



# REGENCY PARK SENIOR LIVING

INDEPENDENT LIVING | ASSISTED LIVING | MEMORY CARE

WELLNESS REPORT

## Adults Need Vaccines, Too

By Robert Preidt  
HealthDay Reporter

"Many adults are not aware that they need vaccines throughout their lives and so have not received recommended vaccinations," Dr. Robert McLean, president of the American College of Physicians, said in a college news release.

"Adults should get a seasonal flu shot and internists should use that opportunity to make sure their patients are up to date on the latest recommended immunizations," he advised.

Along with an annual flu shot, other important adult vaccinations include: Tdap to protect against tetanus, diphtheria and whooping cough; pneumococcal to protect against pneumococcal pneumonia, bacteremia and meningitis; HPV (human papillomavirus) to prevent cervical, anal and other cancers; hepatitis B; and herpes zoster to help prevent shingles.

Each vaccine should be given according to guidelines from the U.S. Centers for Disease Control and Prevention's Advisory Committee on Immunization Practices (ACIP).

"Vaccines are safe, effective and help prevent illness, hospitalization and even death, especially among the elderly and those with chronic conditions and weakened immune systems," McLean said.

"Physicians should conduct a vaccine needs assessment with their patients regularly. People who cannot get a flu shot or other vaccines for medical reasons should talk to their internist about other ways of protecting themselves," McLean recommended. August is National Immunization Awareness Month.



The latest ACIP-approved adult immunization schedule and recommendations appear in the *Annals of Internal Medicine*.

Earlier this year, ACIP recommended raising the upper age for catch-up vaccination against HPV in men to age 26 years -- the same as in women -- and recommended that patients aged 27 to 45 talk to their doctor about receiving the vaccine.

ACIP also recommended that the 13-valent pneumococcal conjugate vaccine (PCV13) be given "based on shared clinical decision making" in adults 65 and older who do not have a weakened immune system and who have not previously received PCV13.

All adults 65 and older should receive the 23-valent pneumococcal polysaccharide vaccine (PPSV23), according to ACIP.

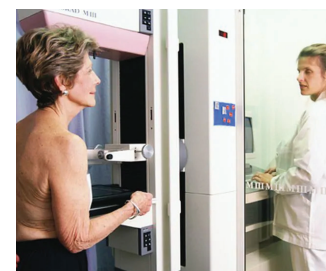
ACIP's recommendations must be reviewed and approved by the CDC. The final recommendation will be published in an upcoming issue of the CDC's *Morbidity and Mortality Weekly Report*.

More information  
The U.S. Centers for Disease Control and Prevention has more on adult vaccines.

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## MEDICAL MILESTONES IN HISTORY



**1818**

Dr. James Blundell performs The first successful blood transfusion from one human to another



**1953**

Dr. John Gibbons performs the first successful open-heart surgery using a bypass machine



**1978**

The first baby conceived through IVF is born

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# When Is It Time for Seniors to Hand Over the Car Keys?

By Robert Preidt  
HealthDay Reporter



"Driving retirement is a normal part of aging, and should be carefully considered and discussed openly," said Dr. Ericka Tung, an internist and geriatrician at the Mayo Clinic in Rochester, Minn.

"Primary care providers are uniquely poised to counsel patients about driving safety because they understand their patients' health conditions, capacities, challenges and goals," Tung said in a clinic news release. She is lead author of a paper in the journal Mayo Clinic Proceedings that examines the issue.

There's no single test to determine whether an older person should continue driving, but health care providers can look at several areas of physical and mental functioning to assess a senior's driving fitness.

Those areas are vision, including depth perception and visual fields; thinking skills, including changes in memory, attention or language; mobility and physical function, including range of motion and coordination of the neck, upper body and lower body; health conditions that could affect the ability to

safely operate a vehicle, and medications that could impair alertness. Another key factor is input from family members or other care providers, according to Tung and her colleagues.

These people can provide information about the senior's driving performance, ability to do daily basic tasks of living, or their history of falls. All can help determine if the senior needs a driver safety refresher course or should stop driving.

Because driving gives many seniors a sense of independence and control, any decision about hanging up their car keys must be communicated clearly and with compassion, the authors said.

It's critical that seniors stop driving at the appropriate time -- not after they've had a crash.

"Open dialogue is encouraged between patients, families and primary care teams to ensure safety on the road," Tung said.

More information  
The U.S. National Institute on Aging has more about older drivers.



