

Ticker Talker

The Mended Hearts, Inc. SOC

South Orange County

Chapter 216 * Chartered 1989



Volume 25, Number 11

www.mendedhearts216.org

November 2015

FOR THE HEART PATIENT AND THEIR FAMILIES

"Alzheimer's & Dementia: there is care, support and hope for a cure"



Patty Barnett Mouton has served as the Vice President, Outreach & Advocacy, for the Alzheimer's Association, Orange County Chapter since 2005. She manages clinical outreach and education for physicians, nurses, social workers and other health care providers, as well as the Advocacy and Public Policy activities at the local, state and federal levels. She is active in the Orange County Aging Services Collaborative, the OC Healthy Aging Initiative committee. Patty has served as co-chair of the OC POLST Coalition since 2010, and manages the OC Advance Care Planning Initiative. She serves on the CalOptima member advisory committee, and currently chairs the CalOptima OneCare Connect advisory committee.

She has been a featured lecturer at the following conferences: California Council of Geriatrics and Gerontology, American Society on Aging National Conference, California Association of Health Services at Home Conference, ALFA National Conference and the National POLST Conference. She holds a certificate in Gerontology from USC and a certificate in Palliative Care Chaplaincy from CSU San Marcos.

Patty and her husband Roger live in Laguna Niguel with Keiko, their rescue dog, and are happy grandparents of Miranda, Arthur, Serena and Keegan.



*Don't forget the program starts at 7:00 pm, Wednesday
November 18th at the Conference Center.
Come early for a seat as the program is always very popular
and the public is invited. Refreshments start at 6:30 pm.*

Location:
*Mission Hospital Conference Center
26726 Crown Valley Parkway
Mission Viejo, CA*

Chapter 216 Board of Directors and Contacts

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Regional Contacts

<i>Regional Director</i>	Ron Manriquez		rmanriquez@gmail.com
<i>Assistant Regional Dir.</i>	Angela Manriquez		scemanriquez@gmail.com

National Headquarters

www.mendedhearts.org

Our Mission:

“Inspiring hope and improving the quality of life for heart patients and their families through ongoing peer-to-peer support.”

Note to recent heart surgery patients and others considering membership:

We hope all of you who have had a stent emplaced or undergone heart surgery or other heart procedures will seriously consider joining Mended Hearts. You will receive the next three issues of this newsletter to help you get acquainted with who we are and what we do. Of course you already know about our most important activity—visiting heart patients and their families before and immediately after surgery. We hope your Mended Hearts Visitor made a positive difference during your surgical experience. We invite you and your family to attend some of our upcoming monthly meetings (Third Wednesday each month, see page 1). We welcome you and your family as our guests and would enjoy having you join us as members (application, pg 11). We have shared a special experience, either as surgical patients or as caregivers and together we can smooth the path for each other and for those who follow down the same path in the future.

Visitors Report October 2015

	<u>MO</u>	<u>YTD</u>
Hospital Visits	11	96
Phone Visits	2	14
Visitors	5	50
Visitors Trainees	0	1

Visitors: Dennis Galloway, Rocco, Dave Butler, Barb Lane, Ben Buchanan

Visitors Coordinator for the months as follows:

November	Dee Nangle	949-582-2719
December	Jo Cristian	949-581-1824
January	Barb Lane	949-859-3400

Look forward to seeing you all at our Holiday Gala. Perfect way to start our Holiday Season!

Barb Lane & Dee Nangle

Presidents Heartfelt Message

From the CardioPulmonary Rehab Center



Mended Hearts Awards Two Nursing Scholarships

On Wednesday, October 21st, at a Mended Hearts member meeting, Dennis Galloway, President and members awarded \$1000 scholarships to Jennifer Spignese, RN, BSN and Heidi Omans, RN, ONC both of whom work in the Cardiac Telemetry unit. These scholarships will help Ms. Spignese

in achieving her MSN and Ms. Omans on her BSN degree.

