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

FEBRUARY 2020

AN INSIDE LOOK AT . . .

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Further bolstering a decades-old reputation

Froio

Colossus!
What Do You Know About Congress?

Take this quiz and see how knowledgeable you are about the legislative branch

Question 1. How many members are there in the U.S. House of Representatives and the U.S. Senate?
A. 50 senators and 300 representatives
B. 100 senators and 435 representatives
C. 150 senators and 350 representatives
D. 200 senators and 500 representatives

Question 2. During the Civil War the Capitol building was used as:
A. A bakery
B. Military barracks
C. A hospital
D. All of the above

Question 3. Who is the oldest sitting senator?
A. Sen. Bernie Sanders, Vermont
B. Sen. Orrin Hatch, Utah
C. Sen. Dianne Feinstein, California
D. Sen. Chuck Grassley, Iowa

Question 4. How often do House members run for reelection?
A. Every two years
B. Every three years
C. Every six years
D. Every eight years

Question 5. How often do U.S. senators run for reelection?
A. Every four years
B. Every six years
C. Every 10 years
D. Never. They are elected for life.

Question 6. Who breaks a tie vote in the U.S. Senate?
A. The most senior senator
B. The secretary of state
C. The vice president of the United States
D. The majority leader

Question 7. Where did the first Congress meet?
A. New York City
B. Philadelphia
C. Boston
D. Washington, D.C.

Question 8. How old do you have to be to serve in the U.S. House of Representatives?
A. 21
B. 25

Question 9. How many times can a U.S. senator or member of the U.S. House of Representatives run for reelection?
A. Twice
B. Four times
C. Ten times
D. An unlimited number of times

Question 10. Can Congress override a presidential veto?
A. Yes, Congress can appeal the veto to the U.S. Supreme Court
B. Yes, a two-thirds majority vote of the U.S. House of Representatives and U.S. Senate can override the veto
C. Yes, a simple majority vote of the U.S. House of Representatives and U.S. Senate can override the veto
D. No

Question 11. The junior senator of a state is always younger than the senior senator.
A. True
B. False

Question 12. Who has the power to declare war?
A. The president’s cabinet
B. Congress
C. The secretary of defense
D. The president

By Dana Bunis, AARP, October 19, 2018

Answers on Insert Page

Want to lower your Medicare costs?

On January 1, 2020 the income and asset limits for the Medicare Savings Programs* increased. If you qualify, these programs will pay your Part B premium and in some cases your Part A and B deductibles, co-pays and Part A premium (if you have one). In addition, you will automatically receive Extra Help, a program that will lower your Medicare Part D premium and co-pays.

Income and asset limits effective 1-1-20

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Prescription drug co-payments with Extra Help effective 1-1-20

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</tbody>
</table>

To learn more and to request an application, contact MassHealth at: 1-800-841-2900 or TTY at: 1-800-497-4648. SHINE can also assist you with the application process. Call us to make an appointment.

Applications are also available on-line at: https://tinyurl.com/MassMSP

*Medicare Savings Programs are also called “MassHealth Buy-In” and are administered by MassHealth.

Thanks Emmett Schmarowsky!
Who's Working More?
People Age 65 and Older

They are the fastest-growing part of the labor force, data shows

Bill Corse, 81, has been working for UPS for more than 43 years now, making deliveries near Quincy, Illinois. And he has no plans to retire anytime soon because he enjoys the job.

"I've had a lot of people tell me that they've said, 'If it's on Bill's truck, I'll get it that day, no matter what,'" he says, describing the connections he's built with people during four decades on his daily route through small towns where the Mississippi River divides Illinois from Missouri. "They've all got my cellphone number, so they'll call me if they need a package really bad."

In fact, workers age 65 and older are becoming a larger share of the nation's workforce. Many continue to work for years after the traditional retirement ages. Like Corse — who says he drives "around 200 miles a day and 90-some stops" — many stay on the job because they like the work and do it well. Some also stay employed to build savings for retirement or to delay claiming Social Security benefits, which can lead to a larger monthly benefit once they do.