# Can Older Women Stop Getting Mammograms?

By Serena Gordon  
HealthDay Reporter

The study findings indicate that women with chronic conditions, such as heart disease or diabetes, would likely die from those conditions before developing breast cancer.

"For those 75 and over with chronic illness, the benefit of continued mammography is minimal. Women 75 to 84 are 123 times more likely to die of other causes than breast cancer," said the study's senior author, Dejana Braithwaite.

That doesn't mean all women over 75 should forgo mammography.

"In healthy women age 75 and older, perhaps mammograms may make sense. It's important to individualize the decision. Women should discuss with their providers the potential benefits of continuing mammography," Braithwaite said. She's an associate professor of epidemiology and oncology at Georgetown University's Lombardi Comprehensive Cancer Center, in Washington, D.C.

Professional guidelines vary in their recommendations for mammography in older women. The American Cancer Society advises women to stop screening when their life expectancy is less than 10 years. Meanwhile, the U.S. Preventive Services Task Force (USPSTF) says there is not enough evidence to guide women's decisions about mammography at age 75 and up. Many European breast cancer programs stop recommending screening between 69 and 74 years.

One reason for these variations is there are few studies looking specifically at how mammography might benefit older women, the researchers noted.

To help fill that gap, the investigators looked at more than 222,000 women who'd had a mammogram between 1999 and 2010. The women were between the ages of 66 and 94. They were recruited from five U.S. centers.



The researchers tracked breast cancer cases, deaths from breast cancer and deaths from other causes for 10 years. During that time, almost 7,600 of the women were diagnosed with an invasive breast cancer. More than 1,700 had abnormal cells considered very early breast cancer (DCIS).

During those 10 years, 471 women died from breast cancer. More than 42,000 died from other causes, the findings showed. Breast cancer deaths accounted for between 0.2% and 0.3% of all deaths in women between 66 and 94.

Over time, the risk of dying from breast cancer stayed steady while the risk of death from other causes rose. The investigators also found that the risk of being diagnosed with a new breast cancer after age 75 went down slightly over time.

Deana Baptiste, director of cancer screening guideline development at the American Cancer Society, said this research "reinforces the guidelines we put out in 2015 that recommended that women should continue mammography as long as their overall health is good."

There's no set cut-off age for stopping mammography, she added. Like the researchers, the cancer society also emphasizes the need for individualized decisions about screening.

"A healthy woman with at least 10 years of life expectancy should be assessed by a clinician, discuss the risks and harms, and apply personal preferences about whether screening should continue," Baptiste said.

Dr. Bonnie Litvack, director of women's imaging at Northern Westchester Hospital in Mount Kisco, N.Y., said this study seems in line with current guidelines.

"Women need to understand the risks and benefits of continued screening, but there's no established age to stop. The age to stop screening should be tailored to the individual patient," she said.

The study was published Sept. 6 in the Journal of the National Cancer Institute. More information  
Learn more about breast cancer screening from the American Cancer Society.

# Even Age 80 Is Not Too Late to Begin Exercising: Study

By Robert Preidt  
HealthDay Reporter



A new study found that men in their 70s and 80s who had never followed an exercise regimen could build muscle mass as well as "master athletes" -- those of the same age who had worked out throughout their lives and still competed at the top levels of their sports.

The U.K. researchers took muscle biopsies from both groups in the 48 hours before and after a single weight-training session on an exercise machine. The men were also given an isotope tracer before the workout in order to track how proteins were developing in their muscles.

It was expected that the master athletes would be better able to build muscle during exercise, but both groups had an equal capacity to do so, the University of Birmingham team found.

The study was published Aug. 30 in the journal *Frontiers in Physiology*.

"Our study clearly shows that it doesn't matter if you haven't been a regular exerciser throughout your life, you can still derive benefit from exercise whenever you start," lead researcher Leigh Breen said in a university news release. He's a senior lecturer in exercise physiology and metabolism.

"Obviously a long-term commitment to good health and exercise is the best approach to achieve whole-body health, but even starting later on in life will help delay age-related frailty and muscle weakness," Breen said.

Current public health advice about strength training for older people tends to be "quite vague," he noted.

"What's needed is more specific guidance on how individuals can improve their muscle strength, even outside of a gym-setting through activities undertaken in their homes -- activities such as gardening, walking up and down stairs, or lifting up a shopping bag can all help if undertaken as part of a regular exercise regimen," Breen said.

More information  
The U.S. National Institute on Aging has more about exercise and physical activity.

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**For More Information, Contact:**  
**Regency Park Senior Living, Inc.**  
Randi Cohen - Editor  
626-773-8800

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