



Are you at risk for osteoporosis? Find out at this site, which has diagnosis news, prevention tips, a glossary and related links. www.bonehealthforlife.org.au

Agencies help senior citizens relocate

By KORKY VANN
Special to The Hartford Courant

Faced with moving her aging in-laws from their home of 42 years to a one-bedroom apartment, Peg Guild encountered the difficulties seniors face when relocating. She also found a new career.

"Relocating involves so many decisions that affect not only the people moving but their family members, as well," Guild said. "Dealing with it made me aware of how difficult the transition can be for elderly adults. What to take, what not to take, how to find the services you need was such a challenge. I couldn't imagine how older individuals coped who didn't have family to help."

The experience motivated her

to become one of a new group of specialists called senior move managers — individuals who assist

older adults and their families with the emotional and physical challenges of moving. Some have backgrounds in gerontology, social work, health care or nursing, while others bring organizational skills from a range of other occupations.

The National Association of Senior Move Managers was founded in 2003. The organization, which offers educational sessions at its conferences, now has about 100 members.

While specific services vary, most Senior Move Managers help with developing an overall move plan;

Getting help

Moving Forward of Highland offers senior moving assistance in Oakland County, says owner/manager LouAnne Audette, a registered occupational therapist. Call (248) 889-3559 or visit www.movingfwd.com.

sorting and down-sizing; customizing floor plans at the new location; arranging for the disposal of unwanted items through estate sales, consignment shops and donations; scheduling and overseeing movers; arranging shipments and storage. They can also help select a real estate agent and help prepare the home to be sold.

Guild, who founded her business, Assisted Moving Inc. in Raleigh,

N.C., in 2003, says senior move managers have extensive knowledge of community resources, business, movers and other services and also can help with the actual sorting and packing of treasured possessions and unpacking and setting up the new home.

According to Mayflower Transit, more than 1.5 million Americans older than 65 will move this year; many will be leaving homes where they've lived for decades. Many also are experiencing health issues that can make moving and packing difficult.

"These are not typical moves. As important as what to take and what

PLEASE SEE RELOCATE/E-2

DOCTOR ON CALL



DR. MICHAEL ZIELINSKI

The final hours with loved one are priceless

He was struggling to breathe despite the oxygen. His cheeks were hollow, and he was so thin you could see every rib. He had fought the cancer, but now it was winning. Why couldn't his family see that his time had come? Why did they want to prolong his life when it was obvious he was suffering?

We had our reasons.

You see, a few years ago I wasn't the physician on this case. I was a son. My dad was dying and all of my objectivity was gone. I was no longer a trained professional; I was a "family member." A few hours earlier, I was awakened by a call from my mom.

"He is really having trouble breathing, so I called the ambulance," she said. "They took him to the hospital."

I got up, dressed and met her in the ER. My dad was semiconscious and looked awful. He was wearing the oxygen mask, but it didn't look like it was helping much. The cancer, which had started near his sinus cavity, had spread to his lungs and was suffocating him. I dialed my sister's number in California. I had promised to call her when this moment arrived, so she could get on a plane to come and see him. "It's time" I told her.

I talked with my dad's lung specialist, who was a medical school classmate of mine. He told me there was a large amount of fluid pushing on his lung, causing the shortness of breath. I told him I wanted it drained. He looked at me as if I were joking, knowing how horrible my dad's prognosis was. I told him that I was serious.

I was at the stage where I still couldn't picture my father being gone. I have found that many families go through this same process, especially if the disease occurs suddenly. Some people think the patient's family is being cruel to go through such measures in a situation such as this, yet, I see it as being unrealistically hopeful.

My friend agreed to do the procedure. I still wonder whether he would have done it if I weren't a physician and classmate.

I had to go to work, but when I came in that evening, my dad was sitting up, joking and smiling with my family. I couldn't believe it. My sister had caught a flight and made it to Michigan a few hours earlier. She, along with our relatives,

were swapping stories and having a laugh with him. I will never forget the hours we spent together that evening. It was our chance to say goodbye.

