It's OK to ask questions, and Roter stresses that you should feel comfortable asking as many of them as you need to understand your doctor's advice.

“Sometimes people are reluctant to ask questions. Ask your doctor to clarify what they're saying in plain language if they're talking in medical-speak,” she says. “It's perfectly fine to say, ‘Sorry, I'm just not following you. Can you explain that in another way?’” Next, repeat the information back to your doctor. This will help you absorb it, and it will also help the doctor know whether you understood. And if you didn't understand everything? That's perfectly natural, too. Often, a doctor will need to repeat information in a different way so that it's clearer.

Be sure your doctor has understood what you told him or her. For example, if you talk about a concern — such as a lump in your breast — and your doctor brushes it off, don't be afraid to revisit the issue. “We know from studies that physicians tend to reassure patients a lot, and patients sometimes feel that this reassurance is premature,” Roter says. “It's fine to say, ‘I'm not sure you really heard how concerned I am about this.’” If you emphasize your concerns, your doctor can explain his or her reason for reassuring you and revisit the issue more deeply.

4. Work Collaboratively

Finally, it's important to work together with your doctor for the best outcome. If your doctor recommends a treatment, share your worries about possible side effects or questions about other options, Roter suggests. This is a way to actively partner with your doctor to make treatment decisions that are most likely to work for you. It's a win for you and a win for your doctor, so don't be afraid to ask him or her to help you understand your options.

“A critical part of the conversation is saying to the doctor, ‘I understand that all treatments have risks and benefits. Can you help me compare these to other treatments?’” Most of all, try to control your anxiety by expecting a good outcome before the appointment starts. “If you enter the room expecting that the doctor is going to help you, then it sets the tone. The best doctors are trained in mindfulness, for instance, which tells them to take a minute to focus on the new patient and really see the person in front of them. And I think patients need to do this, too,” Roter says.

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Did You Know....

- 1. The world's oldest wooden wheel has been around for more than 5,000 years.** It was found in 2002, approximately 12 miles south of Ljubljana, the capital of Slovenia..
- 2. Sudan has more pyramids than any country in the world.**
- 3. German chocolate cake was invented in Texas.** It's named after an American, Sam German, who in 1852 created the formula for a mild dark baking chocolate bar for Baker's Chocolate Co.
- 4. The Philippines consists of 7,641 islands.** The Philippines is an archipelago, which means it's made up of a group of islands—7,641 islands, to be exact.
- 5. There's enough gold inside Earth to coat the planet.** 99 percent of the precious metal can be found in the Earth's core, *Discover Magazine* reports.
- 6. It takes a drop of water 90 days to travel the entire Mississippi River.** Spanning 2,340 miles, the Mississippi River is the third-largest watershed in the world.
- 7. Peanuts aren't technically nuts.** They're legumes. According to *Merriam-Webster*, a nut is only a nut if it's "a hard-shelled dry fruit or seed with a separable rind or shell and interior kernel." That means walnuts, almonds, cashews, and pistachios aren't nuts either. They're seeds.
- 8. Kleenex tissues were originally intended for gas masks.** When there was a cotton shortage during World War I, Kimberly-Clark developed a thin, flat cotton substitute that the army tried to use as a filter in gas masks. The war ended before scientists perfected the material, so the company redeveloped it to be smoother and softer, then marketed Kleenex as facial tissue instead.
- 9. Only a quarter of the Sahara Desert is sandy.** Most of it is covered in gravel, though it also contains mountains and oases. And here's another geography fact that everyone gets wrong: It isn't the world's largest desert. Antarctica is.
- 11. Medical errors are a top cause of death.** According to a Johns Hopkins research team, 250,000 deaths in the United States are caused by medical error each year. This makes medical error the third leading cause of death in the country!
- 12. Abraham Lincoln was a bartender.** You know that the 16th president of the United States fought for the freedom of slaves and the Union, but what you didn't know is that he was a licensed bartender. Lincoln's liquor license was discovered in 1930 and displayed in a Springfield liquor store.