I shared with the attendees the importance of an educated health care community and the nursing Magnet designation held by the hospital. Then said, "We are very proud and grateful for the quality of heart care we have received here at Mission Hospital. These scholarships are our way of saying thank you to the hard working nurses that staff the cardiac care unit".

Unfortunately neither Jennifer nor Heidi was able to attend the meeting due to illness and work schedule. Here are a few sentences I extracted from their qualifying essays.

Heidi writes, "As a recipient of this scholarship, I feel my chances for achieving my educational and career goals with mission Hospital would be largely enhanced, as I see a long and rewarding future with Mission Hospital. I am excited to continue to improve and climb the educational ladder to success".

Jennifer writes, "With the help of the Mended hearts Scholarship, I will be able to continue to pursue a Master of Science in Nursing Family Practitioner degree from Gonzaga University, making me better equipped to serve the healthcare needs of individuals and families throughout the lifespan. In particular to this role, I would like to practice on the preventative side of cardiac healthcare, thereby contributing to the well being of our entire community".

Both Heidi and Jennifer extend their gratitude and heartfelt "THANK YOU" for the very generous scholarships awarded them.

Mended Hearts December 6th annual Gala.

Time is running out to make your reservations and meal selections for this years Gala. Find the reservation form in this issue of the Ticker-Talker or on our website fill it out and mail TODAY with your check.

Have a very Happy Thanksgiving!

Dennis

"It's great to be alive-and to help others!"

Dear Mended Hearts

In the past, we offered a Patient and Family Support Group prior to the monthly Mended Hearts meetings.

Although this support group isn't currently meeting, we do have a Patient and Family Support Group that meets every Monday morning at 10:00 AM in the CardioPulmonary Rehab Center.

This is a friendly, supportive and confidential environment to explore the challenges of your health condition.

Eric Jaeger, RN, facilitates the group and is also able to answer health-related questions you may have. Please feel free to attend this group session as often as you'd like.



Here's to Your Good Health and Happy Thanksgiving to All!

Elaine 



<https://www.facebook.com/MendedHeartsChapter216>



Thank you to our Community Supporters



Jon Greer presents check to Heidi Omans



Dennis Galloway presents check to Jennifer Spignese

Chapter 216 Members Page - November 2015

Birthdays - November

Lewis Einbund	11/05
Annette Foyer	11/06
Earl Welk	11/09
Larry Janisse	11/10
Dave Butler	11/11
Raymond Mistro	11/23
Don Hall	11/27
Phyllis Lueck	11/27
Michael Nobile	11/27
Ron Tompkins	11/27
Mike Bresnan	11/28
Jim Frey	11/28

New Members

Always looking to grow our family, Mended Hearts welcomes you to join our cause.

You'll be able to make a difference in a patient's recovery and outlook on life, as well as interact with other members through local chapter meetings, volunteer opportunities and special events.

Your application is on page 11 of this newsletter, fill it out and join today!



Mendiversaries - November

Bill Huber	11/02/1993
Jenny Katzen	11/12/1998
Robert Wegner	11/11/1999
Y. P. Tang	11/08/2000
Lewis Wilson	11/12/2003
Dr. Gary Phillips	11/01/2004
Ron Tompkins	11/05/2007
Mahmoud Ghafouri	11/01/2008
Winton O. Sanson	11/22/2008
Macy Lindsay	11/21/2011

"It's great to be alive - and to help others!"

Chapter 216 Meetings 2015 Meeting Schedule

Nov. 18	Patty Mouton, Alzheimer's Association Orange County
Dec. 6	Annual Mended Hearts Gala See Invitation in this newsletter

Mission Hospital Conference Center
26726 Crown Valley Parkway
Mission Viejo, CA
Meeting starts at 7PM



If we missed your mendiversary or birthday and would like it included in the Ticker Talker please email it to:
socalcarculture@yahoo.com

The latest news from Cleveland Clinic

How a Peanut Butter Test May Detect Alzheimer's

Peanut butter. Creamy or crunchy – and oh, so spreadable – but not exactly your first thought as a game changer in Alzheimer's research.