The next day, his condition worsened as the fluid reaccumulated. He became short of breath again and slowly drifted into unconsciousness. We all sat down and agreed to place him into hospice. We weren't unrealistic any more. He died 24 hours later.

I recently had a case similar to my dad's at Waterford Ambulatory Care Center. The patient was obviously terminally ill, yet his family was holding onto any piece of hopeful news. They, too, were unrealistically hopeful.

Some of the staff at our clinic was upset at the family's unrealistic decisions, yet I know what they were feeling. Their husband and father was fine just a few short months ago. How could this be happening? It can't be real.

I did my best to support them, knowing his time was running out. That's the horrible thing about cancer — it doesn't care one bit if you are prepared or not. It just keeps coming. I knew that, in time, the family would face the same facts I did. Then, I hoped, they would find some peace.

I did my best to give him a little more time so his family could say goodbye the right way. I hoped it would be with laughter and love. I know having that chance made all the difference for my family and me.

Dr. Michael Zielinski is medical director of the Waterford Ambulatory Care Center, a division of North Oakland Medical Centers. His biweekly column will address commonly asked questions about health and wellness. Write to him at: The Oakland Press, 48 W. Huron, Pontiac 48342.

The right bite



Oakland Press photos/CHARLIE CORTEZ

Dentist Jeffrey Haddad at the advanced dentistry office Doolan & Haddad in Rochester Hills attaches electrodes to Liz Tafel of Rochester Hills. They will administer stimulus to Tafel's jaw muscles to relax them and treatment for temporomandibular joint dysfunction, known as TMJ.

Oakland dentists use innovative techniques to end TMJ pain

By JENA PASSUT
Of The Oakland Press

Desperate for relief, Carol Rademacher walked into the dentists' office with a bag of ice cubes pressed up to her aching jaw.

"I couldn't talk, couldn't swallow, couldn't eat," Rademacher of Clarkston says. "I couldn't put my finger to my nose. I was really in a bad way."

Rademacher had what is commonly called TMJ — temporomandibular joint

dysfunction, which is pain in the jaw and associated muscles. More than 10 million Americans suffer from TMJ pain, according to the National Institute of Dental and Craniofacial Research, part of the National Institutes of Health.

Rademacher says she had been to four different dentists, all with their own ideas about treatment. She was slathering her face with analgesic cream and popping Aleve and Advil like bits of candy, too.

"It was just not working for me," she says.

Her daughter found Dr. Jeffrey Haddad on the Internet and, in desperation, Rademacher decided to go see him.

Haddad and his partner, Dr. Kurt Doolan, are restorative dentists who now consider themselves neuromuscular dentists as well. Neuromuscular dentistry considers the teeth, muscles and joints when finding a patient's correct bite and treating TMJ pain.

PLEASE SEE BITE/E-2

To know more

Contact Doolan Haddad Advanced Dentistry, 433 W. University Dr., Rochester, at (248) 656-2020.

Dentist Kurt Doolan (center) and Haddad set up Tafel with headgear to relax her muscles with electrical impulses.



TMJ symptoms

- Inability to open the mouth comfortably
- Clicking, popping or grating sounds in the jaw joint
- Locking of the jaw when attempting to open the mouth
- Headaches
- A bite that feels uncomfortable or "off"
- Neck, shoulder and back pain
- Swelling on the side of the face

— THE TMJ ASSOCIATION
(www.tmj.org)

COMING FRIDAY:

Vince Vaughn and Jennifer Aniston are in and out of love in "The Break-Up."



