CITY OF PITTSFIELD, MA

You've Got ...

Senior Spirit

COUNCIL ON AGING, Inc.
PITTSFIELD SENIOR CENTER
330 NORTH STREET
PITTSFIELD, MA  01201
413-499-9346  Fax # 413-442-8531

MAY 2019

AARP tax preparation
Are You OK? wake-up program
Art du Jure!
Berkshire Writers Room
Bingo
Breakfast Club
Brown Bag
Card Games, Bridge, Pitch
Ceramics
Chair Caning
Coffee Shop
Comedy Dungeon!
Community Outreach
Computer Workshop
Exercise Classes-Osteo
Foot Clinic
From Stage to Screen
Gift Shop
“Hand and Foot” card game
Health Education Workshops
Income Tax Preparation
Information/Referrals
Knitting and Crochet
“Legal Education”
Line Dancing
Lunch Served Daily
Mah Jongg
Meditation
Molari Blood Pressure Visits
Pinochle
Poetry
Pool Tables
Quality Time Club
Quilting
Seasonal Celebrations
Scrapbooking & Card Making
Scrabble
Shake Your Soul dance-exercise
SHINE Medicare Counseling
Supportive Day Program
Tai Chi, Tai Chi w/ weights
Transportation
Traveling Friends
TRIAD
Volunteer Opportunities
Woodcarving, Woodworking
Yoga

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Unus pro omnibus,

ONE FROIO ALL
&
ALL FROIO ONE

omnes pro uno!
May Day

For many, the first rite of spring comes on May 1, May Day, with the raising of the maypole. The celebration of May Day dates back thousands of years. The Celts of the British Isles celebrated May 1 as Beltane, their most important holiday. It was believed that this holiday marked the halfway point of a year split between the dark and light. Massive fires were burned to herald the start of the return of life. The tradition of raising and dancing around a maypole came much later, during the Middle Ages. It was common for villagers to dance around the maypole bearing colorful streamers, ribbons, and baskets of flowers, symbolizing the fertility of the earth and blooming of trees and flowers. It wasn’t until May 1, 1886, that May Day became associated with the labor movement. In those days, workers of all ages suffered from abhorrent working conditions. It was on that May Day that 300,000 workers marched across America to demand better working conditions and higher wages. Today, while May Day is considered a major holiday in many countries, it is not widely celebrated, least of all in the United States.

Activity Connection, May 2019

Older Adults Need More Focus on Vision

Many people don’t get screened when eye problems are not obvious

Many adults 50 and older aren’t getting screened for vision problems regularly, which means that eye diseases may not be diagnosed and treated early enough to prevent vision loss, according to the findings of a new University of Michigan/AARP poll.

The survey found that 18 percent of older people haven’t seen an optometrist or ophthalmologist in three years or more or were not sure when they had their last eye exam. The study was part of the National Poll on Healthy Aging, sponsored by AARP and Michigan Medicine, the University of Michigan’s academic medical center.

More than 40 percent of those who had not seen an eye doctor in three or more years said they hadn’t had their eyes checked because they weren’t having any vision problems. Others said they were dissuaded from getting an exam by the cost or that they just hadn’t gotten around to it.

“Vision loss affects an older adult’s overall health, risk of falling, social interactions and quality of life,” says Alison Bryant, senior vice president of research for AARP. “But, not everyone has coverage for routine vision care and eyeglasses.”

The survey also revealed that many primary care doctors aren’t routinely asking their patients about their vision: 58 percent of those who had regular medical checkups reported that their primary care physician or other providers hadn’t asked about their eyes. Respondents who had a low household income, a history of eye disease or diabetes were more likely to say they were asked about their vision. Still, 2 out of 5 people with diabetes who had regular primary care checkups said their doctor didn’t ask about their vision.

There are a range of eye conditions related to diabetes, including diabetic retinopathy and diabetic macular edema. The Centers for Disease Control and Prevention (CDC) recommends that people with diabetes have a comprehensive eye exam every year and those with a high risk of glaucoma every two years.