But it may well be, according to researchers at the University of Florida who conducted the peanut butter smell test hoping to find a relationship between loss of smell and the detection of early-stage Alzheimer's.



They were able to use the test to confirm an Alzheimer's diagnosis. But they would like to be able to predict which patients are going to get Alzheimer's disease.

Peanut butter smell test: the lowdown

So what exactly does a peanut butter smell test consist of?

1. Each person begins with closed eyes and mouth and they even close up one of their nostrils.
2. A researcher opens a jar of peanut butter and stands a good distance from each person, coming closer to the person until he or she can smell the peanut butter.
3. The researcher measures this distance.
4. The process is repeated using the other nostril after a 90-second break.
5. During testing, the research group is not aware of which people in the study had been diagnosed with Alzheimer's

What researchers found is peculiar. The sense of smell in the left nostril specifically was severely impaired in the tested group who already had early-stage Alzheimer's.

In order for people to smell the peanut butter through their left nostril, the container had to be an average of 10 centimeters closer to the nose than for the right nostril.

"This is a significant part of this study," says Dylan Wint, MD, who works in the Cleveland Clinic Lou Ruvo Center for Brain Health.

"There is a lot of research showing Alzheimer-related brain shrinkage starting on the left side of the brain, which is where the temporal lobe degenerates first."

Ongoing research needed

The research showing a difference in the ability to smell peanut butter with each nostril was published in the Journal of the Neurological Sciences in 2013.

However, a follow-up study in 2014 conducted by researchers at the University of Pennsylvania was not able to replicate the earlier findings. In testing 15 patients with Alzheimer's disease, they found no difference in the ability to detect the peanut butter smell in the left and right nostrils.

"This highlights the scientific importance of studies being repeated and refined by other researchers in different patient populations," Dr. Wint says.

Research continues, with a plan to study patients with mild cognitive impairment.

Cheap, accurate testing

Cheap tests that are accurate and accessible can inform more patients about their Alzheimer's status – and it can lead to better research of the disease, Dr. Wint says.

Currently, the most accurate early-stage diagnostic tests for Alzheimer's involve a spinal tap or an amyloid PET scan. However, these tests are expensive, uncomfortable and not available everywhere.

"The accessibility of current Alzheimer's tests is one of the issues that is making diagnosis and research difficult," says Dr. Wint. "The amyloid PET scan can cost \$5,000 and that is just to figure out who should be studied in any Alzheimer's study for early-stage diagnosis," he says.

Dr. Wint adds that the importance of diagnosing early-stage Alzheimer's is that it is critical to finding treatments that delay or prevent future memory loss.

<http://health.clevelandclinic.org/2015/10/peanut-butter-test-may-detect-alzheimers/>

healthessentials

The latest news from Cleveland Clinic

Drug Shows Promise in Reducing Agitation Due to Alzheimer's

A new study suggests that a drug already on the market may help people with Alzheimer's disease-related agitation.

The drug, called AVP923, has approval from the Food and Drug Administration (FDA) to treat a disorder called pseudobulbar affect. The study, led by Cleveland Clinic neurologist Jeffrey L. Cummings, MD, suggests that the drug also may help manage agitation in patients with Alzheimer's.

People with Alzheimer's experience a number of symptoms that are disabling. As the disease progresses, more severe symptoms emerge. One of the most debilitating is agitation. This condition can cause people with Alzheimer's to lash out physically and verbally at others, or become restless or upset.



No drugs available

While there are strategies to lessen the environmental stimulation that can prompt or exacerbate agitation in people with Alzheimer's, no drugs are available to treat this common condition.

Researchers led by Dr. Cummings in the randomized, double-blind trial studied a total of 220 patients with Alzheimer's disease between the ages of 50 and 90. They found that people with moderate to severe agitation who took the drug saw a 60 percent reduction in symptoms compared to the control group.

Reduction of the symptoms began within a week of starting the medicine. The decreased symptoms lasted through the study's entire 10 weeks.

