

Rx briefs

Fitness day

The 10th Annual National Senior Health and Fitness Day will get underway 9 a.m. May 28 at the Bolsoford Center for Health Improvement. All activities are free. Highlights include a trial-size 20-minute exercise class for seniors; gentle yoga chair yoga; stretch and strengthen classes; and a healthy yogurt social from noon to 3 p.m. Lectures throughout the day include Let's Get Moving, Alternative Therapies, Chronic Disease Management and Fall Prevention/Home Safety. Blood pressure screenings, blood sugar screenings, facility tours and water fitness demonstrations will take place all day. Call (248) 477-6100 for information.

Prenatal test

Henry Ford Hospital is the first in Michigan to offer a new prenatal genetic test that improves the accuracy of detecting Down's syndrome. The blood test, when combined with other prenatal genetic tests, increases the detection rate for Down's syndrome to 81 percent from 76 percent and lowers the false positive rate from six percent to three percent.

The new test measures a chemical in the blood called pregnancy associated plasma protein A or PappA. It is the fifth in a series of markers that analyzes chemicals in the mother's bloodstream to identify unborn babies who may be at risk for a birth defect. For more information about the PappA test call (800)-HenryFord or visit HenryFord.com

Summer camp

Hawthorne Center, a facility that helps families cope with chemical dependency problems, will host three free summer camps for children. Registration is required and enrollment is limited. Call (248) 661-6700. Parents can concurrently participate in adult programming including family communication discussions and effective decision making.

Dates and locations include 9 a.m. to noon June 23-27 at Hawthorne Center, 6773 West Maple Road and 5:30-8:30 p.m. July 14-18 at the same location; 9 a.m. to noon July 21-24 and July 28-31 at the Bridge Cultural Center, 2429 West Road, Trenton; and 5:30-8:30 p.m. Aug. 4-8 at Gilead Baptist Church, 12501 Telegraph Road.

Anxiety Disorders

Free mental health screenings will be offered throughout the remainder of May at the Center for the Treatment of Anxiety Disorders. You can speak with a mental health professional and learn ways to get help. If persistent, anxiety can develop into an anxiety disorder. Call Carolyn Deltch, Ph.D. for a free appointment (248) 626-6151.

Tornado season

The American Red Cross urges southeastern Michigan residents to ready themselves for the 2003 tornado season. As with any disaster, preparation can be the difference between life or death. The Red Cross recommends families create and practice a home tornado plan (understand an area where you can gather for shelter; assemble a disaster supplies kit (first aid kit, canned food, bottled water, battery-powered radio, extra batteries, manual can opener, and head storm warnings) once the difference between a watch and a warning. For more information call (313) 633-4440 or visit www.redcross.org

Botox treatment

The first step in turning back the hands of time



Deborah Aure-Yachon sits patiently while Dr. Michael Freedland readies her Botox injections.

BY LAURA COLVIN
CORRESPONDENT

For those who want to soften the effects of time but aren't ready for something as drastic and costly as a facelift, Botox may be the answer.

According to the American Society of Plastic Surgeons, over 1.1 million Americans chose Botox last year as a means of smoothing the facial lines and wrinkles brought on by sun, smoking, genetics and age.

One session lasts about 10 minutes, and the result is a smoother, more youthful appearance.

"The life expectancy is increasing," said Dr. Michael Freedland, a plastic surgeon at Michael H. Freedland Plastic and Reconstructive Surgery in Bloomfield Hills. "People still feel young at 60 and remain very active. They don't want to look their age."

Botox isn't just for older adults. While it is approved to treat facial lines and wrinkles in people age 18-65, the ASPS reports highest use in those between 35 and 50.

The process is fairly simple, minimally invasive, and there's no recovery time. Botox is administered through small, precise injections, and works by temporarily paralyzing the muscles that cause skin to wrinkle.

The effects last about four months, but Botox won't work on every wrinkle.

"Botox works best in the upper third of the face, in the area between the eyes, on the crow's feet - those lines that form outside the eyes - and on the forehead," said Freedland.

Botox is a purified and diluted form of botulinum toxin A, a neurotoxin produced by clostridium botulinum - the bacteria that sometimes grows in canned food, and, when ingested, causes botulism poisoning.

Risks are minimal but can include allergic reaction, headache, bruising, numbness and swelling. Also of concern is a rare condition caused when Botox is administered to patients with very loose skin on the upper eyelid.

"If you use Botox on those patients, they're not going to be happy," said Freedland. "At the end of the day that loose skin begins to droop over the eyes and they won't be able to see."