Doctors point to the dangers of waiting until there is vision loss to have an exam. Many eye diseases may not offer any obvious early-warning signs, but they can be diagnosed during a comprehensive exam and followed up with treatment that might prevent further damage.

Continued on insert page

For the Love of Pugs

Pug lovers of every stripe will flock to Milwaukee on the weekend of May 18–19 for the annual PugFest. The focus of the festivities revolves around three adorable costume contests, where pug owners parade their dogs for all to see. The costume categories are: “Hand-Crafted,” “Ready-Made,” and “Strollers and Floats.” When visitors aren’t ooh-ing and aah-ing over the cute dogs, they will be watching pug races and allowing Father John Allen to perform the annual Blessing of the Pugs. Why do people love these tiny and, some might say, ugly dogs? They were originally bred as companion animals for Chinese royalty. When the dogs were brought back to Europe in the 16th century, European royalty adopted the practice. Today, anyone can feel like a king or queen with their own pug pup.

Activity Connection, May 2019

Froio needs FRIENDS!
Trying to Reduce Sudden Trips to the E.R.

A practice in North Carolina treats older Americans in their rooms at various facilities.

The patient moved into a large assisted living facility in Raleigh, N.C., in 2003. She was younger than most residents, just 73, but her daughter thought it a safer option than remaining in her own home.

The woman had been falling so frequently that “she was ending up in the emergency room almost every month,” said Dr. Shohreh Taavoni, the internist who became her primary care physician.

“She didn’t know why she was falling. She didn’t feel dizzy — she’d just find herself on the floor.” At least in a facility, her daughter told Dr. Taavoni, people would be around to help.

As the falls continued, two more in her first three months in assisted living, administrators followed the policy most such communities use: The staff called an ambulance to take the resident to the emergency room.

There, “they would do a CT scan and some blood work,” Dr. Taavoni said. “Everything was O.K., so they’d send her back.”

Such ping-ponging occurs commonly in the nation’s nearly 30,000 assisted living facilities, a catchall category that includes everything from small family-operated homes to campuses owned by national chains.

It’s an expensive, disruptive response to problems that often could be handled in the building, if health care professionals were more available to assess residents and provide treatment when needed.

But most assisted living facilities have no doctors on site or on call; only about half have nurses on staff or on call. Thus, many symptoms trigger a trip to an outside doctor or, in too many cases, an ambulance ride, perhaps followed by a hospital stay.

Twenty years after the initial boom in assisted living, which now houses more than 800,000 people, that approach may be shifting.

Early on, assisted living companies planned to serve fairly healthy retirees, offering meals, social activities and freedom from home maintenance and housekeeping — the so-called hospitality model.

But from the start, the assisted living population was older and sicker than expected. Now, most residents are over age 85, according to government data. About two-thirds need help with bathing, half with dressing, 20 percent with eating.

Like most older Americans, they also generally contend with chronic illnesses and take long lists of prescription drugs — and more than 80 percent need help taking them correctly.

Moreover, “these places became the primary residential setting for people with dementia,” said Sheryl Zimmerman, an expert on assisted living at the University of North Carolina at Chapel Hill.

About 70 percent of residents have some degree of cognitive impairment, her studies have found. So residents can find it difficult to coordinate medical appointments and tests, and to travel to offices and labs, even when facilities provide a van.

“The assisted living industry has to recognize that the model of residents going out to see their own doctors hasn’t worked for a long time,” said Christopher Laxton, executive director of AMDA, a society that represents health care professionals in nursing homes and assisted living.

His recent editorial in McKnight’s Senior Living, an industry publication, was pointedly headlined: “It’s time we integrate medical care into assisted living.” AMDA is considering developing model agreements.

“There has to be more attention to medical and mental health care in assisted living,” Dr. Zimmerman agreed. “Does everyone who falls really need to go to an emergency department?”