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FROM PAGE ONE

Obsessed woman is not in love — she's mentally ill

Dear Abby,
I recently got a phone call from a woman I hadn't heard from in 30 years. "Vivian" and I once had a short fling. We had a long talk, catching up, and she said she had gotten my number from my sister, who lives out of state. I was surprised not only to hear from Vivian, but also that she lives only 25 miles away. She mentioned that when she moved south 19 years ago, she worked in a law enforcement office. When I spoke with my sister, she said that when Vivian contacted her, Vivian told her she had always loved me and was going to marry me. All of a sudden, I began getting letters from her — but I never gave her my address. In every letter she would pour her heart out to me, but never included her return address. She would call me, sometimes three times a day. I didn't answer because she was coming on too strong. Every message Vivian left was full of emotion, sometimes sobbing, telling me how much she loves me and wants to be with me. A few nights ago, she showed up at my door, demanding to know why I was "avoiding her." I didn't invite her in. We sat on my front porch, and I

had a long talk with her. I explained that a lot has changed in both our lives; I had come out as gay and was just out of a 10-year relationship. I said I was feeling depressed and confused, and didn't want to get into a relationship with anyone — male or female — at this time. My being gay didn't faze her. She seemed to think she could change me instantly. As our conversation progressed, she admitted that she had gone back to the law enforcement office and some of the old employees had done a search on me. They told her where I was living and gave her directions on how to get to my home, information on how many vehicles I own and the license numbers, and who knows what else. I feel violated. I feel Vivian has crossed a very fine line. I feel I'm being stalked, and it's giving me nightmares. Was what she did legal, and how should I handle this?
— Violated in the South
Dear Violated,
It should be apparent by now that your old "fling" has mental problems. Her behavior could, indeed, be considered stalking. If you still have the letters and recordings of her messages, give them to your legal counsel with the explanation