The U.S. Bureau of Labor Statistics (BLS) projects that by 2024 — just five years from now — 13 million people age 65 and older will still be working. These older workers will constitute the fastest-growing segment of the workforce from 2014 to 2024. While the total number of workers is expected to increase by 5 percent over those 10 years, the number of workers ages 65 to 74 will swell by 55 percent. For people 75 and older, the total will grow a whopping 86 percent, according to BLS projections.

The reasons these adults continue to work past traditional retirement ages are varied and personal; the impact their experience and ability can have nationally and globally is significant. A report from the Organization for Economic Cooperation and Development (OECD) notes that in "the context of population aging, mobilizing the potential labor force more fully and sustaining high productivity at an older age are critical."

These workers "are vital because they have a lot of experience," says Stefano Scarpetta, director of employment, labor and social affairs for the OECD. "They've been contributing to the economy and to their own work. They're living longer in good [health]. They have a great potential. And this notion that beyond a certain fixed age they are no longer productive, that they can no longer contribute to the society, is nonsense."

Some signs suggest that employers are beginning to think about what they can do to include workers 65 and older help them be more successful on the job.

More Than a Headache:
Easing Migraine Pain

Medications and a new nerve-stimulating device may prevent or alleviate attacks

If you live with or work with someone who suffers from migraine, there's something very important you should know: A migraine is not "just a headache," as many seem to think. Nor is it something most sufferers can simply ignore and get on with their lives.

And if you are a migraine sufferer, there's something potentially life-changing that you should know: There are now a number of medications available that can either prevent or alleviate many attacks, as well as a newly marketed wearable nerve-stimulating device that can be activated by a smartphone to relieve the pain of migraine.

Migraine is a neurological disorder characterized by recurrent attacks of severe, often incapacitating headache and dysfunction of the autonomic nervous system, which controls the body's myriad automatic activities like digestion and breathing. The throbbing or pulsating pain of migraine is often accompanied by nausea and vomiting.

Translation: Migraine is a headache, all right, but with body-wide effects because the brain converges with the rest of the body. It is often severe enough to exact a devastating toll on someone's ability to work, interact with others, perform the tasks of daily life, or even be in a normal living environment. When in the throes of a migraine attack, sufferers may be unable to tolerate light, noise, smells or even touch.

Dr. Stephen Silberstein, a neurologist at Thomas Jefferson University and director of the Jefferson Headache Center, told me "There are 47 million people in this country with migraine, and for six million, the condition is chronic, which means they have more than 15 headache days a month," he said.

"It's time to destigmatize migraine and provide sufferers with effective treatment," said Dr. David W. Dodick, neurologist at the Mayo Clinic in Scottsdale. "They're not fakers, weak individuals who are trying to get out of work."

In addition to the price paid by individuals with migraine, the cost to employers can be exorbitant. For example, in a recent survey by the Japanese Headache Society of more than 2,400 workers at Fujitsu, an information technology company based in Tokyo, the productivity of one employee in five was impaired by migraine, at an estimated cost to the company of nearly 150,000 employees of $350 million a year.
**S.H.I.N.E.**  
(Serving Health Insurance Needs of Everyone)  
Call for appt. 499-9346  
**Tuesdays @ 12:00**

**Foot Clinic**  
By Appointment 499-9346  
**Thurs Feb 6th  9:00**

**February Breakfast Club**  
It's labelous!  
Join muckraking Elder Services nutritionist/dietitian Bruce Homestead as he highlights the six major label changes you should know about!  
**Thurs Feb 13th  8:00 a.m.  $3.00**

