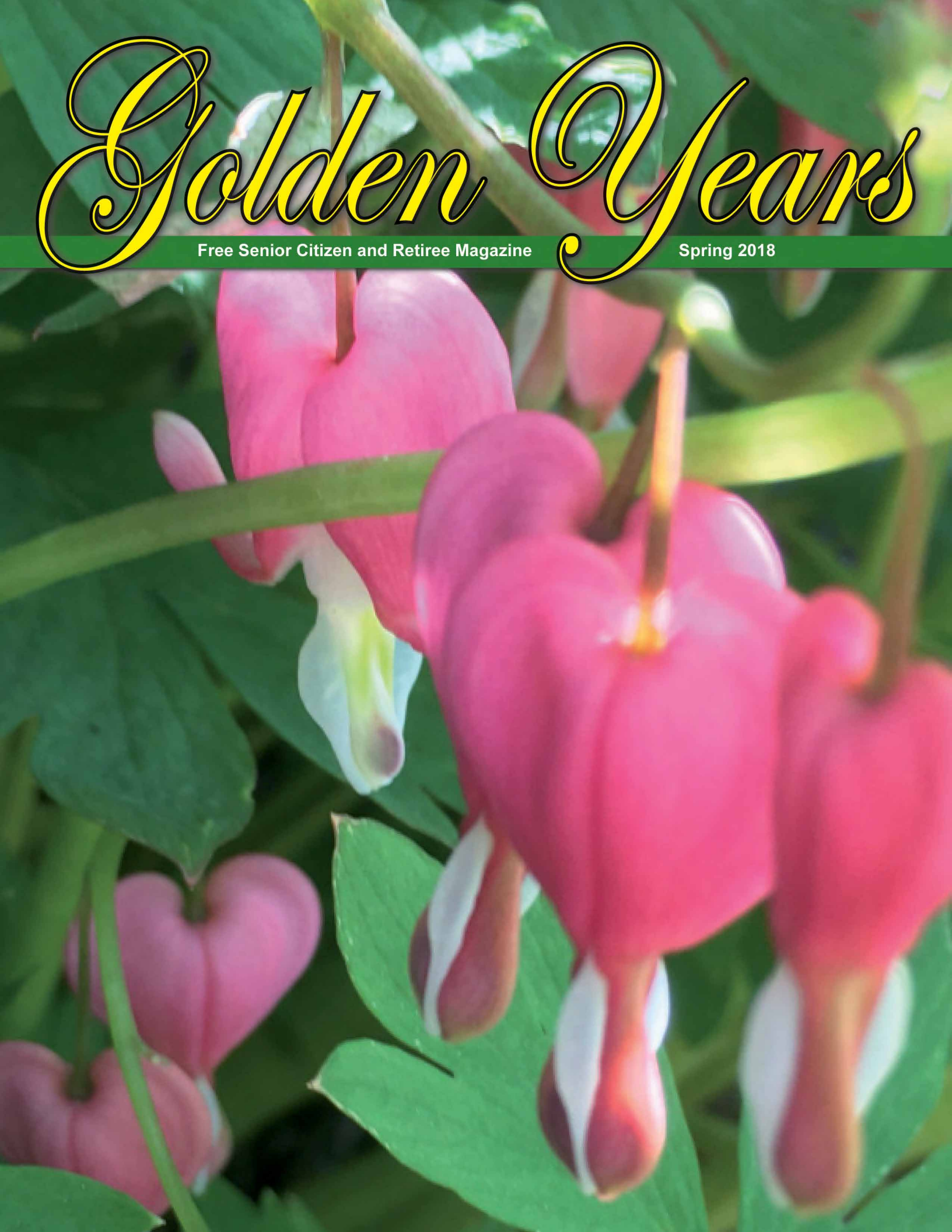


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Spring 2018



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Golden Years

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Peace of Mind:

The importance of having an advanced directive

Have you thought about the type of care and medical treatment you might want should you ever become unable to make decisions or speak for yourself? It's hard for most of us to imagine this scenario, especially when we are young and healthy. However, you never know when you may experience a medical emergency. A

car accident or sudden illness can leave you incapacitated and in need of serious medical care. Advanced medical planning helps you prepare for the unexpected while you are well and able to make difficult decisions for yourself.