"The results of the trial for the drug AVP923 showed that patients who received it had a statistically significant reduction in their agitation compared to those who received a placebo," says Dr. Cummings. Dr. Cummings is Director of Cleveland Clinic's Lou Ruvo Center for Brain Health in Las Vegas and Cleveland.

Different symptoms, different stages

Agitation is a direct result of Alzheimer's disease. It may be caused by a number of factors, including medication or a biological inability to deal with new information or stimulation.

Agitation often causes someone to shout, kick, curse, and throw things. It often makes it difficult for caregivers to provide care. Agitation is one of the main reasons people with Alzheimer's move to nursing homes for care.

"If we're able to treat agitation effectively, we'll be able to keep patients home for a longer period of time," Dr. Cummings says. "That will be a great win for patients and their families."

The drug still needs to undergo one more type of study before the FDA will consider approving it to treat Alzheimer's agitation, Dr. Cummings says. That process probably will take two to three years.

Numbers to grow

Other debilitating symptoms of the disease include:

- Mood conditions including depression, irritability and anxiety
- Apathy
- Memory loss

More than 5 million Americans have Alzheimer's disease. The disease costs the nation \$200 billion in direct health care costs.

As the percentage of Americans older than 65 continues to grow, estimates are that the number of people with Alzheimer's will nearly triple to 13.8 million in 2050, with health care costs ballooning to \$1.2 trillion.

<http://health.clevelandclinic.org/2015/10/drug-shows-promise-reducing-agitation-due-alzheimers/>

healthessentials

The latest news from Cleveland Clinic

New Treatments for Your Heart Valves

Each year, more than five million people in the United States are diagnosed with diseases involving the valves that control blood flow through the heart. A variety of new procedures and techniques are making it possible for cardiac surgeons to treat these diseases less invasively, with fewer complications and shorter recovery times.

Most heart valve problems occur in the aortic valve and the mitral valve. The most common valve diseases are stenosis (a narrowing of the valve) and regurgitation or leaky valve.



Sutureless surgery for aortic valves

To treat aortic stenosis, which affects about 1.5 million people in the U.S., thoracic and cardiovascular surgeon Jose Navia, M.D. and his colleagues at Cleveland Clinic have been participating in clinical trials of a new stent that has a “self-expandable” frame. The frame expands in response to normal body temperature after it is placed in the aortic annulus (the ring of fibrous tissue surrounding the valve). The stent unblocks the valve as the self-expandable frame opens. Body temperature keeps the device open, eliminating the need for sutures.

One of the key benefits of this sutureless technique is that the stent can be placed within only two to three minutes, compared to the 20 minutes required with traditional methods. This procedure improves safety by reducing the time on cardiopulmonary bypass and the length of ischemic time (the time during which blood is not flowing through the heart).

“This procedure is a step forward in technology to reduce trauma to the patient,” says Dr. Navia. The technique can be used for any person who is a candidate for surgery for aortic stenosis. The device has been used in Europe for several years and is expected to receive Food and Drug Administration approval in the U.S. soon.

Exchangeable valve leaflets

Patients who have already had heart valve replacement surgery might need surgery again after several years when one or more leaflets of the valve replacement become calcified. A technique developed by Cleveland Clinic cardiac surgeons makes it possible to replace only the damaged leaflet while keeping the base of the original valve replacement intact.

The less invasive procedure reduces the time of surgery, recovery time and the risk of complications.

New hope for mitral valves

Mitral regurgitation (MR) is one of the most common heart valve diseases. An estimated 2-2.5 million people in the U.S. have moderate or severe MR, and that number is expected to grow to 5 million by 2030.

A new procedure shows promise in the treatment of MR for people who cannot be treated with open surgery. The procedure repairs the mitral valve with a clip made of titanium (a biocompatible metal) that connects the front and back valve leaflets. This connection prevents blood from flowing back into the heart.

