

Kaw Valley **Senior Monthly** **FREE!**

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Serving Active Seniors in the Lawrence-Topeka Area since 2001

Vol. 9, No. 6

INSIDE



Achieving an ideal stew takes time, something most of us lack in the busy rush of our lives. Wolfgang Puck's answer is that anyone can make stew quickly and easily—if they have a pressure cooker. He shares a recipe for Moroccan Lamb Stew that includes a cup of dry red wine. - page 26



Tortola, the capital of the British Virgin Islands, is all about enjoying the Caribbean Sea. The island is popular as a base for chartering sailboats, and is renowned for its scuba-diving reefs. - page 24

COURTESY PHOTO



Nedra Rogers at a recent poetry reading

'Late bloomer' becomes awarding-winning poet

By Billie David

Local poet Nedra Rogers may have been a bit late starting her writing career, but in her case the old saying, "Better late than never," holds true.

Rogers was recently honored by Woodley Press when her collection of poetry was selected for publica-

tion in 2009.

"I was a late bloomer. I started writing poetry in 1997," the 62-year-old writer said.

Rogers' interest in poetry actually began years earlier, however, when in high school she was introduced to the poetry of Emily Dickinson and Edna St. Vincent Millay.

"They were female writers, and we were rarely exposed to female writers back then," Rogers said. "I could really identify with Dickinson. I thought, 'Oh, that's how I feel!'"

And that's what she wants her poems to do for her readers: to communicate common feelings.

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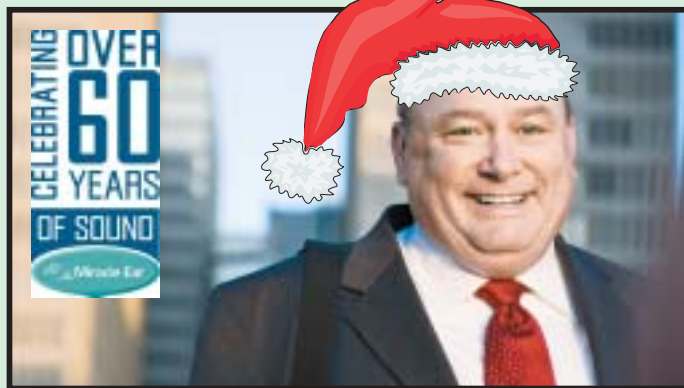
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Rogers

■ CONTINUED FROM PAGE ONE

"The highest compliment anybody can pay me is to tell me, 'Oh, that's exactly how I feel,'" she said.

Rogers first experimented with poetry back in 1965. She was attending Fort Hays State at the time, and she used to walk down to the river to write.

"But I didn't really pursue it until my children were out of the nest," she said. "Motherhood takes time and energy."

Rogers was born in 1947 in Hays, Kansas. Her father, back from World War II, was attending college there on the GI bill, studying to become a teacher, and her mother was participating in the baby boom phenomenon. During her childhood her father taught in various towns in western Kansas, but the family lived the longest time in Bison, a small town near Great Bend.

After her first year at Fort Hays, Rogers lived on both the Atlantic and Pacific coasts, eventually returning to Kansas where she earned her bachelor of science degree in education from Emporia State in 1979. Rogers has worked in the field of education for 25 years as a teacher, a para, and a substitute teacher. She also raised five children: three boys who all live in California and two girls who live in Kansas.

It was when her oldest daughter moved to Lawrence to enroll in the University of Kansas that Rogers decided to move here as well. She was ready for a change, she said, and had fond memories from the time she spent in Lawrence back in the 1960s. In addition, several other members of her family lived here.

"I love the diversity of Lawrence, and it is just the right size, and downtown is lively," she said of her decision to move here.

But even though her children were grown, Rogers still found it a challenge carving out the time she wanted to devote to her writing, so she decided to become a full-time student, working on her master of fine arts degree at KU.

"I needed time to write, and I couldn't write as much as I wanted and work at the same time, and I also wanted to attend writing workshops," she said.

But things didn't go exactly as planned. In December of 2006, in the middle of her second year of college, her mother was diagnosed with cancer. Rogers set aside her writing time to help her mother as she dealt with the effects of chemotherapy.

Then in the summer of 2007 her boyfriend, local musician Joe Parish, died unexpectedly, and her mother died shortly afterward.