ADVANCED DIRECTIVES

An advanced directive consists of legal documents that put your

medical wishes in writing and allows you to choose someone you trust to make health-care decisions for you. These documents offer peace of mind that, should the unthinkable happen, you've made your wishes known. Preparing an advanced directive is also an important gift to your loved ones. They will rest easier knowing they are making medical decisions based on what you do or do not want. The two main components of an advanced directive are a living will and a medical power of attorney.

An advanced directive allows you to document your wishes for medical care should you ever be unable to.

LIVING WILL

A living will is the document in which you specify your wishes concerning medical treatment. Your doctor will only invoke your living will if you are unable to make your

own decisions and you have the medical conditions specified in your state's living will law (for example, you are unconscious or terminally ill). Your living will is where you can say, for example, whether you want CPR if your heart stops, a breathing tube if you can't breathe on your own, or dialysis for kidney failure.

MEDICAL POWER OF ATTORNEY (MPOA)

A MPOA is a legal document in which you designate a specific person to make medical decisions on your behalf in the event you cannot speak for yourself. Your MPOA can be your spouse, parent, child, sibling or friend. That person should clearly understand your wishes and be willing to advocate for you, even if they disagree with your decisions.

You can obtain both of these documents from your doctor or your local agency on aging.



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If you do not have an advanced directive, you may receive care that you don't want, especially if your family members are not available or don't know your wishes. In the absence of an advanced directive, some states

appoint a legal guardian to make decisions for you. By not planning ahead, you risk relinquishing all control over your medical care if you are in a coma or otherwise unable to communicate your wishes.

WHO NEEDS AN ADVANCED DIRECTIVE?

You do! More than 25 percent of older adults face important questions about medical treatment but are not capable of making decisions, says the National Institute on Aging. However, advanced medical planning is NOT just for the elderly or seriously ill. At age 18, you are legally an adult and responsible for your own medical decisions. ALL adults at every age should be prepared just in case. Don't worry if your health situation or preferenc-

es change. You can revise your Advanced Directive documents any time.

After completing your living will and Medical Power of Attorney documents:

- Store them in a safe but accessible place.
- Give a copy of your medical power of attorney to your primary care physician.
- Carry an advanced directives wallet card.
- Review these documents periodically in case you change your

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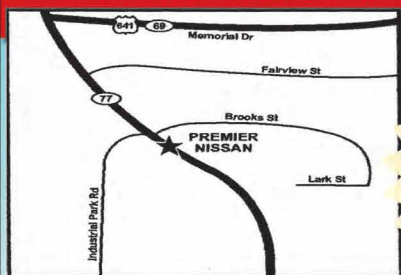
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ADDITIONAL OPTIONAL DOCUMENTS

Do Not Resuscitate (DNR): An order not to restore or restart your heart rhythm if it stops or beats unevenly while you are in the hospital.

Do Not Intubate (DNI): An order not to put you on a breathing machine if you cannot breath on your own.

Organ and Tissue Donation: This order gives your permission to donate your organs to someone who needs them in the event of your death.

ACTION ITEMS:

Complete a living will and MPOA. A living will is different from a final will and testament. Every adult should have both documents.

Living will—outlines your medical wishes if you are ill or injured and cannot speak for yourself.

Final will and testament—directs how to distribute your assets and property upon your death.

Henry County Medical Center offers the documents and expertise to help you completed these items if you need assistance with them. Contact our Patient Access Department at 731-644-8502 or contact our Home Health & Hospice staff at 731-642-7600.

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Miss Kitty

Advice for Affairs of the Mature Adult's Heart



DEAR MISS KITTY,
I'm afraid the spark is gone! I am no longer my husband's catnip. He's happy for me to cook his meals, rub his feet and run our household, but things have certainly lost their fizz in one room of our house – the bedroom! We are more like roommates than spouses. I know we are getting older, but we're not

dead! What can I do?
Bored Roommate

Dear BR,
Miss Kitty is so sorry that you are not feeling the love, or the cuddles! But before we toss hubby out for a newer model, let's give him the opportunity to make it all better. Make an appointment for him with your family doctor and do not take 'No' for an

answer. There very well may be a medical or health issue behind this whole problem, one that can be fixed.

If there is no help there, then you have to do the more challenging thing (which you really should do anyway!): You have to have THE TALK, until he understands, beyond a shadow of a doubt, what

you need and want. This chat may very well create a sense of closeness and help restore some sense of intimacy.

Best of luck kitten! (But be careful what you think you want – read on!)