Lindsay Schwartz, an executive at the National Center for Assisted Living, a trade association, said in an email that “assisted living has certainly expanded its role in providing medical care over the years by adding nursing staff and partnering with other health care providers, among other ways.”

But persuading most operators to provide medical care likely won’t happen without a fight. They’ve built their marketing strategies on looking and feeling different from the dreaded nursing home, and they object to “medicalizing” their communities.

“They don’t want the liability,” said Dr. Alan Kronhaus, an internist who, with Dr. Taavoni (they’re married), started a practice called Doctors Making Housecalls in 2002.

The facilities also “live in mortal fear of bringing down heavy-handed federal regulation,” he said. That can happen when Medicare and Medicaid, which cover most residents’ health care, get involved.

Doctors Making Housecalls provides one example of how assisted living can offer medical care. The practice dispatches 120 clinicians — 60 doctors, plus nurse-practitioners, physician assistants and social workers — to about 400 assisted living facilities in North Carolina.

“We see patients often, at length and in detail, to keep them on an even keel,” Dr. Kronhaus said. By contracting with labs, imaging companies and pharmacies, the practice can provide most of the medical care for more than 8,000 residents, on site and around the clock.

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<th>Event</th>
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<tr>
<td>Mothers' Day</td>
<td>Thurs, May 9th 11:30, Meal Site, Reserve a day ahead</td>
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<tr>
<td>Froio Variety Show!</td>
<td>Thursday, May 9th 1:00 p.m., It's time once again for Froio's annual</td>
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<tr>
<td></td>
<td>must-see entertainment feature! Everyone's invited to support our fellow</td>
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<td></td>
<td>Froio folks!</td>
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<tr>
<td>Foot Clinic</td>
<td>Thurs May 2nd 11:30, By Appointment 499-9346</td>
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<tr>
<td>Pittsfield Tree Watch</td>
<td>Thurs 4:00 May Coffee Shop</td>
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<tr>
<td>New Member Day</td>
<td>Wed May 15th 10:00 a.m., Find your way. Let us know you're coming.</td>
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<tr>
<td>April Breakfast Club</td>
<td>Thurs May 16th 8:00 a.m., Delectable eats! Intriguing guest speakers!</td>
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<tr>
<td>May Card Party</td>
<td>Thurs May 16th 1:00 p.m., Fours are best! Four-somes are best. $2.00</td>
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<tr>
<td>Legal Education</td>
<td>Thurs May 16th 1:00 p.m., Have legal questions evaluated.</td>
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<tr>
<td>Brown Bag Day</td>
<td>Fri May 24th 10:30 a.m.</td>
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<tr>
<td>Molari Blood Pressure Clinic</td>
<td>Tues May 28th 9:00</td>
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What really works to support brain health as you age? Start with the very same foods that can help to keep your heart healthy: A Mediterranean-style diet replete with fresh fruits and vegetables, whole grains, beans, nuts, fish, low-fat dairy and olive oil. In a major study called MIND, seniors who adopted such a diet and limited their salt intake had a 35 percent lower risk for cognitive decline as they aged, and strict adherence to the diet cut the risk by more than 50 percent.

At the same time, avoid or strictly limit foods that can have toxic effects on the brain, like red and especially processed meats, cheese and butter, fried foods, pastries, sugars and refined carbohydrates like white rice and white bread, none of which are good for the heart either.

This diet would also reduce the risk of high blood pressure and Type 2 diabetes, both of which can foster cognitive decline or dementia.

In a Chinese study of 17,700 older adults free of dementia at the start of the study, those who consumed at least three servings of vegetables and two servings of fruits a day were significantly less likely to develop dementia over the next six years.

An earlier Chinese study of 15,589 people 65 and older found that those who participated in daily aerobic and mind-body exercises were significantly less likely to develop dementia than those who did only stretching and toning exercises. And a new Swedish study that followed 800 mid-life women for 44 years found that engaging in physical activity reduced the risk of dementia by 57 percent.