"All of that grieving process, it has been difficult for the last few years," she said. I am just beginning to feel like writing again."

Her nine grandchildren have helped in the healing process. One of her favorite activities is spending time outdoors with them.

Her new book, *Soul's Night Out*, is dedicated to Joe Parish and her

parents. The book is divided into three sections, and the third section, called "I Buy the Dress," is about love, loss and grieving.

The first section, entitled "Not Me," has poems about social and personal issues, including war, 9/11, ecology, slavery and aging. The second section, "Midway between New York and San Francisco," contains poems of place, mostly poems about Kansas and Lawrence.

In addition to her new book, Rog-

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Rogers

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ers has earned numerous awards. Her writing was selected by Robert Atwan for mention as a notable essay in *The Best American Essays, 2008*. She was a recipient of the 2004 Langston Hughes Creative Writing Award sponsored by the Lawrence Arts Center and Raven Bookstore. She won Salina's New Voice Award

and received two fellowship grants from the Kansas Arts Commission in 2005 and 2008. During her three years as a student at KU, she was awarded first place twice and second place once for the Vic Contoski Creative Writing Award.

Rogers was recently honored at a reception at the Lawrence Arts Center and will be giving readings at the Lawrence Public Library and Raven Bookstore this winter. Inquiries about her book can be sent to her e-mail address, nedrarogers@hotmail.com.

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Advice for would-be poets

By Billie David

For other seniors who may be wanting to give writing a try, local poet Nedra Rogers has some advice.

"My first advice is read, read, read," said Rogers, who began writing in earnest in her early fifties. "I went to the city library, and I went down the poetry aisle—the 811 section—and looked at books and found some I liked. You read other people's work, and it gives you inspiration and ideas. Plus it's fun."

Rogers also jump-started her writing career by taking classes at the Lawrence Arts Center, participating in three workshops they offered.

"Go to the Arts Center," she said. "It doesn't take much

money and they have excellent workshops. From there, I took university classes."

She also believes it is important to find a favorite place to write. For her, that place is a sunny window at a coffee shop.

"Find a place you like and a regular time when you can write, even if it's an hour here and an hour there. My book is an accumulation of 10 years of writing," she said.

And never say that you are too old.

"People who are older have the advantage of their life experiences that they can reflect on," she said. "Even loss can teach you."

Below is one of Roger's poems in which she draws from her own past experience.

Maria's List

By Nedra Rogers

My daughter, Maria, quit the university.
She's 19 and wants to learn
What love is, says she doesn't want
to wake at 50 alone and with regrets.
She's got a job downtown now serving
bagels, mocha, hot tortilla soup.

At 19, I quit school too, wandered
to New York in search of love, but found out
what a bagel was instead and sold them
in the Village. Maria made two lists.
The first: *What love is not*. It's long and drags
behind her like a wrecked bridal train.

Maria, we had love so hot it scorched
a generation. Love Ins on every corner.
It was what you made back then
instead of war. It was all you need and free.
Easy coming, easy going, love ins, love outs
and babies named Sunflower, Dylan, Rain.

Maria might be in love. She's not sure,
but she's relentless in getting to the bottom of it.
She questions everyone—wise men, fools.
They offer the wisdom of regret.
Follow your heart, the coward says in hindsight.
Don't, warns the romantic.

If she asked me, I could tell her that regrets
are not as bad as they're made out to be,
that they come only one at a time
like labor pains with nice breaks in between.
Over the years there are so many, like cracks
in a sidewalk. Who counts them?

Medicare open enrollment: Now is the time to review your plan

You may know that new Medicare prescription drug and health plan choices are offered each year. Medicare's Open Enrollment Period runs from November 15 to December 31. Open Enrollment is your chance to review your current plan—including your Original Medicare coverage—compare it with your other options, and make sure you're getting the best available coverage for your health care needs. Your current health plan may have changed its cost or coverage for 2010, or maybe you'd like a plan with a lower deductible.

If you've had any changes in your health, it's particularly important for you to double-check your coverage during Open Enrollment, so you can make sure that any new treatments or drugs are covered by your plan.

Since coverage varies by plan, know what's important for you. For example, make a list of the drugs you take so you can make sure they're covered by the plans you're considering. If you are in Original Medicare and don't have prescription drug coverage, you can join a Medicare drug plan during Open Enrollment.