**Pittsfield Tree Watch**  
Grow your tree interest!  
**Thurs Feb 13th  4:00 p.m.**

**Valentine's Day at Meal Site**  
**Fri Feb 14th  11:30**

**New Member Day**  
Find your way.  
Let us know you're coming 499-9346  
**Wed Feb 19th  10:00 a.m.**

**February Card Party**  
DEAL ME IN  
Play Time!  
**Thurs Feb 20th  1:00 p.m.  $2.00**

**Legal Education**  
Have legal questions evaluated.  
**Thurs Feb 20th  1:00 p.m.  By Appt 499-9346**

**MOLARI Blood Pressure Clinic**  
499-9346 by appt.  
**Tue Feb 25th  9:00**

**Mardi Gras Party at Meal Site**  
**Tue Feb 25th  11:30**

**Brown Bag Day**  
**Fri Feb 28th  10:30 a.m.**
**Answers to Legislative Quiz**

Continued from page 2

**Question 1.** (B) 100 senators and 435 representatives

**Question 2.** (D) All of the above

**Question 3.** (C) Sen. Dianne Feinstein, California

**Question 4.** (A) Every two years

**Question 5.** (B) Every six years

**Question 6.** (C) The vice president of the United States

**Question 7.** (A) New York City

**Question 8.** (B) 25

**Question 9.** (D) An unlimited number of times

**Question 10.** (B) Yes, a two-thirds majority vote of the U.S. House of Representatives and U.S. Senate can override the veto

**Question 11.** (B) False

**Question 12.** (B) Congress

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**For Better Brain Health, Preserve Your Hearing**

Continued from page 5

The two characteristics of noise associated with the greatest damage to hearing are intensity — that is, loudness — and duration, or how long unprotected ears are exposed to very loud sound, Dr. Lin explained in an interview.

"The damaging effect of noise exposure is cumulative," he said. While he is less concerned about ear protection during the relatively brief time someone uses a hair dryer or stands on a New York City platform as a train screeches into the station, people who work all day in the subway or listen to loud music for hours need to protect their hearing.

"We can see a hearing deficit the next day after someone has attended a very loud concert," Dr. Lin said.

He urges people who listen to music through headphones or earbuds to invest in ones with a noise-canceling feature that blocks ambient sound. This enables people to listen to their preferred music or programs at a lower volume that is less damaging to hearing. Apple, for example, now markets AirPods Pro earbuds that have a noise cancellation feature. At $249 a pair, they are a lot cheaper than currently available hearing aids.

That said, by 2021 a selection of much less expensive over-the-counter hearing aids is expected to be on the market. And if Congress manages to pass the Medicare Hearing Act of 2019, the cost of audiology services needed to maximize the benefits derived from hearing aids will be covered for recipients.

By Jane E. Brody, New York Times, December 31, 2019

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**Who's Working More? People Aged 65 and Over**

Continued from page 4

"This historic surge of 65+ workers in the coming decades is also likely to surface new challenges — most importantly, rising ageism in the workplace — that employers will be under increasing pressure to combat," says Andrew Chamberlain, chief economist for Glassdoor, an online jobs-search portal that also studies workforce trends. In his study on job and hiring trends for 2020, he notes: "Employers who broaden their definition of inclusivity to welcome older workers, and develop the learning programs to make the most of the 65+ talent pool, will enjoy a strategic hiring advantage in 2020 and beyond."

But for workers like Corse, the goal is not so much to be part of a growing trend but to continue doing work they find fulfilling. In particular, he cited the relationships he has with his fellow drivers and the people on his route, who even sometimes send him Christmas cards.

"It's just amazing how you can become such good friends with people when you have one minute at the most — and two minutes, maybe — when you deliver to somebody," Corse says. "I like the job and I've always liked to be around people and help them, you know."

By Kenneth Terrell, AARP Bulletin, November 22, 2019

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**Do a Grouch a Favor**

You probably know someone who is a grouch. Maybe it's your friend, neighbor, parent, or even spouse! February 16 is the day to forgive them for their sullen and grumpy attitudes and do something nice, for it is **Do a Grouch a Favor Day**. What favors could possibly satisfy the irritable nature of a grouch? Psychologists believe that the most common sources of irritability are often little things throughout the day, small annoyances that come with everyday tasks such as driving or shopping at the grocery store. Compassion, they say, is necessary for forgiving those around us for their minor transgressions and annoyances. So perhaps the biggest favor we can do for a grouch is to show them compassion. Understanding others' emotions is the first step we can take toward alleviating their suffering and dispelling loneliness.