The procedure is done percutaneously by an interventional cardiologist and cardiac surgeon, who use an x-ray technique called fluoroscopy to guide the clip through a catheter that has been placed through the thigh artery via a small incision. The MitraClip® received FDA approval in 2013.

Dr. Navia and his colleagues at Cleveland Clinic are also working on a procedure to replace the mitral valve percutaneously (through a small incision and placement of a catheter in a major vein in the thigh). Stay tuned for more exciting advances in the near future!

<http://health.clevelandclinic.org/2015/10/new-treatments-for-your-heart-valves/>

healthessentials

The latest news from Cleveland Clinic

Older Adults and Falls: Deadly But Preventable

Contributor: Ronan Factora, MD



One sentinel event – an unexpected incident that can result in death or serious harm – often overlooked in older adults is a fall. About one in three people older than age 65 will experience a fall in one year.

People in this age range who fall and fracture their hip have a 25 percent to 30 percent chance of dying after one year. In addition, these people often cannot regain their earlier level of independence. Falls are the most common reason for nursing home placement.

Given the problems associated with falls, the American Geriatrics Society recommends people age 65 or older receive an evaluation if they fall or complain of difficulty with balance. This evaluation is meant to prevent the next fall or a fall related to balance difficulty.

Both of these problems typically have several contributing factors. They may include:

- Problems with vision such as cataracts, macular degeneration, diabetic eye changes and glaucoma.
- Uncontrolled pain, which is most often due to arthritis, particularly in the back, hips or knees.
- Muscle weakness, which often related to prolonged periods of inactivity
- Medicine – the risk of falls increases with the number of medications an individual takes. Lightheadedness, particularly when getting up from a lying or sitting position, can indicate that blood pressure medications are too strong. Psychotropic medications like antidepressants and antipsychotic medications all increase the danger of falls.

By addressing these issues, the possibility of falls can decrease.

There are some risk factors for falls, though, that cannot be changed. These include age-specific medical conditions such as dementia, Parkinson's disease, peripheral neuropathy, prior fall and the need to use an assistive device to move around.

At the doctor's

What should you expect from an evaluation with your doctor? You should be checked for orthostatic hypotension,

which is a significant change in blood pressure when changing position from lying or sitting to standing. Hypotension often is associated with lightheadedness or dizziness that happens after the change in position, but then goes away.

Your doctor also should ask about pain that limits mobility, check you for muscle weakness, particularly in the lower extremities, look for significant balance problems, watch you while you walk to see if there is anything unusual and ask you about pain.

In addition, your doctor should evaluate your medications to see if there are any that contribute to risk of falls that can be discontinued. Your doctor also may recommend that you get your vision evaluated by an ophthalmologist. This type of specialist has the training and experience to check for problems with the retina, such as macular degeneration or diabetic retinopathy, and problems with peripheral vision.

Reduce your risk of falling

What can you do yourself to reduce your risk of falling? Getting your medications reduced – particularly removing any psychotropic medications – is probably the most useful intervention.

A physical therapy evaluation can identify specific problems with strength and balance that can be corrected with an individualized regimen of exercises. It's important to do these exercises every day, and continue the exercises even after formal therapy is completed. Otherwise, all that's gained from the therapy could be lost very quickly.

Removal of cataracts, particularly in people who have had a fall, is beneficial. It's important to make sure both eyes are done in the shortest period of time possible, and that your prescription for corrective lenses is adjusted after the cataracts are removed.

Research suggests several exercises, including tai chi and yoga, help reduce the risk of falls. Falls risk reduction from tai chi can last for up to two years after a 12-week program is completed.

An evaluation can identify many interventions that you can incorporate into your lifestyle to reduce the risk of falling. So the problem of falling is one that can be reasonably addressed. The alternative of ignoring the issue can have significant implications for your future well-being.