Medicare has several ways to get you the help you need to find a plan that works for you.

- Visit the www.medicare.gov, where you can get a personalized comparison of the costs and coverage of the plans available in your area.

- Call 1-800-MEDICARE (1-800-633-4227) to find out more about your coverage options. TTY users should call 1-877-486-2048. Medicare customer service representatives

are available 24-hours a day/7 days a week with multiple language options and resources for people with disabilities.

- Watch your mailbox for the 2010 Medicare & You handbook. The handbook is mailed to all Medicare households each fall and includes a listing of all plans in your area. This handbook is also conveniently available online at www.medicare.gov.

- Meet one-on-one with a trained expert for personalized assistance. Call 1-800-MEDICARE or visit www.medicare.gov to find a Medicare specialist in your area. Select "Find Helpful Phone Numbers and Web sites."

Important Medicare Enrollment Dates:

- **Nov. 15:** Open Enrollment begins. If you want to join or switch your

plan, do it as soon as possible to avoid any problems at the pharmacy in January.

Dec. 31: Open Enrollment ends. Last day to join or change your Medicare drug plan.

Jan. 1: Your new plan coverage begins.

This message is brought to you by the U.S. Department of Health & Human Services.

Ask Donna How the Health Center at Brandon Woods is Simply the Right Choice



Donna Bell
Community Outreach
Director

When you hear the term "health center," you typically don't think of restaurant-style dining and spa bathing. But the Health Center at Brandon Woods is far from typical. The following are answers to some frequently asked questions about our health center.

"What makes the Health Center at Brandon Woods one of the area's best choices for health services?"

The Health Center at Brandon Woods offers everything from recuperative care to skilled nursing services. The Health Center also includes The Arbor, a specialized memory care neighborhood for individuals with Alzheimer's and other memory impairments. You can feel confident knowing that our professionally trained nurses and therapists are always providing compassionate support. We emphasize each resident's personal potential through engaging activities, companionship and support. It's a perfect combination of providing the best care while achieving the highest level of independence. With our solid reputation spanning two decades, we're simply the right choice.

"What services are available in the Health Center at Brandon Woods?"

Our services were designed to build a firm foundation for quality health services set to your schedule including:

- Skilled nursing services
- On-site physical, occupational and speech therapy focused on rehabilitation and recovery
- Restaurant-style dining service
- Bathing assistance available in a relaxing, comfortable and caring spa environment
- Scheduled transportation for events, social programs and appointments
- Comprehensive social and wellness programs

"What is Brandon Woods' philosophy of resident-empowered services?"

Our resident-empowered philosophy is about providing residents with a choice-driven life. We encourage individuals to make their own lifestyle decisions. It begins the day you move in when you complete a lifestyle profile form. This information is used to build health services set to your schedule. You rise, rest, bathe and eat when you desire.

As a testament of our philosophy of resident-empowered services, our Health Center was recognized by the Kansas Department on Aging in 2008 as an award winner in the initiative entitled "Promoting Excellent Alternatives in Kansas Nursing Homes" (PEAK). Brandon Woods was one of only 11 communities in the state of Kansas to earn this prestigious award.

"How can I get more information about the Health Center at Brandon Woods?"

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Coping with the holidays after the loss of a loved one

By Nadine Friesen

QUESTION: How can I get through this holiday season after the death of my loved one?

ANSWER: The journey of grief finds some of its greatest challenges during times of celebration and gatherings of family and friends—or when one is alone. There is no way to ignore the fact that someone you loved dearly is no longer physically present. While others around you may be experiencing joy and happiness, you may sense sadness and

heaviness. While others may seem to have energy and excitement about holiday preparations and celebrations, you may feel tired and have little interest in all that can be part of this season. You are encouraged to remember the challenging and exhausting process that grief can be. Your life has undergone major changes in the past year. Your heart needs patience and gentleness to heal as you re-discover your identity and incorporate the death into your life. Here are a few suggestions as you anticipate your first holiday sea-

son without your loved one:

- Communicate your feelings with those closest to you.
- Give yourself the freedom to say yes or no to traditions and events as you feel able to participate in ways that are meaningful to you.
- Get enough rest.
- Plan for ways to specifically remember and honor your loved one. Place their picture among your decorations, buy an ornament or donate a gift in their memory. Invite family and friends to reminisce about him or her.