Activity Connection, February 2020
FEVBRURY SENIOR CENTER EVENTS

Everyday!  11:30 a.m.  Meal Site
Esteemed American restauranteur, author and television personality David Chang, who owns a far-flung array of eateries, is often approached with, “What do you think could improve in Toronto dining?” And he says, “There’s nothing to improve!” That’s directly analogous to daily Meal Site, there’s simply nothing to improve upon. Embrace the bounty of socialization – and good will. 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, February 6  9:00 a.m.  Foot Clinic ...kickin’ it!
Step by step, the Foot Clinic is alive and kickin’! 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 Lisa directly for appointment: (413) 443-6014

Monday, February 10 & 24  10:00 a.m.  The Councilman is in!
The Froio Center hosts councilman Kevin Morand’s invaluable “open office” sessions. His informal Q & As take place a day before City Council meetings, maximizing the potential for a responsive “public-to-council” conduit.

Thursday, February 13  8:00 a.m.  Breakfast Club
Bruce Homstead, Elder Services investigative nutritionist/dietitian, informs us about newly finalized Food and Drug Administration labeling dictates that enable more informed, healthier purchasing decisions. Breakfast Club: always informative, always delectable.

Thursday, February 13  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, February 14  11:30 p.m.  Valentine’s Day Party at Meal Site
Join the cabal of expressive hearts on display at our annual paean to joyous love. Heartfelt music will be lovingly provided by the always stirring Woody Printz. Reserve a day ahead! 1-800-981-5201

Monday, February 17  Senior Center CLOSED  Presidents’ Day

Wednesday, February 19  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. We relish the opportunity to convey the full essence de Froio. Let us know you’re coming. 499-9346.

Thursday, February 20  1:00 p.m.  Legal Education
Attorneys from Pittsfield Family and Probate Court evaluate your legal issues and offer helpful direction. By appointment, 499-9346.

Thursday, February 20  1:00 p.m.  February Card Party
It’s an adage as old as the hills, well, at least dating back to the Roman philosopher Seneca, who opined that “Luck is what happens when preparation meets opportunity.” At monthly Card Party be prepared to find bottomless coffee, prizes and snacks! Unless otherwise arranged, foursomes are best.

Tuesday, February 25  8:45 a.m.  Blood Pressure Clinic
MOLARI Health Care monitors your blood pressure. Call 499-9346 for an appointment.

Tuesday, February 25  11:30 a.m.  Mardi Gras Party at Meal Site
Laissez le bon temps rouler! It’s time to roll out your Mardi Gras good-time merriment moves. Join us for the lively magic of a meal and a masquerade! Reserve a day ahead! 1-800-981-5201

Friday, February 28  10:30 a.m.  Brown Bag
Be a part of this monthly nutritional grocery program. Inquire about Brown Bag and SNAP benefits.
More Than a Headache: Easing Migraine Pain

Continued from page 4

For the United States as a whole, the economic burden exacted by migraine is staggering — at least $11 billion in direct medical and related costs and at least another $11 billion in indirect costs from the disability it causes, according to Dr. Wayne N. Burton of Chicago, former global corporate medical director at American Express.

Not only does migraine result in absenteeism, but also what specialists call “presenteeism” — people who are at work but unable to function effectively. A former editor of mine with migraine had to go home as soon as he sensed an impending migraine or he would be unable to get home until it resolved.

Though that was decades ago, today there still several reasons migraine is poorly controlled for so many people. One is a lack of appreciation by both doctors and the public for what it entails, which can discourage patients from seeking treatment. Another is a tendency for migraine sufferers to assume they can or should be able to deal with the problem on their own, either with over-the-counter or prescription drugs.

Resulting from that assumption, Dr. Silberstein said, is yet another stumbling block — an abuse of medication, which can actually make the condition worse. “Half the patients with chronic migraine overuse the treatment based on surveys we’ve done,” he said.

On the other hand, he added, when an attack is imminent, many people wait too long to initiate treatment “because they’re in denial and hope the headache will go away on its own. But the longer you wait, the harder it is to get relief.”