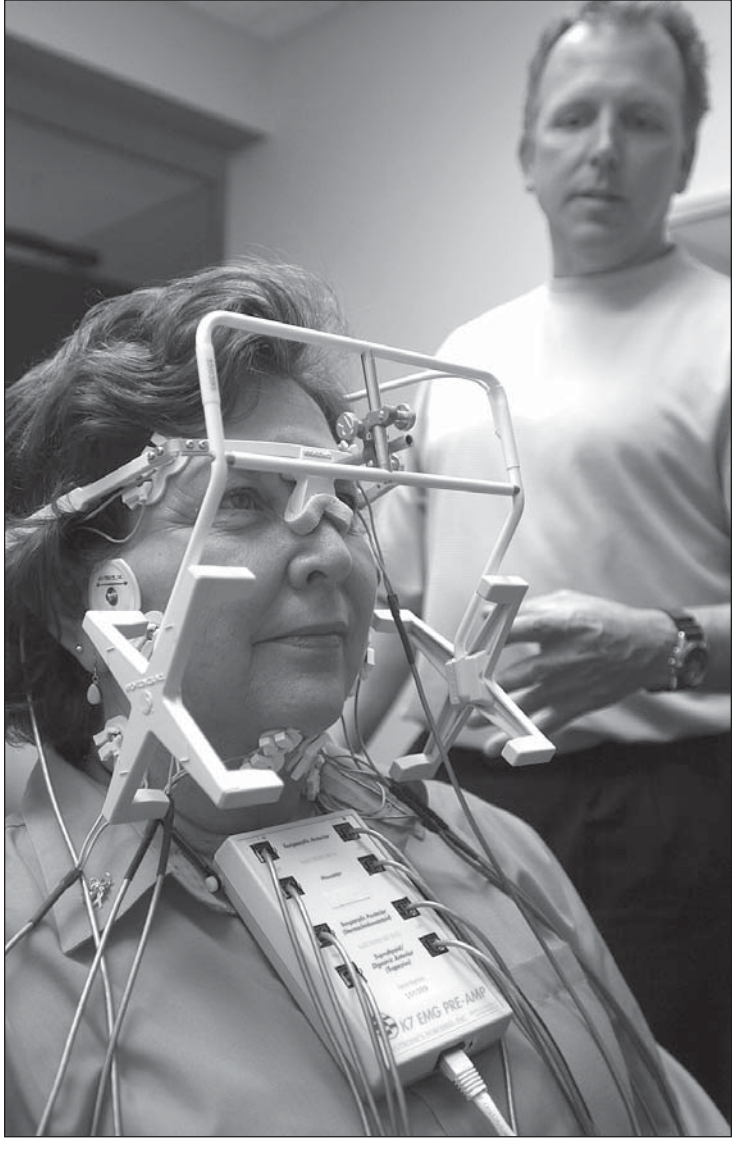
DEAR ABBY

that she located you through information given to her by a law enforcement agency where she used to work. The law enforcement agency that got you into this mess should get you out of it. You should document every incident of harassment, and while you're at it, consult your physician about the nightmares and stress you've been subjected to. Your attorney should have all of this information at his or her disposal.
Dear Abby,
I'm writing to resolve something between me and my boyfriend. I bought him three yellow roses, and he was insulted! He says yellow roses mean only friendship. My grandmother says three roses mean love. I think any rose says I love you. Is red the only color rose that means I love you?
— Hurt in Louisiana
Dear Hurt,
Although traditionally red roses symbolize love and yellow roses symbolize friendship, my mother's favorite color of rose is yellow, and that is what she receives from my father on every special occasion. Your boyfriend's reaction was extremely ungracious. He should have thanked you for the roses in the spirit in which they were given. Please give him a message for me: When someone reacts that way to a gift, it reduces his chances of getting any more.
Write to Abby, P.O. Box 69440, Los Angeles, CA 90069.

BITE

FROM PAGE E-1

Rochester Hills dentists use muscle stimulation, orthotics to end TMJ pain



The Oakland Press/CHARLIE CORTEZ

In their Rochester office, Haddad and Doolan use a TENS (transcutaneous electrical nerve stimulation) machine on their patients. The machine sends low-level electrical impulses through the jaw and releases lactic acid buildup from muscles overused in the wrong positions. Computer equipment called the Myotronics K7 then documents the patient's bite in both the relaxed and tensed positions. From there, the dentists have an orthotic device built of a hard acrylic that a patient wears at all times, cutting down on pain that comes from a misaligned bite. The dentists say they see about six people a month with TMJ pain and use this treatment — the first in Oakland County, they say, to do so. "Our patient may not know (that) how they feel has anything to do with their teeth or their bites," Doolan says. "We're all about changing the bite to support the muscle and jaw function."
"People go through life thinking headaches are normal," Haddad adds. "With this, the causes reveal themselves."
Liz Tafel from Rochester Hills began her treatment last June. "I had no idea my pain was connected with my teeth," Tafel says. "I just knew I had a bad bite. I was keeping a bottle of Advil in my desk and taking one or two every three or four hours," she says, adding her co-worker came to her, concerned she was taking too much medicine. "Why don't you see a doctor?" her friend urged. Tafel decided to try the treatment. It wasn't cheap, at about \$3,000 out of her own pocket, but she was tired of feeling sick. "I went from dentist to dentist and all they did was put Band-Aids on the problem," she says. "I was very slow to be convinced." Tafel was hooked to the TENS and K7 machines to find her ideal bite. "We get their muscles all relaxed," Haddad explains.

Dentist Kurt Doolin of the Doolin & Haddad dentistry office in Rochester Hills attaches headgear with electrodes to the jaw of patient Liz Tafel of Rochester Hills. The electrodes will relax her jaw muscles.

"The TENS gets blood going to the muscles, takes the teeth out of play, if you will." "TENSing is like getting a massage after a workout," Doolan adds. It takes about 45 minutes to run the computerized scans. Normally, after that, the patients is fitted for the orthotic to correct any imbalance in the mouth. The treatment happens over a three- or four-month period and includes several adjustments. The patients usually wear the orthotic for several months. Most patients take the treatment further, getting a more permanent orthotic or orthodontic work or undergoing a full mouth reconstruction. The dentists want to make sure the bite is near perfect before doing the latter, however. "We don't want to build a set of Hollywood teeth with these bad bites," Doolan says. Tafel, who slips her orthotic out of her mouth to show it