DEAR MISS KITTY,
Modern medicine is wonderful, but my husband's 'little blue

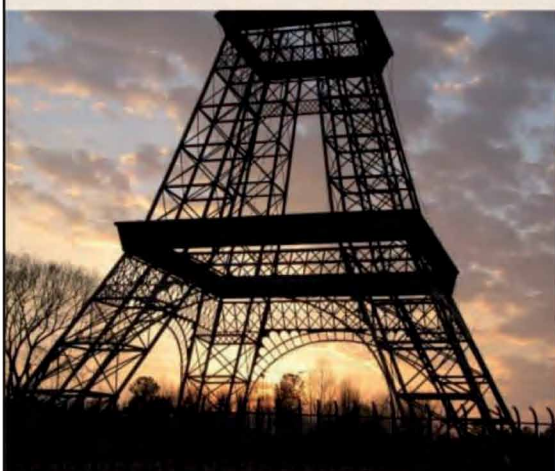
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pill' is exhausting me. I marched him to the doctor to get him 'fixed' when things got a little slow in the bedroom, and it was great for a while, but enough is enough. He thinks he is 18 again and no opportunity should be wasted. I am in my 60s and this is all just too much! But how do I tell him? This was my idea! I wanted my loving husband to be strong and virile again, I did not sign up for this nonstop affection. The problem now is that just because he can, he thinks we should, and it seems to hurt his

feelings if I am not in the mood.

Any advice?

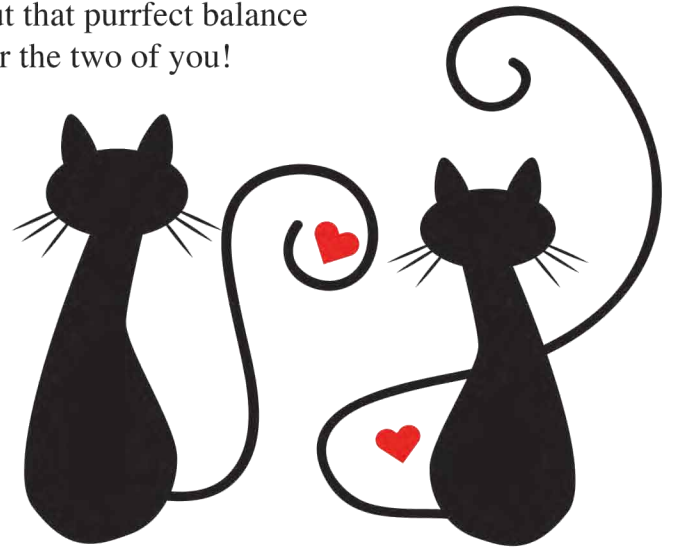
Tired Wifey

Dear Wifey,
Mewow! Are you trying to make Miss Kitty jealous? What a problem to have! But just like the sweet reader before you, this is really a communication problem. You asked him to give you more affection. It does seem a little unfair that you are not so welcoming now! Have the talk and let him know just how often you want to

get tangled up in the sheets.

He's a big boy. He can handle the truth, and surely he know by now that we ladies LOVE to change our minds. Maybe he will figure out that purrfect balance for the two of you!

Dear Readers,
Miss Kitty is a curious kitty. She loves reading all about your lives and hearing all the details! Write me and see if your letter makes it into the shiny pages of the Golden Years!



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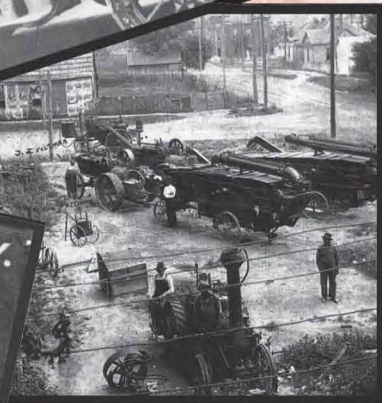
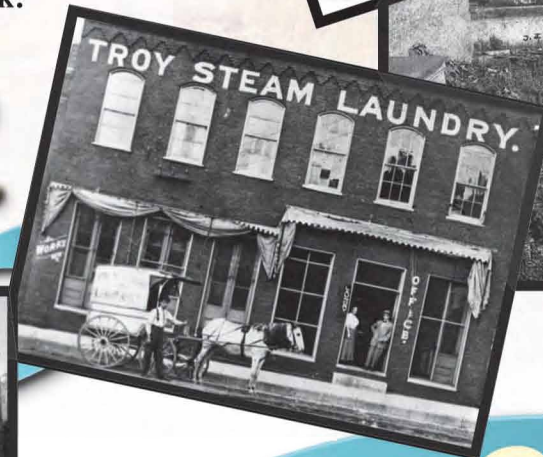
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Down Memory Lane