Most practitioners recommend that patients seek a health professional who will perform a comprehensive evaluation and reduce the possibility of such complications.

"I think it's a good idea to go to a plastic surgeon," said Freedland. "I can say to that patient 'I can do the Botox, but here's what might happen.' In those cases, I can recommend other options for that particular patient."

LOW RISK FACTOR

The risk of serious complications is low, and Botox is enjoying enormous popularity.

According to Allergan, a specialty pharmaceutical

PLEASE SEE DOTOX, C8

Earlier referrals to hospice mean better quality of life

The hospice philosophy centers around providing comfort and dignity for the terminally ill, while bringing families together by involving loved ones in the patient's care.

Yet despite the peace and autonomy that hospice can bring, many families remain reluctant in their approach to admission into hospice care. Many people view admission into hospice care as a death sentence: it isn't. It is a life sentence. Many people view hospice care as "the end" or "giving up."

"We are experts at working through all types of pain right along with you," said Wendy Winkler, a registered nurse, clinical manager at Angela Hospice in Livonia. "We have support available 24 hours a day, seven days a week, every day of the year. We discuss your life with you, not your death."

Hospice care is a way for patients and their families to cope with and take comfort from facing the end of life. But admitting that a life-limiting illness is present in yourself or a loved one is a difficult step to make. The natural response to facing a terminal diagnosis can be a shocking and emotionally stressful time. The aim of hospice care all over the world is to ease patients and their families through this time, in as comfortable a setting as possible.

Earlier referrals to hospice care can greatly increase the comfort and decrease the pain of terminally ill patients. It is not necessary for a patient's doctor to refer them to hospice care. A patient can enter hospice by their own decision and will.

"We realize that it is a hard call to make for some people, because a change is happening and they aren't always

ready to accept that. But families of our patients always say they wish they had found us sooner," Winkler said. "We can be the eyes and ears of your doctor, we can bring everything to you while you stay at home and avoid long and expensive hospital stays. Our focus is on the emotional and physical care of patients, not just treating their illness."

The continuation of a happy, healthy, pain-free life is also a primary goal of hospice care. Dame Cicely Saunders, founder of the first modern hospice in London in 1968, said: "You matter to the last moment of your life, and we will do all we can, not only to help you die peacefully but to live until you die."

No one wants to die alone or in pain. And few would choose to die in impersonal surroundings, hooked up by tubes to machines, and cut off from their family and friends and everything familiar to them. Hospice assures all its patients that they will not die in this manner. Rather they will spend their last moments at home, alert, free of pain, and among the people and things they love.

In 1999 nearly 2.4 million Americans died. Of those who chose to receive hospice care, 78 percent were able to spend their last days at home, or in a home-like environment, with their family and friends gathered around them.

WHAT IS HOSPICE?

The hesitancy on the part of patients toward hospice care often stems from two sources: first, they are afraid to accept that they are, in fact, facing the end of life, and two, they are not aware of

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Frequently asked questions about hospice care

When should a decision about entering a hospice program be made - and who should make it?

At any time during a life-limiting illness, it is appropriate to discuss all of a patient's care options, including hospice. By law the decision belongs to the patient. Many people are uncomfortable with the idea; they wish to continue their treatment and beat their illness. Hospice staff members are highly sensitive to these concerns and are always available to discuss them with the patient, family, and physician.

Can a hospice patient who shows signs of recovery be returned to regular medical treatment?

Certainly. If improvement in the condition occurs and the disease seems to be in remission, the patient can be discharged from hospice and return to aggressive therapy or go on about his or her daily life. Patients are also free to discontinue hospice care without signs of recovery. If at any time the patient no longer wishes to receive hospice care, regardless of the current status of their illness, they can withdraw from hospice.

How difficult is caring for a dying loved one at home?

Caring for a dying family member is never easy; in fact, it is often difficult. At the end of a long, progressive illness, nights especially can be very long, lonely and scary. Hospices have staff available around the clock to consult with the family and to make night visits as appropriate. In addition, the hospice team advises the family in how to care for their loved one at the time of admission.

What specific assistance does hospice provide to home-based patients?

A team of doctors, nurses, social workers, counselors, home health aides, clergy, therapists, and volunteers cares for hospice patients - and each provides assistance based on his or her area of expertise. In addition, hospices help provide medications, supplies, equipment, hospital services, and additional help in the home, as appropriate.

Does hospice do anything to make death come sooner?

Hospices do nothing either to speed

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