Finally, don’t skimp on sleep, which gives the brain a chance to form new memories. Researchers suggest striving for seven to eight hours of shut-eye a night.


The most prevalent eye problems are cataracts, glaucoma, macular degeneration and diabetes-related eye disease. About a quarter of the poll respondents said they’d been diagnosed with at least one of those ailments.

“We know that many eye diseases become more common with age, but that most vision loss is preventable or treatable,” says Joshua Ehrlich, an assistant professor of ophthalmology and visual sciences at the University of Michigan Kellogg Eye Center. “For those with risk factors like diabetes and certain other medical conditions or a family history of eye disease, receiving regular eye care could be key to avoiding vision loss.”

That vision isn’t routinely brought up in primary care visits is, in part, due to other medical issues taking priority, says Preeti Malani, director of the poll and a geriatrics specialist. “Older adults often have a long list of health concerns to discuss with their primary care provider. Difficulties with vision might not always come to mind.”

But primary care providers are important partners with eye care specialists in advising high-risk adults about when to see an eye doctor, the researchers say. Their discussing vision problems with patients could remind them to have regular screenings and keep eye health a priority. A full report of the findings and methodology is available at healthyagingpoll.org, along with past National Poll on Healthy Aging reports.

The poll results are based on responses from 2,013 adults between the ages of 50 and 80. The margin of error is plus or minus 1 to 2 percentage points for all question frequencies and is higher among subgroups.

By Christina Ianzito, AARP, September 5, 2018
MAY SENIOR CENTER EVENTS

Everyday! 11:30 a.m. Meal Site
Beloved American poet e. e. cummings buoyantly said, “Once we believe in ourselves, we can risk curiosity, wonder, spontaneous delight, or any experience that reveals the human spirit.” That sounds a lot like the net, rewarding takeaway from daily Meal Site! Enjoy, and reserve a day ahead. 1-800-981-5201.

Tuesdays! 12:00 p.m. SHINE (by appt.)
S.H.I.N.E. (Serving Health Insurance Needs of Everyone) counselors help you navigate the oft treacherous maze of health insurance programs. Call Froio at 499-9346, or Elder Services directly at 499-0524.

Thursday, May 4 9:00 a.m. Foot Clinic ...kickin’ it!
The Foot Clinic is alive and kickin’! Step by step, in the capable hands of Lisa Christman, R.N., you’ll find that all of your foot care needs are thoroughly managed. Her attentive ministrations are good for the sole, and the soul! Please call for appointment, 499-9346.

Thursday, May 9 11:30 a.m. Mothers’ Day Party @ Meal Site!
Let’s celebrate mothers, memories of mothers, and the welcome advent of spring! Our Froio specials are renowned for their gala, atmospheric tributes. Join us so that we can shine even brighter! Call a day ahead to reserve, you’ll be glad you did. 1-800-981-5201

Thursday, May 9 1:00 p.m. Annual Froio Variety Show!!
Gotta sing! Gotta dance! Gotta play! Gotta recite! Gotta act! Gotta emote! Gotta project!
It’s that once-a-year time for must-see Main Room entertainment. Nay, think of it as Main Stage entertainment! You’ve simply gotta come out and support your local Froio-folks in the talented pursuit of their individual “gottas!”

Monday, May 13 10:00 a.m. The Councilman is In!
The Froio Center hosts councilman Kevin Morandi’s invaluable “open office” sessions. His informal Q & A’s take place a day before City Council meetings, maximizing the potential for a responsive “public-to-council” conduit.

Wednesday, May 15 10:00 a.m. New Member Day Tour (Tour du Jour!)
Unearth the basic facts, and the nuances, of the Senior Center. There’s more than meets the eye and we relish the opportunity to convey the full essence de Froio. Let us know you’re coming, 499-9346.