Clockwise from top left:

1. Singing Convention in Henry, TN on April 19, 1914.
2. Model T car, ~ 1910.
3. First motorized fire truck, an American LaFrance, in Paris in 1915.
4. Veltman Plumbing and Machinist Yard, on the corner of Wood and Fentress Streets in 1910.
5. Troy Steam Laundry in ~1900 on the corner of West Wood and Fentress Streets.
6. The Caldwell Hotel was constructed in about 1899 at the corner of Washington and Fentress Streets. Present day location of Security Bank.



in the early 1900s



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A flurry of new investment products, the emergence of global investing, the shift from company-funded pension plans to employee-driven retirement plans (like 401(k) plans), and uncertainty about Social Security have all contributed to the increased need for qualified financial advice. No matter what your level of invest-

ment experience or sophistication, you may benefit from developing a relationship with a financial advisor.

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prepare a program designed to help you address your financial goals and objectives. It might be helpful to think of your financial advisor as a kind of doctor for your financial health.

Financial advisors (also called financial planners or financial consultants) can earn certifications or designations by completing accredited courses of study. Two of the most common are the Certified Financial Planner™ (CFP®) certification, which is awarded by the Certified Financial Planner Board of Standards Inc. and the Chartered Financial Consultant (ChFC) designation, which is awarded by the American College of Financial Services in Bryn Mawr, PA. There is also the Registered Financial Planner, which is a designation awarded by the International Association of Registered Financial Planners.

Financial advisors are often trained as accountants, lawyers, insurance agents, or stockbrokers -- all professions that have a relationship to dif-

ferent aspects of your financial well-being. Because of this association with another profession, a financial advisor frequently will specialize in a specific type of financial planning, such as retirement planning or estate and trust planning.

Benefits of Working With a Financial Advisor

Most people can benefit from professional guidance when they venture into the complex and confusing world of managing their financial affairs. A financial advisor will be able to assess your risk tolerance, analyze your resources and current asset allocation, take into account your tax liability, and make investment recommendations in the form of a written financial plan that will help you to pursue your goals. The plan may help ensure that your current and future assets are used to their best advantage given your current financial situation and your financial goals.

Building a Relationship

Many events may be catalysts to seek financial help, such as planning for retirement or establishing a college fund or even changing jobs, but once you have established a relationship with a financial advisor, you will probably find a number of other ways you can benefit from working with him/her.

At your first meeting, you and your advisor will identify your financial needs and invest-

ment goals. Although it sounds simple, this can be harder than you think. Your advisor will be able to ask you the right questions to help you to determine what your goals are, just in case you aren't sure yourself.

To prepare for your first meeting, call your advisor and ask what specific documents and information you should bring. These may include essential documents such as wills, copies of insurance policies, pension information, and investment account

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statements. In addition, you should be prepared to answer or at least discuss the following questions:

Retirement -- When do you plan to retire? In what style do you expect to retire? Do you have any retirement savings?

Income and Savings

-- What is your current income and rate of savings? Do you anticipate a change in jobs, leaving a job to stay home with children, or starting your own business?

College -- Do you have plans to fund or help fund your children's education?

Disasters -- Are you prepared for the unexpected? If you lost your job, had a serious accident, or contracted a serious illness, would you be prepared financially?

Estate Planning -- Do you have a will? Have you considered the tax implications of transferring your estate to your heirs?

After you and your financial advisor have established your investment goals and objectives, your advisor will create a plan for you and review this with you. Among the objectives, the plan may include making sure you have sufficient insurance, that you have cash reserves to meet unexpected financial needs, and that specific short- and long-term goals are provided for. The plan may also involve reallocating some or all of your assets into more suitable investments that fit your risk tolerance and your investment goals. In addition, the plan will recommend where to invest future assets

(regular savings or lump-sum payments), and how much you will need to save to achieve your financial goals.