But perhaps the main problem is a paucity of medical experts — 580 specialists, or one doctor for every 80,000 people with migraine, who are conversant with the condition and available therapies, Dr. Dodick said. Even if patients can find an expert, a lot of insurance plans don’t cover certified headache specialists.

Thus, too often, patients with an excruciating migraine end up in a hospital’s emergency room, which Dr. Silberstein called “the worst place to go when you have a migraine, with all the lights, noise, activity and the wait.”

As Dr. Dodick explained, “The brain amplifies the signals coming in, intensifying the pain and symptoms throughout the body.”

There are four oral drugs in two different classes that have been approved by the Food and Drug Administration for the prevention of migraine: two anti-seizure drugs and two beta-blockers. In addition, patients with chronic migraine who have symptoms every day or every other day can get injections of Botox.

“Forty percent of people with migraine should be on preventive medication,” Dr. Silberstein said, “but only 13 percent get it.”

To treat an attack of migraine, doctors have long relied on drugs called triptans that act like the nervous system chemical serotonin to quiet nerves that transmit pain signals. There are now also biologic drugs, monoclonal antibodies that can be given once a month or once every three months, Dr. Dodick said. They were specifically developed to treat migraine by targeting a protein or its receptor that transmits pain signals.

Unfortunately, the biologics are expensive, and insurance companies usually insist that patients fail to get relief from three months of treatment with each of two other drugs before they will cover the cost. However, for some patients, including some with heart conditions, insurance coverage can be more readily obtained if their doctors document that the older drugs are medically hazardous for them. Still, too often, doctors have to pursue a time-consuming appeal process to get the coverage their patients require.

Dr. Silberstein urged patience when trying a new drug for migraine. He and his colleagues studied patients who had little relief after a month or two on a biologic, but by six months had almost no headaches.

The new nondrug option is a neurostimulator marketed by Theranica as Nerivio Migra. Worn as an armband with a rechargeable battery, it transmits weak electrical pulses on the skin and can be turned on and off as needed through a cellphone app. The base price of the device is about $99 for 12 applications.

Also of interest is a new class of compounds called gepants to treat migraine attacks. In a study of one such drug, ubrogepant (Ubrelvy), published in The New England Journal of Medicine, for example, there was a significant reduction in pain and other migraine symptoms in patients taking 50 milligrams of this oral medication, which was recently approved by the F.D.A.

Correction: Jan. 7, 2020

This article was updated to note that the drug ubrogepant (Ubrelvy) was recently approved by the Food and Drug Administration.

By Jane E. Brody, New York Times, January 6, 2020

Jane Brody is the Personal Health columnist, a position she has held since 1976. She has written more than a dozen books including the best sellers “Jane Brody's Nutrition Book” and “Jane Brody's Good Food Book.”

Woodworking

Tue & Wed @ 9:00

Yoga

Wed @ 1:35
For Better Brain Health, Preserve Your Hearing

Hearing loss is the largest modifiable risk factor for developing dementia, exceeding that of smoking, high blood pressure, lack of exercise and social isolation.

Every now and then I write a column as much to push myself to act as to inform and motivate my readers. What follows is a prime example.

Last year in a column entitled “Hearing Loss Threatens Mind, Life and Limb,” I summarized the current state of knowledge about the myriad health-damaging effects linked to untreated hearing loss, a problem that afflicts nearly 38 million Americans and, according to two huge recent studies, increases the risk of dementia, depression, falls and even cardiovascular diseases.

Knowing that my own hearing leaves something to be desired, the research I did for that column motivated me to get a proper audiology exam. The results indicated that a well-fitted hearing aid could help me hear significantly better in the movies, theater, restaurants, social gatherings, lecture halls, even in the locker room where the noise of hair dryers, hand dryers and swimsuit wringers often challenges my ability to converse with my soft-spoken friends.

That was six months ago, and I’ve yet to go back to get that recommended hearing aid. Now, though, I have a new source of motivation. A large study has documented that even among people with so-called normal hearing, those with only slightly poorer hearing than perfect can experience cognitive deficits.