Thursday, May 16 8:00 a.m. May Breakfast Club
Breakfast Club features intriguing speakers from the realms of senior-med, senior-law, senior-cultural, and senior-general interest! Couple that with a scrumptious meal and the result is quite the floor show. Breakfast Club; always delectable, always informative!

Thursday, May 16 1:00 p.m. May Card Party
Canadian-American motivational speaker Brian Tracy summed it up quite tidily: “I’ve found that luck is quite predictable. If you want more luck, take more chances. Be more active. Show up more often.” Those basic tenets are virtually a roadmap to success at monthly Card Party! Bottomless coffee, prizes and snacks. Unless otherwise arranged, foursomes are best. “Show up!” Gee, who would’ve thought.

Thursday, May 16 1:00 p.m. Legal Education (by apt.)
Attorneys from Pittsfield Family and Probate Court evaluate your legal issues. By appointment, 499-9346.

Thursday, May 16 4:00 p.m. Pittsfield Tree Watch
Tree Watch explores your deep-rooted tree interests. Keep counsel with a cabal of committed tree enthusiasts. 4:00 p.m. in the Coffee Shop

Friday, May 26 10:30 a.m. Brown Bag
Be a part of this monthly nutritional grocery program. Inquire about Brown Bag and SNAP benefits.

Monday, May 27 Senior Center CLOSED Memorial Day

Tuesday, May 28 8:45 a.m. Blood Pressure Clinic (by appt.)
Molari Health Care monitors your blood pressure. Call 499-9346 for an appointment.
Trying to Reduce Sudden Trips to the E.R.

Continued from page 4

Working with a local emergency medical service, he and his colleagues reported in a 2017 study that the practice could reduce emergency room transfers by two-thirds.

The Lott Assisted Living Residence in Manhattan, on the other hand, relies on a single geriatrician, Dr. Alec Pruchnicki, to provide medical care for most of its 127 or so residents.

If they’re feeling sick, a family member calls or the resident just knocks on the door of “Dr. P’s” basement office. “Sometimes it’s just a cold — chicken soup,” Dr. Pruchnicki said. “But this winter we had a few cases of flu and pneumonia, things you need to treat.”

Nearby Mount Sinai Hospital employs him and provides emergency services when needed. Often, they’re not. In 2005, Dr. Pruchnicki reported at medical conferences, he decreased hospitalizations by a third. “I can’t be in the only place in the country where this would work,” he said.

Spending time in emergency rooms and hospitals often takes a toll on residents, even if their ailments can be treated. They get exposed to infections and develop delirium; they lose strength from days spent in bed.

Perhaps that contributes to short stays in assisted living. Adult children often see these facilities as their parents’ final homes, but residents stay just 27 months on average, after which many move on to nursing homes.

Adding doctors to assisted living could also cause problems, advocates acknowledge; in particular, it might increase the already high fees facilities charge.

But something has clearly got to give. “There can be health care in assisted living without making it feel like a nursing home,” Dr. Zimmerman said.

Family members tell of frightened and confused residents arriving unaccompanied at emergency rooms, unable to give clear accounts of their problems. Dr. Kronhaus recalls a resident with dementia taken to the local E.R. by ambulance; discharged, she was sent home by taxi. The address she gave the driver was her former home, where neighbors spotted her and called the police.

By contrast, the North Carolina woman with a history of falls is doing well.

Dr. Taavoni discovered that her hypertension medications were causing such low blood pressure that she fainted. Reducing the dose and discontinuing a diuretic, Dr. Taavoni also weaned the patient off an anti-anxiety drug she suspected was causing problems, substituting a low dose of an antidepressant instead.

The falls and the related emergency room visits stopped.

Doctors Making Housecalls is still caring for her, and for most of the neighbors in her assisted living facility.