After you and your advisor have agreed on a plan of action and implemented it, all you need to do is schedule annual financial reviews to make sure the plan works to your satisfaction and that none of your goals have changed over time. And if you have major changes or events in your life, keep your financial advisor informed of these. Some examples include a change in marital status, the birth of a child, a change in income, or receiving an inheritance.

Taking Charge

To work successfully with a financial advisor, you need to build a solid relationship based on trust and mutual respect. And most important, you need to be involved. Often, the least successful relationships are those in which the client is not very involved.

By deciding to consult a financial advisor, you have begun to take charge of your finances. A professional financial advisor will help you identify your investment goals and create a plan that may help achieve them. In the years to come, your advisor can become a trusted friend and confidant. And together, you will have implemented a strategy to that seeks to maximize the earning power of your assets so that they are working toward creating a more confident financial future for you.

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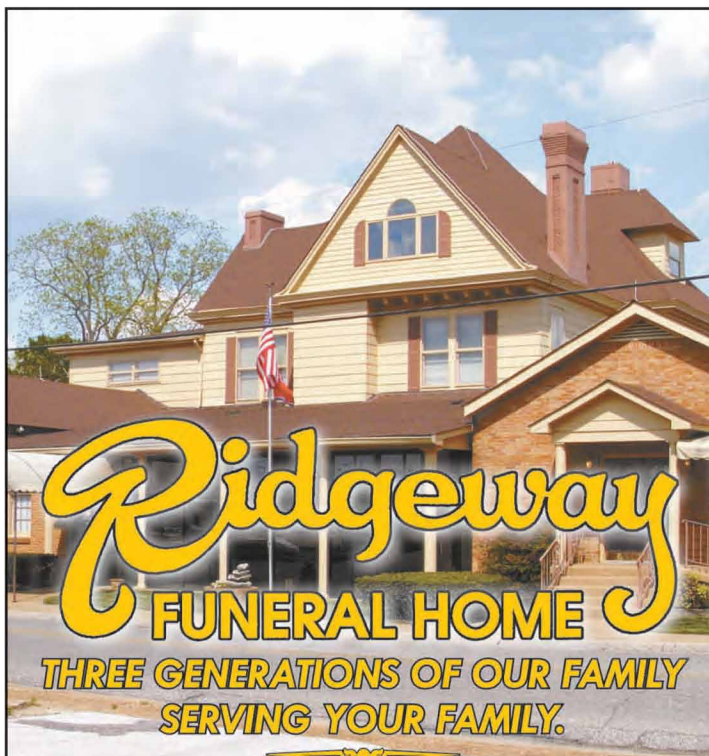
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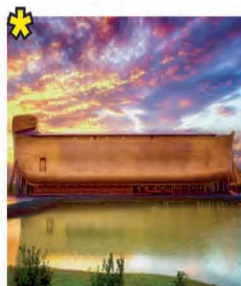


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Astigmatism and its importance in Cataract and Refractive Surgery

Written by: Terrence Doherty, MD, Loden Vision Centers

"I was told that I have astigmatism."

This is a common phrase that eye doctors hear from their patients, especially when they present for LASIK or cataract surgery. Although most of these patients are familiar with the term and are aware that it affects their vision and glasses prescription in some way, many are still not exactly sure what it is and how it will affect their future treatment options. So what exactly is it? Will it be there forever? And if it affects vision, how can it be treated?

Astigmatism... Sounds like some sort of affliction or disease to some people, but this is, of course, not the case. Rest assured, astigmatism is not a disease or major abnormality. In fact, almost everyone has at least some amount of measurable astigmatism. In the simplest terms, astigmatism can be thought of as a

way of describing the shape and the focusing characteristics of the eye, in particular, the very front part of the eye called the cornea. The best way to fully understand it is to start with the eye's anatomy.

The human eye actually shares many characteristics of a camera. The front part of the eye focuses the incoming light while the neurological film in the back of the eye, called the retina, captures the image. The cornea actually does most of the eye's focusing. When the shape of the cornea is not perfectly symmetrical, it is described as having astigmatism. And that means that it will not focus light symmetrically in all directions.

Correcting Astigmatism with Laser Cataract Surgery

People often express concern and disbelief when their doctors tell them they have

cataracts. But did you know that a cataract is simply the natural lens inside the eye that has undergone the normal aging process? In doing so, it has become more dense and yellow, blocking light and causing reduced vision with glare. All of us will get cataracts in our lifetime if we live long enough.