off, says she can tell the difference when it's not in. The shiny acrylic piece took some getting used to, but she says she hardly notices it now. "I took it out once because it's hard to eat with," Tafel recalls. "By the time I got home my jaw was cracking again." Now, because her jaw is better aligned, Tafel says she is virtually pain free. "I don't wake up with a headache every morning clenching and grinding," she says. Rademacher, too, was amazed at how well the acrylic piece keeps her from a painful bite. Both women are considering the next step of a full mouth restoration. Rademacher was pleased by her experience with Haddad. "He worked with me until we got it properly fit," she says. "They're very efficient, very patient. They want to do a good job. They want to help you. I have no pain now. It's a real success story."

Single child need not be spoiled brat

Dear Dr. Brothers,
We are in our early 50s. We had our child late in life, and were so happy that we lavished everything on him that he asked for. Now he is 10 years old, and I am afraid he might be a spoiled brat. I find he's out of control most of the time, especially when we say "no" in a firm way, and we wonder if it is too late to turn things around. We blame ourselves. Please give us some good advice.
— D.P.
Dear D.P.,
Let's dispel one myth right off the bat: Only children don't have to be spoiled because they have no siblings and are the sole focus of their parents' attention. And, for that matter, older parents have no more reason to spoil than do young or average-age parents. So, let's see if we can remove those two factors, then deal with the elements of your

behavior and your child's that are making things unpleasant and hinder you in raising a good-natured young person with the right values. At 10, your son has pretty much got your number if you've spent his lifetime giving in to his whims in a misguided attempt to make him happy or keep him quiet. I can sympathize with a parent's desire to be a giver — that's a good thing. You just need to channel it into more appropriate outlets, such as giving your child a sense of self-respect, an ability to postpone gratification and a knack for seeing the beauty in giving to others — especially those who are less fortunate. There's only one way to overcome your fear of rejection and loss of love — which is why you haven't been able to say "no." Start doing it, and say "yes" to the character-building activities you want to encourage. Just bite the bullet and start now.
— P.K.



DR. JOYCE BROTHERS

Your son has pretty much got your number if you've spent his lifetime giving in to his whims in a misguided attempt to make him happy or keep him quiet.

Dear Dr. Brothers,
I have two teenagers who have totally different attitudes about what to do this summer. They are both in high school, a year apart. One wants to be a worker bee and toil away all summer (again). That way, he will have plenty of money to spend in college next year after his tuition and fees are taken care of. His younger brother wants to do just the opposite — spend as much time as possible on a summer travel-adventure program. I don't know whether to be a taskmaster or a softie — encourage the worker to take time off, or make the traveler earn some money. But I want to be fair to both.
— P.K.

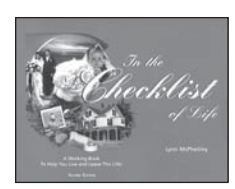
RELOCATE

FROM PAGE E-1

Senior citizens can turn to agencies that help them settle in new area
not to take are the stories that accompany each object," says Guild, who is now the president of NASMM. "Sometimes, being able to tell the story allows folks to let things go." Senior move specialists also work with families faced with the daunting and often heart-breaking task of readying the family home for sale after parents have died. Lynn McPhelimy — author of "In the Checklist of Life: A Working Book to Help You Live & Leave Life" (AAIP Publishing, \$19.95) and owner of Moving & More, a business in Middlefield, Conn.,

that provides moving services to older adults and their relatives — says that deciding what to keep and what not to keep can be a painful process for grieving loved ones. "I advise families to try to find that balance between economic reality and emotions," McPhelimy says. "Give yourself the time to visit the home, touch, feel and see the things that were so important. Don't make quick decisions. Once something is gone, it's gone, and regrets can run very deep. And don't ignore the small things. They can end up being the most important. You do a tag sale and let that potato

masher go and you end up with a quarter and a broken heart." Before contracting for the services of a senior move manager, NASMM suggests, ask how long the company has been providing senior move services, if they are fully insured for liability and workers' compensation, if they will provide a written contract and if they can provide references. Senior move specialists often advertise in publications geared toward older adults or on postings at senior centers. To find a member of the National Association of Senior Move Managers, visit www.nasmm.com on the Web.