By Paula Span, The New Old Age, New York Times, 4/2/19

Hearing Aid Basics

An overview of the devices

Hearing loss affects about 25 percent of Americans ages 55 to 64 — and 33 percent of those 60 to 74. Yet 80 percent of people who would benefit from a hearing aid don’t use one, the Hearing Loss Association of America (HLAA) reports. High costs are a big reason, but that may change: A 2017 law will allow hearing aids to be sold without an audiologist’s consultation. The Food and Drug Administration (FDA) still has about 16 months to issue regulations before such over-the-counter devices will hit stores. The following provides a rundown on hearing aids:

**Behind-the-ear (BTE) hearing aids**

**What they do:** They’ll improve your hearing across specific ranges of the audio spectrum. Audiologist tests your ability to hear different frequencies and understand speech, then adjusts the hearing aids to compensate for your deficiencies. In the most popular style, called receiver-in-the-ear (RITE) hearing aids, the microphone and processor sit in a casing behind the ear; the speaker rests in the ear canal.

**Cost:** $2,400 per ear, on average

**Where to get them:** From a licensed audiologist

**Number sold:** About 3.1 million units in the U.S. in 2017

**Custom in-the-ear (ITE) hearing aids**

**What they do:** Just like BTE hearing aids, these must be fitted and ordered by an audiologist after a hearing test. The audio technology is encased in a custom-molded plastic shell that fills the outer part of the ear canal. “They can give you lower tones because your ears are closed up,” says Abram Bailey, a doctor of audiology and founder of the website Hearing Tracker, which publishes hearing aid reviews and offers consumer information. But “they’re more likely to be affected by ear wax, moisture and sweat.” Another effect of this type of device: Your own voice seems louder to you.

**Cost:** $2,400 per ear, on average

**Where to get them:** From a licensed audiologist

**Number sold:** About 600,000 units in the U.S. in 2017

**Cochlear Implants**

**What they do:** These devices, implanted through a surgical procedure, use electrical current to stimulate auditory nerve fibers. They are for people with profound hearing loss.

**Cost:** The evaluation, surgery, device and rehab can cost as much as $100,000, although most of that cost should be covered by private insurance or Medicare.

**Number sold:** Roughly 58,000 American adults have a cochlear implant.

**Personal sound amplifiers (PSAPs)**

**What they do:** They turn up the volume on the world, typically with little or no subtleties or customization. They may be marketed as “over-the-counter hearing aids,” but they are not regulated by the FDA.

**Cost:** You can find devices for as little as $20, but quality units generally sell for about $250 to $350.

**Where to get them:** Available at pharmacies and big-box discount stores

**Number sold:** Industry sales are not tracked, but one research firm estimated that the market was about $50 million worldwide in 2014.

By Ken Budd, AARP, April 9, 2019
Brain Booster In a Bottle?  
Don’t Even Bother

Ignore supplements and their unproven claims. Pay attention to your diet and your sleep.

Attention all consumers seeking to protect brain health: You can save hundreds of dollars a year and enhance the health of your brain and body by ignoring the myriad unproven claims for anti-dementia supplements and instead focusing on a lifestyle long linked to better mental and physical well-being.

How many of these purported brain boosters have you already tried — Ginkgo biloba, coenzyme Q10, huperzine A, caprylic acid and coconut oil, coral calcium, among others? The Alzheimer’s Association says that, with the possible exception of omega-3 fatty acids, all that were properly tested thus far have been found wanting.

I admit it’s very appealing to think you can maintain your cognitive powers by swallowing a few pills a day instead of adopting a brain-healthy diet, getting regular exercise and adequate sleep, among other health-preserving measures like not smoking. But you’d only be fooling yourself and wasting precious dollars that could be better spent on nutritious foods and a good pair of walking shoes.

“No known dietary supplement prevents cognitive decline or dementia,” Dr. Joanna Hellmuth stated emphatically in JAMA in January. “Yet,” she added, “supplements advertised as such are widely available and appear to gain legitimacy when sold by major U.S. retailers.”