• Attend a holiday gathering at hospice or your church with others who have also experienced a loss.

• Don't assume that the holiday season will only be filled with challenges. The holiday season can be a special reminder of the gift of hope—even as this time of year may be filled with extra sadness. Peace, joy and hope may pleasantly surprise you in ways you don't expect.

- Nadine Friesen is a bereavement coordinator with Hospice Care of Kansas and is a presenter for "Caring for the Caregiver" conferences around the state.



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St. Francis physician receives national award

A national organization has recognized James J. Hamilton Jr., MD, FACS, a St. Francis physician, for his work in cancer care in 2008 by awarding him the State Chair Outstanding Performance Award in October, becoming just one of three physicians to receive the honor nationwide.

The Commission on Cancer, an affiliate of the American College of Surgeons, gives the honor, which recognizes individuals who provide extensive leadership and support to their physician volunteers and cancer programs in the state. They are collaborators, innovators, and experts working with cancer programs, professionals and state coalitions to improve the quality of cancer care.

The award is bestowed on individuals who exhibit excellence in the following areas:

- Consistent and innovative communication methods used for maintaining relationships with the cancer liaison physicians
- Support and initiation of Commission on Cancer activities at the state and regional Level
- Collaboration with American College of Surgeons Chapter, Ameri-

can Cancer Society and Comprehensive Cancer Control Coalitions

Established by the American College of Surgeons in 1922, the Commission on Cancer is a national consortium of professional organizations dedicated to improving survival and quality of life for cancer patients through standard-setting, prevention, research, education and the monitoring of comprehensive quality care. Its members include 96 individuals who are either surgeons representing the American College of Surgeons or representatives from 46 national, professional organizations or Commission member organizations. These individuals direct the activities of the Commission through committee work.

Hamilton is chairman of the St. Francis Comprehensive Cancer Committee. He is board certified in general surgery and is a Fellow of the American College of Surgeons. He is employed at Tallgrass General, Vascular, Thoracic and Bariatric Surgery. He received his medical degree from the University of Kansas School of Medicine and completed his surgical residency at Harvard Medical School.



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Obamacare: Totalitarianism as a moral guise?

By Kevin Groenhagen

I saw your conviction that the time is now and witnessed your unwavering commitment and understanding that health care is a decisive issue for our future prosperity. But you have also reminded all of us that it concerns more than material things; that what we face is above all a moral issue; that at stake are not just the details of policy, but fundamental principles of social justice and the character of our country. - Senator Ted Kennedy in a letter to President Barack Obama, May 12, 2009

The growing technological possibilities of control, together with the presumed moral superiority of a society whose members serve the same hierarchy of ends, have made this totalitarian trend appear a moral guise. It is indeed the concept of "social justice" which has been the Trojan Horse through which totalitarianism has entered. - Friedrich A. Hayek, *Law, Legislation and Liberty: The Mirage of Social Justice* (1976)

President Barack Obama and the Democrats hope to "reform" our health-care system, which accounts for one-sixth of our economy. Given

their rush to pass legislation, one would think the American people see an urgent need for the changes they wish to enact. However, a CNN/Opinion Research Corp. survey released last March found that more than eight in 10 Americans are satisfied with the quality of health care they receive. This probably explains why most recent polls have found that either a majority or plurality of Americans oppose major changes in the country's health-care system. In fact, "Obamacare" is less popular today than "Hillarycare" was in 1993. According to the Pew Research Center for the People & the Press, "In early 1993 the sense of a health care crisis was far more widespread than it is today—a 55% majority in 1993 said they felt the health care system needed to be 'completely rebuilt' compared with 41% today." Further, "Health care costs were also a broader problem in 1993—63% of Americans said paying for the cost of a major illness was a 'major problem' for them, compared with 48% currently."

More and more Americans also reject the federal government's role in health care. A Gallup poll last

month found that 50% of Americans believe "it is not the federal government's responsibility to make sure all Americans have health-care coverage." That's up from 31% in 2001.