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From the Desk of Director of Recreation Amanda Grieve

Some very special and exciting activities in March include:

Tuesday, March 4 1:00 PM Inside Mardi Gras Documentary 1st Floor
**Tuesday, March 4 2:30 PM (aka “Fat Tuesday”
or Shrove Tuesday) Ice Cream Bar. 1st Floor**

Wednesday, March 5 -- Ash Wednesday, which marks the start of Lent.

Wednesday, March 5 3:00 PM Documentary, Women History Month 1st Floor

Thursday, March 6 1:00 PM Drama Club – “Where There’s Smoke” 1st Floor

**Thursday, March 6 3:15 PM WORLD WAR HISTORY CLASS WITH
YORKTOWN HISTORY TEACHER AND TRUSTEE YORKTOWN
HISTORICAL SOCIETY CHRIS DIKPASUALE (“MR. D”) GREAT ROOM**

March 8 is International Women’s Day, which is a day that celebrates the achievements of women and the progress made toward women’s rights.

MARCH 9 IS THE START OF DAYLIGHT SAVING TIME.

Wednesday, March 12 3:00 PM Documentary, Women History Month 1st Floor

Thursday, March 13 1:00 PM Purim Poem and Discussion 1st Floor



March 14, the Full Worm Moon -- a total lunar eclipse will occur giving way to a spectacular view of the blood moon across North America when the moon is at its brightest!

March 14, 3:30 PM Howie and Friend give preview of upcoming performance. Great Room

SUNDAY, MARCH 16 12:45 PM IRISH STEP DANCERS GREAT ROOM

Monday, March 17 11:30 AM ST. PATRICK DAY LUCKY IRISH LUNCH Dining Hall
1:30 PM YALR Irish Pub – Pong and Tats Great Room

March 19, 3:00 PM Documentary – Women History Month 1st Floor

March 20 brings about the March equinox, also called the vernal or spring equinox in the Northern Hemisphere that marks the beginning of spring.

FRIDAY, MARCH 21, 3:30 MUSIC WITH GIGI GREAT ROOM

Wednesday, March 26 3:00 PM Documentary – Women History Month 1st Floor

Friday, March 28, 1:30 PM Resident Council Dining Hall



A collaborative mural to celebrate Valentine's Day



Kate McCarthy enjoys a festive Super Bowl lunch



Debbie Polenscar gives a Valentine hug to Grace Colesanti and Olive Singh



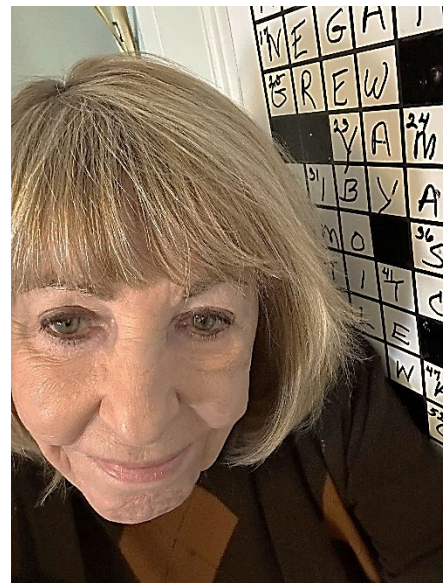
Joyce is ready for the big game.



Sarah Falkins holds a beautiful Valentine.



Our new Administrator Tammy Christou dances with Carol Hotchkiss and exercise instructor Nanette.



Editor Joan Whalen leads her “Brain’s Only” Saturday Crossword



Fred and Carol Hotchkiss share with the Sharing Circle a copy of their wedding photograph and romantic correspondence.



Grace Colesanti, Olive Singh, Joan Fontana, Michelle Holzman, Rose Maiello, Lucille Neidhardt, Sarah Falkins and Christine Vuto are playing the challenging Left-Center-Right (LCR) game.