Although cataract surgery used to involve less refined techniques, a stay in the hospital, higher risks, and variable results, today, it is a 10-15 minute outpatient procedure with very low risk and tremendous visual outcomes. In fact, cataract surgery can be looked upon these days as not just a medical procedure, but rather an opportunity to get out of glasses and enjoy spectacle-free vision! That is an opportunity that many people have never in their lives had the chance to experience. And this is true even for people with astigmatism.

When cataract surgery is performed, what is essentially taking place is that the eye's natural lens is being removed and replaced

with an Intraocular Lens Implant (IOL). When the natural lens is removed and the IOL is inserted inside the eye, the optics of the cornea, including existing astigmatism, are relatively left unchanged. That means, if left uncorrected, this astigmatism will cause a significant amount of blurriness for both distance and near objects. In most cases, a pair of bifocal spectacles will correct this.

But what if you don't want to wear spectacles?

Fortunately, there are options which will allow the surgeon to correct astigmatism at the time of the cataract surgery, significantly decreasing, and in some cases, eliminating the need for spectacle correction. Today, surgeons can utilize specialized cataract lasers to correct astigmatism and toric lens implants may be used that have astigmatism correction built into them.

This advanced technology results in a much higher visual quality after surgery due to the fact that astigmatism is corrected inside the eye.

This means that there is no longer the visual distortion associated with astigmatism eye-glasses or fluctuations due to rotating contact lenses.

In addition, most patients with these lenses no longer need glasses for any of their distance related activities like driving, watching TV, or playing sports! What's even more exciting is there are now toric lens implants that also provide spectacle freedom for not only distance activities, but also for near and intermedi-

ate tasks! Some of our happiest patients are those that have opted for toric lenses.

Fortunately, with the technology and the expertise that is now available, we no longer have to let astigmatism limit our vision or our options when it comes to seeing our world more clearly!

References:

1. Eydelma MB et al. *Listening to Patients – The Laser-Assisted In Situ Keratomileusis Quality of Life Collaboration Project. JAMA Ophthalmol.* 2017; 135 (2):83-84.
2. Price MO et al. *Three-Year Longitudinal Survey Comparing Visual Satisfaction with LASIK and Contact Lenses. Ophthalmology.* 2016 Aug; 123(8):1659-66.



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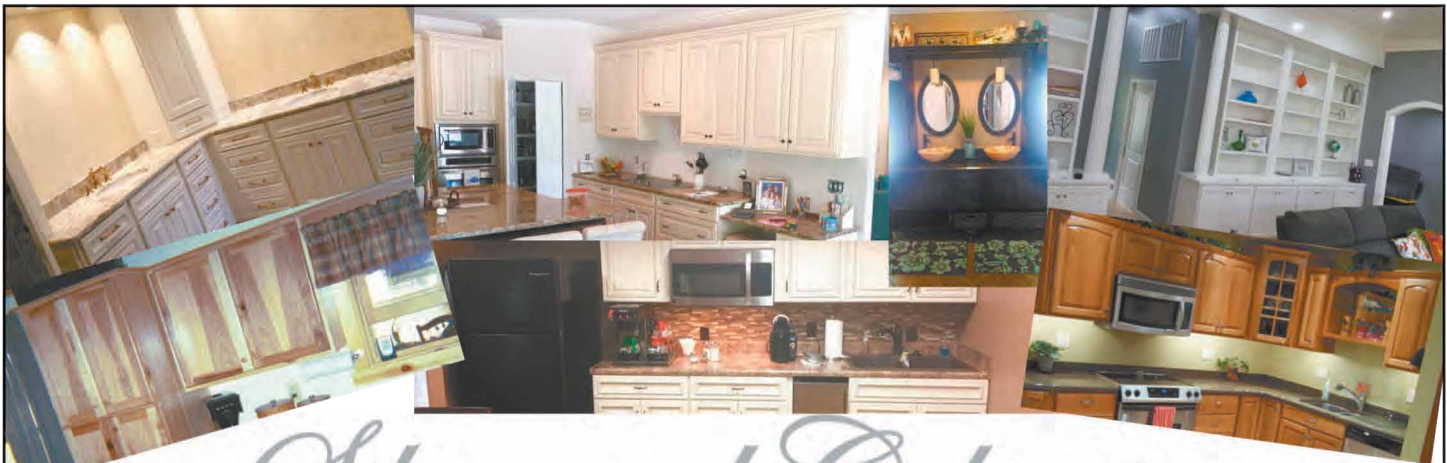
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T·H·E·Y·E·A·R·I·S



Tiger Woods, 16, becomes youngest PGA golfer in 35 years.