That means a diminished ability to get top scores on standardized tests of brain function, like matching numbers with symbols within a specified time period. But while you may never need or want to do that, you most likely do want to maximize and maintain cognitive function: your ability to think clearly, plan rationally and remember accurately, especially as you get older.

While under normal circumstances, cognitive losses occur gradually as people age, the wisest course may well be to minimize and delay them as long as possible and in doing so, reduce the risk of dementia. Hearing loss is now known to be the largest modifiable risk factor for developing dementia, exceeding that of smoking, high blood pressure, lack of exercise and social isolation, according to an international analysis published in The Lancet in 2017.

The analysis indicated that preventing or treating hearing loss in midlife has the potential to diminish the incidence of dementia by 9 percent.

Difficulty hearing can impair brain function by keeping people socially isolated and inadequately stimulated by aural input. The harder it is for the brain to process sound, the more it has to work to understand what it hears, depleting its ability to perform other cognitive tasks. Memory is adversely affected as well. Information that is not heard clearly impairs the brain’s ability to remember it.

An inadequately stimulated brain tends to atrophy.

The National Institute on Aging is currently sponsoring a trial of 997 people aged 70 to 84 with mild to moderate hearing loss to determine how effective hearing aids can be in diminishing the risk of dementia. Results of the trial, called Aging and Cognitive Health Evaluation in Elders, are expected in 2022.

Meanwhile, the new findings on cognitive losses linked to subclinical hearing loss, gleaned from among 6,451 people age 50 or older, suggest that any degree of hearing loss can take a toll.

Currently, the sound level of 25 decibels — the ability to hear a whisper — is used to define the border between normal hearing and mild hearing loss in adults.

But this threshold is really arbitrary. The lead author of the study, Dr. Justin S. Golub, otolaryngologist and researcher at Columbia University Irving Medical Center, and his colleagues found that hearing loss is on a continuum that starts with “perfect” hearing at zero decibels (the sound level of a pin drop), with measurable cognitive deficits occurring with every additional loss above zero.

In fact, the researchers demonstrated that the biggest drop in cognitive ability occurs at the slightest level of hearing loss — a decline from zero to the “normal” level of 25 decibels, with smaller cognitive losses occurring when hearing deficits rise from 25 to 50 decibels.

“This doesn’t mean we should be fitting people with hearing aids when the softest sound they can hear is 25 decibels,” Dr. Golub said in an interview. After all, getting people with far more advanced hearing loss to use hearing aids is already an enormous challenge. As Dr. Golub noted, “Currently only 25 percent of people over 80 wear hearing aids, yet 80 percent of them have significant hearing loss” that might be greatly improved with aids.

The new findings linking cognitive decline to even minimal hearing loss suggest that we could do a lot to protect our brains if we protect our hearing. The fact that measurable cognitive losses occur at hearing levels below 25 decibels, and that cognition gradually worsens as hearing declines, suggests that protecting against hearing loss should start in childhood.

“In people with very good hearing, we need to be aware of how early changes in hearing affect the brain,” said Dr. Frank Lin, director of the Cochlear Center for Hearing and Public Health at the Johns Hopkins Bloomberg School of Public Health. “Without a doubt, the most important measure to preserve hearing is protection against noise.”

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Kissing Cousins

We played doctor on the enclosed front porch, pink coleus and snake plants watching, the hum of Italian from the kitchen shouting itself along the spice-filled air.

Then we'd line your metal cars from pantry to living room in unbroken line, stopping to visit blessed Mary in her alcove while St. Anthony novena cards rained down.

We sat in adjoining high chairs, sharing nightly feasts of peanut butter crackers.

Remember the spinning pasta dish? The forbidden cellar?
Grandma's peaches shining in glass jars?
Grandpa's wine insulating the walls?
The basil and plum tomatoes sunning near the edge of the grape vines?
The mud balls?

I gave them up to play "good girl" sipping coffee laced with cream and tasting cannoli with the women.