Of course, the federal government, through Medicare, already has a role in health care, and many liberals want to see "Medicare for all." But would it be wise to point to Medicare as a precedent? "Government

by precedent, without any regard to the principle of the precedent, is one of the vilest systems that can be set up," Thomas Paine wrote in *Rights of Man*. "In numerous instances, the precedent ought to operate as a warning, and not as an example, and requires to be shunned instead of imitated." Indeed, the precedent of Medicare does offer warnings. For example, according to a Senate

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Obamacare

■ CONTINUED FROM PAGE EIGHT

Joint Economic Committee study released in July, "In 1967, the House Ways and Means Committee predicted that the new Medicare program, launched the previous year, would cost about \$12 billion in 1990. Actual Medicare spending in 1990 was \$110 billion—off by nearly a factor of 10."

President Obama has claimed that Obamacare would cost about \$900 billion over 10 years. But how much faith can we have in his projections? After all, his administration told us if Congress passed his \$787 billion "stimulus" package the unemployment rate would not rise above 8%. However, it rose to 10.2% in October, which is higher than the 9% unemployment rate White House economists projected we would see *without* the stimulus package. Obamacare is likely to cost far more than the projected \$900 billion.

Jeffrey S. Flier, dean of the Harvard Medical School, in the November 17 issue of the *Wall Street Journal*, noted that, while our health-care system does need to be reformed, Obamacare would not "tackle the problems of cost, access and quality." "In discussions with dozens of health-care leaders and economists, I find near unanimity of opinion that, whatever its shape, the final legislation that will emerge from Congress will markedly accelerate national health-care spending rather than restrain it," Flier wrote. "Likewise, nearly all agree that the legislation would do little or nothing to improve quality or change health-care's dysfunctional delivery system."

Instead of enacting reforms that most Americans do not want and would likely cost more than the current system, members of Congress should look at those who are uninsured in this country and craft legislation directed at them. According to the Census Bureau in 2006, there were 46.6 million people without health insurance in this country. The uninsured included the following:

- 18 million between the ages of 18 and 34, most of whom were in good health.
- 17 million who lived in households with incomes exceeding \$50,000 a year and could, presumably, purchase their own health-care insurance.
- About 9.5 million who were not U.S. citizens.

In addition, Census Bureau officials acknowledge that the number of uninsured is inflated because the Bureau reports as "uninsured" adults

and children who are eligible for Medicaid and the State Children's Health Insurance Program (CHIP), but are not enrolled in those programs. No one eligible for Medicaid can be accurately described as uninsured since those eligible for Medicaid, but not enrolled, are automatically enrolled into the Medicaid plan when they enter the health-care system through a hospital or clinic.

When we consider the figures above, it is clear that the number of truly uninsured is far, far less than 47 million. Instead of costly, unwanted and radical "reforms" to the health-care system, it would be much wiser to focus on the several million who are truly uninsured. Obama and the Democrats should leave the majority of Americans, who are satisfied with the quality of their health care and do not believe it's the federal government's responsibility to make sure all Americans have health-care coverage, alone. Unfortunately, the

Democrats appear ready to act in accordance with the only principle

that is absolute for them: "I—and my peers—know best."



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Good news, bad news on likelihood of becoming disabled

Americans are slightly less likely to suffer a long-term disability than they were a few decades ago, yet those who do will be disabled for a much longer period of time. A new study by Milliman for the Life and Health Insurance Foundation for Education (LIFE) puts the probability that a worker between the ages of 25 to 65 will suffer an accident or disability that keeps them out of the



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Jones

job for at least 90 days at 27 percent for men and 34 percent for women.

Unfortunately, there is plenty of evidence that nearly all workers vastly underestimate their chances of becoming disabled. Based on answers to recent Harris survey, one reason people don't tend to think about their chances of becoming disabled is the mistaken notion that injuries cause most disabilities. When, in fact, the most common causes of disability are diseases such as cancer, heart disease and diabetes.²

The financial havoc such an event can cause with your everyday life, makes disability income insurance one of the most important coverages you can buy. Considering the recent financial turmoil in the economy, now would be a good time to review just what funds you would have available to meet your financial obligations if your income stops and your life goes on.

How does a disability policy work for you when you need it? Policies vary, but here are some things you should be aware of when looking at options.