"The Silence of the Lambs", Anthony Hopkins & Jodie Foster win at 64th Academy Awards.

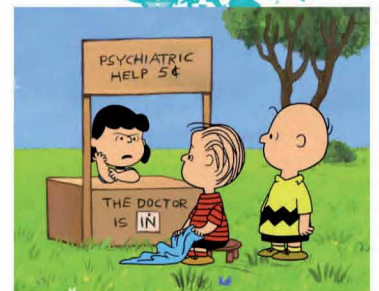


Final episode of "Golden Girls" airs on NBC-TV.



Johnny Carson's final appearance as host of The Tonight Show.

"Batman Returns", starring Michael Keaton as Batman, Danny Devito as the Penguin, and Michelle Pfeiffer as Catwoman, is released.



Lucy in Peanuts comics raises her Psychiatric Help from 5 cents to 47 cents.



Cartoon Cable Network premieres.

"Gilligan's Island" TV pilot filmed in 1964 is 1st shown on TV (TBS).



Democrat Bill Clinton is elected President of the United States.

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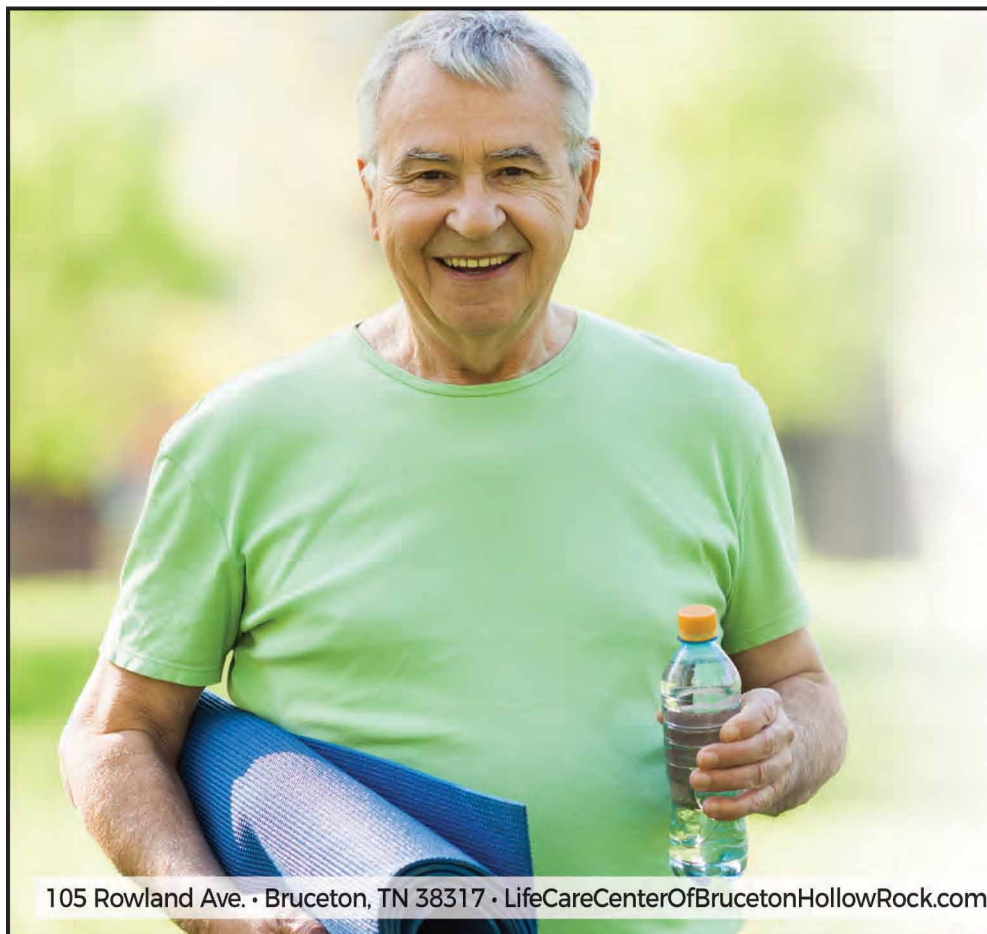
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