"In the Checklist of Life: A Working Book to Help You Live & Leave Life," by Lynn McPhelimy, Aaip Publishing Co., 138 pages, \$19.95.

BRIDGE

Canned Worms

By FRANK STEWART Tribune Media Services

When you open a can of worms, the only way to put them back in is to use a bigger can — and sometimes even that doesn't work. South drew trumps and wondered which of his suits with a K-Q-10 holding to attack. He flipped a mental coin and led a diamond from his hand to dummy's king. East took the ace and led the nine of spades, and West let South's king win to keep a link. South then led a trump to dummy and returned a club. East rose with the ace and led another spade, and West took two spades.
EARLY TRICK
South opened a can of worms — and couldn't recover — by starting the diamonds. It was right to lead a K-Q-10 suit with a doubleton in the opposite hand, but South didn't want East to win an early diamond trick and lead a spade through the South hand. So South must start by leading clubs — THROUGH EAST.
If South's king wins, he gets back with a trump to lead another club. When East takes the ace, South can pitch a spade from dummy on the queen of clubs to assure the game.

you say?
ANSWER: Bid 3NT, promising a balanced hand slightly too strong to open 1NT. This hand, with a good five-card suit and two tens, was too promising for a 1NT opening. (Even if the queen of clubs were a low club, some players couldn't abide 1NT. Of course, they would open one heart on the five-card major.)
South dealer
Both sides vulnerable

NORTH		EAST
♠ 5 3 2		♠ 9 8 7 4
♦ Q 10 9 6 4		♦ 8
♥ K Q 10		♥ A J 8 4
♣ 5 3		♣ A J 8 4
WEST		SOUTH
♠ A J 6		♠ A K Q 10
♦ 3 2		♦ A K J 7 5
♥ 9 7 6 2		♥ 5 3
♣ 9 7 6 2		♣ K Q 10

South 1: Pass
West 2: All Pass
North 3: Pass
East 4: Pass

DAILY QUESTION
You hold: ♠ K Q 10 ♣ A K J 7 5 5 3 ♣ K Q 10. You open one heart, and your partner bids two diamonds. The opponents pass. What do

Opening lead — 2
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Stay safe while out walking

By MELISSA DAHL Of The Sacramento Bee
Whether you're an avid walker or your shoes hit the pavement only on the way to your car, keeping personal safety in mind is important, especially if you're walking alone. Even on a route you know by heart, stay aware of your surroundings and don't switch to autopilot. Experts also suggest avoiding distractions such as cell phones and MP3 players. Combining a confident attitude with common sense is the best way to stay safe, so the next time you're out, remember these do's and don'ts.

- Do:**
- Walk with a dog. You're less likely to be targeted if you're walking with a dog, even a small one.
 - Carry a walking stick.
 - Stay on the side of the street closest to oncoming traffic, keeping away from bushes or other places an attacker could hide and increasing the chance of a driver seeing if you are attacked.
 - Walk with a buddy.
 - Carry a second wallet, containing just a few one-dollar bills, to give to an attacker if you're mugged.
 - Head to the closest residence or business and ask for help if you think someone is following you.
 - Call "Fire!" instead of "Help!" if you are attacked. It draws attention more quickly.
- Don't:**
- Wear headphones, which can give the impression that

- you're not paying attention and are easier to attack.
- Walk in unlighted areas.
 - Walk alone on paths lined with bushes or trees, since they can provide more places for an assailant to hide.
 - Get too close to someone asking for directions or the time of day.
- Sources: Wendy Bumgardner, guide to walking for About.com; Robert Siciliano, CEO of StreetSafeSecurity.com; Pamela Granata, publisher of Walk About magazine.
- Skinny Dippers!**
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