Dr. Hellmuth, a neurologist at the University of California, San Francisco, Memory and Aging Center, reminds consumers that supplement manufacturers do not have to test their products for effectiveness or safety. Lacking sound scientific backing, most are promoted by testimonials that appeal to people worried about developing dementia.

Citing a $3.2-billion industry that promotes brain health benefits from dietary supplements, Dr. Hellmuth said in an interview, “It’s a confusing landscape. Lots of patients and families see bold claims in newspaper ads, on the internet and on late-night TV that various supplements can improve memory.”

Such a memory statement is legal under the 1994 Dietary Supplement Health and Education Act, as long as the product is not claimed to prevent, treat or cure dementia or Alzheimer’s disease. But too often, people seeking an easy route to cognitive health assume incorrectly that anything said to support memory would ward off dementia.

Some companies try to sneak illegal claims past government watchdogs. Eventually they’re likely to get caught, but not always before unsuspecting consumers waste hard-earned dollars on useless, possibly hazardous and often costly supplements.

In February, the Food and Drug Administration issued 12 warning letters and five advisory letters to companies the agency said were illegally marketing 58 dietary supplements that claim to prevent, treat or cure Alzheimer’s disease or other serious conditions. In one such letter, sent to Earth Turns LLC, the agency cited the company’s Green Tea Extract product advertised to “help to reduce the occurrence of Alzheimer’s disease” by blocking the proteins that cause Alzheimer’s-type plaques to form in the brain.

If you’re truly in need of a brain boost, experts recommend caffeine as a safer and more effective, albeit temporary, bet.

Of course, supplements are only one of several arms of the memory-enhancing industry. There are also myriad videos, games, puzzles, programs and what-have-you currently being marketed. None of these are a problem if people have fun doing them as long as they don’t ignore measures far more likely to reduce the risk or delay the onset of dementia.

Some of these products may even be helpful up to a point. Researchers at the Mayo Clinic in Phoenix reported in JAMA Neurology two years ago that older people who engage in mentally stimulating activities like games, crafts and computer use have a lower risk of developing mild cognitive impairment, often a precursor to dementia.

The researchers, led by Dr. Yonas E. Geda, a psychiatrist and behavioral neurologist at Mayo, followed nearly 2,000 cognitively normal people 70 or older for an average of four years. After adjusting the results for sex, age and education level, they found that computer use decreased the participants’ risk of cognitive impairment by 30 percent, engaging in crafts decreased it by 28 percent and playing games decreased it by 22 percent.

Dr. Geda said that those who performed such activities at least once or twice a week experienced less cognitive decline than those who did the same activities at most only three times a month.

Also helpful is if players participate with other people; social engagement has repeatedly been shown to benefit health and longevity.

For the most part, playing so-called brain-training games can make you better at the games themselves, but the benefits don’t necessarily translate into improved performance in other activities. Three years ago, the Federal Trade Commission challenged Lumosity’s claim that its games can sharpen memory or brain power in real-world settings. Citing deceptive advertising, the agency said the company offered prizes to consumers who attested to the games’ effectiveness.

Continued on insert page
**Senior Spirit Editor:** Joseph Major

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Councilman Anthony Simonelli,  

**Ex. Officio Members:**  
Linda Tyer, Mayor  
Jim Clark, Senior Center Director

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**Meal Site**

**Everyday**

**11:30 a.m.**

Call a day ahead (by 11:30) to reserve. 1-800-981-5201.

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**The Councilman is In...**

10:00

Monday, May 13th

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**Froio Surf Club**

Don't be the absolute last person on planet Earth to enter computer world!

Tues @ 10  
Wed @ 10 and 11

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**By Victoria Passier**  
**Senior Center Poetry Group**

**The Light**

Ferlinghetti's light paints itself  
bright with words  
that glisten off the letter "S"  
like sunshine pure and bright.

They drench the walls  
in silken laughter,  
sing the songs of birds in flight.

