

**Ask Hedy!** *On a regular basis, Hedy Ciocci, B.S.N., Administrator of the Selfhelp Home will answer some of the many questions we have around aging. Hedy specializes in dementia care, has extensive experience working with families and elderly patients, and is a registered nurse. She is a frequent lecturer on issues of aging.*

*Harvey Golden, M.D. is a Rheumatologist, a physician who has trained in Internal Medicine and then specialized in diseases of the joint, bones and immune systems. He was a private practitioner, teacher and researcher in Chicago for forty years, most recently at Rush University Medical Center and as Professor of Medicine at Rush Medical College.*



*Hedy Ciocci*

**Q: Recently, a woman age 90 living in Hawaii made news as she was getting ready to walk her 5th marathon. Why is it that when we reach our 80s and even 90s, some people remain able to walk distances easily, and other people have joint and bone problems?**

A: There are several reasons. Some people are just endowed with genes by nature to be stronger and more vigorous. If we're lucky enough to have parents who lived a long age and were vigorous when they were older, our chances of having the same outcome are increased, but not assured.

**Q: What else plays a role in this?**

A: Staying away from certain things that can inhibit your abilities as you age. I think the top of the list is smoking. Concerns that people had back in the 1960s and '70s, when it first became apparent that cigarette smoking was dangerous, have all been amplified. Everything we thought then was bad is worse now. Bad things – multiple kinds of cancer, not just lung cancer, skin, lung, and heart disease and high blood pressure – that you are inclined to by your genes, are more likely to happen when you smoke cigarettes.

**Q: Under the heading of “things to avoid,” how can we protect bones and joints?**

A: Weight gain. The heavier you are, the greater the risk that you will have trouble with osteoarthritis. “Arthritis” is a generic term which means “inflammation of the joints.. The most common kind of arthritis as we age is osteoarthritis.

**Q: What are the earliest symptoms that indicate a weakening of bones and joints?**

A: The problems which occur in your bones, as opposed to your joints, are slightly different. To keep your bones strong, exercise is important. We know that when people are immobilized and don't bear any weight, their bones get thinner and they develop osteoporosis. If you are a sedentary person, and you don't walk or vigorously move around in your life activities, you increase your chances of getting osteoporosis.

**Q: What else could you do to protect your bones.**

A: Most Americans, if they miss any vitamin at all, it's Vitamin D, which is good for your bones. They may not be out in the sun enough. Some sunshine helps you develop high levels of Vitamin D in your blood. The dose we used to think was adequate for Vitamin D probably isn't. Older people probably should have 800 international units of Vitamin D per day; the previous recommendation

was more like 400. Also, you should try to get about 1500 mg of calcium per day. Most of us, when we're older, don't drink a lot of milk and may avoid dairy products, which are good sources of calcium. So, I would say that extra Vitamin D and extra calcium are a good idea for most adults to increase the firmness of your bones and reduce the risk of fractures.

**Q: When people come to you with problems, what are some of the major issues.**

A: Once again, I want to separate bones and joints. Most people don't complain about thinning of the bones until they break a bone. But, arthritis, the inflammation of joints, is a painful condition, and people go to the doctor most of the time complaining of pain.

**Q: Have there been any other new discoveries that help people with their joints and bones.**

A: We have more potent drugs for some varieties of arthritis now than we had even ten years ago. But for osteoarthritis, there are not many drugs that help. Mostly, we're talking about pain relieving drugs, like Tylenol and non-steroidal anti-inflammatory drugs, like ibuprofen. These are pretty much pain relievers; they don't really do much about osteoarthritis. Another kind of arthritis seen in older people is called Polymyalgia Rheumatica, abbreviated PMR. It's a more serious kind of arthritis. It's a

very painful condition, even though it doesn't cause deformity of the joints. It is most often treated with cortisone.

**Q: Are you able to see when your patients have osteoarthritis?**

A: Usually you can. It causes an enlargement of the bony parts of the joints. Osteoarthritis mostly affects certain joints of the hand, the knees, the hips and spine.

**Q: What other issues do you see as a result of these conditions?**

A: It is almost always the case that as people get older their balance is poorer than it was when they were younger. A huge problem for older people is the risk of falling. Using a cane is helpful for older people because at the very least, a cane reminds you to be careful. It gives you three legs, as opposed to two, and that's a more balanced position.

**Q: What else can help with balance?**

A: There's a series of things that can help. The weaker your muscles are, the more likely you are to fall. So, in addition to walking, even modest weightlifting is useful. If there are steps, use them. Walking a flight once or twice a day improves the strength in our legs and decreases your risk of falling. For many older people, it would be good to see an occupational therapist to help with an exercise program to maintain balance.