Then you'd streak by, give me your gap-toothed smile and I'd follow you anywhere.

We made the knick-knacks come to life, made hideaways behind the couch, rolled through fields on bikes in rusted red wagons.

Our saliva mixed with dirt and grass.

We chased each other through the roundabout until we fell into teenage.

You played Dion in the bedroom and paid my brother quarters to go away.

Guarding against Grandma's creaks on the stairs, we practiced grownup kisses, the sheer curtains blowing behind us like family ghosts.

A world of years later, both of us forty something with families of our own, you called with the news; it was the lymphoma, the smoking chain pulling you down.

You had dreamed us digging a hole to China, everyone else playing statues in twilight.

And so we made Sunday pilgrimages to visit Grandma, to help you say goodbye, to lay our memories side by side along the kitchen table, making bids to keep connected.

Now, alone with our memories, I watch our ghosts eat orange popsicles on the porch steps and spit with orange tongues through a dimension light years away.
<table>
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<td>9:00</td>
<td>Advanced Osteo</td>
<td>9:00 Woodworking</td>
<td>9:00 Foot Clinic</td>
<td>9:00 Knitting</td>
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<td>10:00</td>
<td>Brand New Line Dancing</td>
<td>10:00 Beginner Osteo</td>
<td>9:00 Beginner Osteo</td>
<td>9:00 Pitch</td>
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<td>11:00 Comedy Dungeon</td>
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<td>11:30 Flexible Feet &amp; Core Stability (NEW)</td>
<td>10:30 Flex Feet &amp; Core Stability</td>
<td>14:00 Knitting</td>
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<td>Ladies Pool</td>
<td>12:00 Tai Chi w/weights</td>
<td>10:30 Tai Chi</td>
<td>11:00 Pitch</td>
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<tr>
<td>12:00</td>
<td>Scrabble 12:00 Pinochle</td>
<td>12:30 Tai Chi</td>
<td>1:15 Tai Chi w/weights</td>
<td>11:00 Comedy Dungeon</td>
</tr>
<tr>
<td>12:45</td>
<td>Hand &amp; Foot! (New Time!)</td>
<td>1:00 Scrapbooking &amp; Cardmaking</td>
<td>1:15 Tai Chi w/weights</td>
<td>12:30 Quitting</td>
</tr>
<tr>
<td>1:00</td>
<td>Mah Jong</td>
<td>1:00 Bingo</td>
<td>1:00 Bingo</td>
<td>1:00 Bingo</td>
</tr>
<tr>
<td>1:00</td>
<td>Art Studio!</td>
<td>1:35 Yoga</td>
<td>1:35 Yoga</td>
<td>1:45 Beginner Tai Chi</td>
</tr>
</tbody>
</table>

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Senior Center CLOSED

Presidents' Day

24

9:00     | Advanced Osteo | 10:00 Blood Pressure Clinic (by apt.) | 9:00 Beginner Osteo | 9:00 Knitting  |
| 10:00    | Poetry         | 10:00 Beginner Osteo | 10:00 Ceramics     | 10:00 Pitch    |
| 10:30    | "The Councilman is In!" | 10:30 Tai Chi | 10:30 Flex Feet & Core Stability | 10:30 Brown Bag Day |
| 11:00    | Ladies Pool    | 12:00 Tai Chi       | 1:15 Tai Chi w/weights | 11:00 Comedy Dungeon |
| 12:00    | Scrabble 12:00 Pinochle | 12:30 Tai Chi       | 1:15 Tai Chi w/weights | 12:30 Quitting |
| 12:45    | Hand & Foot! (New Time!) | 12:30 Tai Chi       | 1:15 Tai Chi w/weights | 1:00 Bingo    |
| 1:00     | Mah Jong       | 1:00 Bridge, Canasta! | 1:00 Bridge, Canasta! | 1:45 Beginner Tai Chi |
| 1:00     | Art Studio!    | 1:35 Yoga           | 1:35 Yoga          | 1:45 Beginner Tai Chi |

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February

Meal Site Daily @ 11:30

Call a Day Ahead!

1-800-981-5201