There is no darkness  
in the birth of light  
only the changing layers  
of its rise at dawn,  
when we need to  
gather its strength,  
get up and proceed to  
do the next right thing.

If we focused on that brilliance  
before the edge of syllables  
garbled over coffee  
became our mantra for the day,  
before we remembered  
that crescent of moon  
we saw last night,  
a reminder of our  
own missing piece,  
we might find our  
own power source.

But there is no wrong  
in turning towards His light,  
that beckons us to  
come closer  
and proclaims through  
the veil that separates us,  
"Love one another  
as I have loved you."

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**Shake Your Soul**

Mon @ 10:30

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<td>FOOT CLINIC (by apt.)</td>
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<td>10:00</td>
<td>Meditation (new time)</td>
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<td>10:15</td>
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<td>12:00</td>
<td>SHINE</td>
<td>9:30</td>
<td>Flexible Feet &amp; Core Stability</td>
<td>12:30</td>
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<tr>
<td>1:00</td>
<td>Bridge, Canasta!</td>
<td>10:30</td>
<td>Tai Chi</td>
<td>12:30</td>
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<tr>
<td>1:15</td>
<td>From Stage to Screen</td>
<td>11:30</td>
<td>Chair Caning</td>
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<td>From Stage to Screen</td>
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<td>Tai Chi w/weights</td>
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<td>Woodworking 10:00 Beginner Chess</td>
<td>9:00</td>
<td>Beginner Osteo</td>
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<td>9:00</td>
<td>Meditation (new time)</td>
<td>9:00</td>
<td>Ceramics</td>
<td>9:00</td>
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<td>1:30</td>
<td>From Stage to Screen</td>
<td>1:35</td>
<td>Yoga</td>
<td>1:45</td>
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</tbody>
</table>

**May**

**Senior Center CLOSED Memorial Day**

**Meal Site**

Daily @ 11:30
Call a Day Ahead!
1-800-981-5201

- **9:00** Advanced Osteo
- **10:00** Brand New Line Dancing
- **10:30** "Shake Your Soul"
- **11:00** Ladies Pool
- **12:00** Scrabble
- **1:00** Mah Jong,
- **1:00** Hand & Foot!
- **1:00** Art Studio!
- **8:45** Blood Pressure Clinic (by apt.)
- **9:00** Woodworking 10:00 Beginner Chess
- **10:15** Meditation (new time)
- **12:00** Tai Chi w/weights
- **12:00** SHINE
- **1:00** Bridge, Canasta!
- **1:30** From Stage to Screen

- **9:00** Woodworking
- **9:00** Beginner Osteo
- **10:30** Tai Chi
- **11:30** Flexible Feet & Core Stability
- **12:30** Chair Caning
- **1:00** Bingo
- **1:35** Yoga

- **9:00** Woodworking
- **9:00** Beginner Osteo
- **10:30** Tai Chi
- **11:30** Flexible Feet & Core Stability
- **12:30** Chair Caning
- **1:00** Bingo
- **1:35** Yoga

- **9:00** Beginner Osteo
- **9:00** Ceramics
- **11:30** Mothers' Day @ Meal Site
- **12:30** Chair Caning
- **1:00** FroYo Variety Show!
- **4:00** Pittsfield Tree Watch

- **9:00** Breakfast Club
- **9:00** Beginner Osteo
- **9:00** Ceramics
- **12:30** Chair Caning
- **1:00** Card Party
- **1:00** Legal Education
- **1:15** Tai Chi w/weights

- **9:00** Beginner Osteo
- **9:00** Ceramics
- **12:30** Chair Caning
- **1:15** Tai Chi w/weights

- **9:00** Knitting
- **11:00** Comedy Dungeon
- **11:45** Flexible Feet & Core Stability
- **12:30** Quilting, Woodcarving
- **1:00** Bingo
- **1:45** Beginner Tai Chi