<http://health.clevelandclinic.org/2015/10/older-adults-and-falls-deadly-but-preventable/>



Please Join Us for the Annual
Mission Hospital
Mended Hearts Gala



♥ **Arroyo Trabuco Golf Course**
26772 Avery Parkway, Mission Viejo

♥ **Sunday, December 6, 2015**
12:00 PM – 4:00 PM

♥ **Mike De Bellis-Satin Express**
For your Dancing and Listening Pleasure

♥ Your choice of:
Beef Medallions, Salmon, or Vegetarian (Lasagna)
Includes: Salad, Vegetables, Dessert, Coffee or Tea
~ ~ ~No Host Bar ~ ~ ~

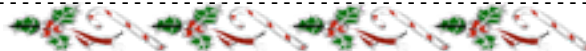
\$30.00 per person

♥ **Send check and form to:**

Mended Hearts Chapter 216 – 26732 Crown Valley Parkway, Suite 281 Mission Viejo, CA 92691
Questions: (949) 363-1496

Checks and forms must be received by November 18th

PLEASE DETACH AND RETURN BOTTOM PORTION WITH YOUR CHECK



Please Indicate Food Preferences for Each Member of Your Party:

♥ Beef Medallions _____ ♥ Salmon _____ ♥ Vegetarian _____

Limited Seating ~ Reserve your seats NOW!

Member's Name: _____

Please indicate the names of your guests: _____

The Mended Hearts, Inc. Chapter 216

Membership Application

Mended Hearts is a national nonprofit organization that has been offering the gift of hope to heart disease patients, their families and caregivers since 1951. Recognized for its role in facilitating a positive patient-care experience, Mended Hearts partners with over 460 hospitals and rehabilitation clinics and offers services to heart patients through hospital visiting programs, support group meetings and educational forums.

Our mission : "Inspiring hope and improving the quality of life for heart patients and their families through ongoing peer-to-peer support"

Please Print: _____ Date _____

Name _____ Spouse _____

Address: _____ City: _____ Zip: _____

Home phone _____ Cell phone _____ E-mail _____

If interested in receiving the newsletter electronically, please provide e-mail

Birthday (dd/mm) _____ Episode/Surgery date dd/mm/yy) _____

Physician/Surgeon _____

Type of procedure: STENT (PCI) _____ MI (Myocardial Infarction) _____ BYPASS _____

HEART VALVE _____ TRANSPLANT _____ ANEURYSM _____

ATRIAL SEPTICAL DEFECT _____ PACEMAKER/ICD _____

Hobbies & Interests: _____

I wish to volunteer to assist the Chapter in these areas:

Visiting Patients _____ Telephoning _____ Other (describe) _____

	Individual	Family
Dues: Initial, Annual, National & Chapter Dues	\$28	\$38
Life membership, National & Chapter	\$225	\$335

I wish to donate to defray Special Projects and Newsletter Expenses: \$ _____

Membership fees include both Chapter and National dues.

Return the completed application with check to: Mended Hearts, Inc Chapter 216, c/o Mission Hospital, Cardiopulmonary Rehab Center, 26732 Crown Valley Parkway, Suite 281, Mission Viejo, CA 92691

Annual billings will be from the National Office located in Dallas, Texas.

Billings will be on the anniversary of joining.

Ticker Talker
Mission Hospital Cardiac Rehab Center
26732 Crown Valley Parkway Suite 281
Mission Viejo, CA 92691
Return Service Requested
Dated Material



The purpose of this organization is to offer help, support and encouragement to heart patients and their families and to achieve this objective in the following manner:

1. To visit with physician approval, and to offer encouragement to disease patients and their families.
2. To distribute information of specific educational value to members of the Mended Hearts, Inc. and to heart disease patients and their families.
3. To establish and maintain a program of assistance to physicians, nurses, medical professionals, and healthcare organizations in education and research activities pertaining to heart disease.
4. To cooperate with other organizations in education and research activities pertaining to heart disease.
5. To assist established heart disease rehabilitation programs for members and their families.
6. To plan and conduct suitable programs of social and educational interest for members and for heart disease patients and their families.



St. Joseph Health 
Mission Hospital



St. Joseph Health 
St. Mary



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