Protection of income in your own occupation – Look for a disability income insurance policy that pays if you lose the ability to perform the duties of your occupation, regardless of your ability to work at some other job. Some policies pay benefits only if you are totally disabled and cannot work at all.

Partial Disability – Partial disability protection allows you to collect benefits if only partially impaired, or to return to work part-time and still collect benefits. Working part-time or to the extent of your abilities is often important to one's recovery.

Transition Benefits – Another smart option is transition benefits that help cover your financial loss even though you're no longer disabled. Assume you are self-employed and suffer a heart attack. Eight months later, you return to work, but your income is down 30 percent because some customers needed to go elsewhere. Under a policy that pays a proportionate benefit, you'll receive 30 percent of your benefit.

Inflation Protection – Inflation protection increases your monthly benefits before and during disability, as the cost of living rises. You might also consider insurability pro-

tection which allows you to increase your coverage regardless of changes in your health, occupation or activities.

The most comprehensive policies are non-cancelable and guaranteed renewable. This means the insurance company can't refuse to renew your policy if your health fails, and it can't raise your premium until age 65.

Once you've decided which type of disability income insurance policy you need, consider two factors that can significantly affect cost:

Beginning date – This is the length of time, or delay period, you're willing to wait until benefit payments begin. If you can live off your savings for three or four months, you can significantly reduce the cost of your disability policy.

Maximum benefit period – This refers to how long you will receive benefits. Policies may pay benefits for one, two or five years, until you reach age 65, or you may extend the benefit period to age 70. Obviously, the longer the benefit period, the greater the cost of the policy.

Group Policies Offer Limited Protection

Because disability income insurance can be expensive, if you have

the option of buying a group policy through your employer, it may save you some money. Although these typically cost less than individual policies, they often provide less comprehensive coverage, may exclude certain disabilities, and coverage typically terminates when you leave the employer.

Your best bet is to talk with a financial professional who can help you assess your entire protection package and decide the coverage that's best for you. The important thing is to acknowledge that you are about three times more likely to become disabled than you are to die during your income producing years and make sure you have the risk covered.

- Joe B. Jones is a Financial Representative with Northwestern Mutual Financial Network the marketing name for the sales and distribution arm of The Northwestern Mutual Life Insurance Company (Northwestern Mutual) (NM), Milwaukee, Wisconsin, its affiliates and subsidiaries. Financial Representative is an insurance agent of NM based in Lawrence, KS. To contact Joe, please call 785-856-2136, e-mail him at joe.jones@nmfn.com or visit his Web site at www.joe-jones.com.



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Become familiar with wealth-transfer strategies

To retire comfortably, you need to save and invest regularly. For example, you need to contribute as much as you can afford to your 401(k) and IRA. But once you retire, you'll need to "switch gears" somewhat and move from wealth-accumulation strategies to wealth-transfer strategies.

An effective wealth-transfer strategy



Harley Catlin and Ryan Catlin

can help you accomplish a variety of goals, such as distributing your assets the way you choose, avoiding probate and reducing estate taxes. And you can explore a variety of wealth-transfer tools, including the following:

- **Gifting** — You can give up to \$12,000 per year to as many people as you'd like without incurring gift taxes. And if you want to help a child or grandchild pay for college through a Section 529 college savings plan, you can "bunch" the \$12,000 limit over five years to make one \$60,000 gift, or one \$120,000 gift if it comes from you and your spouse. (If you group the contributions together this way, you won't be able to make another \$12,000 gift to that same child or grandchild for the next five years.)

- **Will** — A will is simply a plan for distributing your assets to family members and other beneficiaries. If you were to die intestate (without a will), state laws would determine how your assets should be distributed — and there's no guarantee that the end result would be what you would have chosen.

- **Beneficiary designations** — Many of your financial assets — including annuities, life insurance, IRAs and 401(k) plans — allow you to name a beneficiary. Upon your death, your beneficiary will automatically receive these assets, avoiding the sometimes time-consuming, expensive (and public) process of probate. Because beneficiary designations supersede any instructions you might put in a will or living trust, it's essential that you periodically review these designations to make sure they reflect your current wishes.

- **Trusts** — Different trusts can help you accomplish a variety of wealth-transfer and estate-planning goals. For example, a revocable liv-

ing trust can help you leave assets to your heirs without going through probate. You can also structure the trust to stagger payments over a number of years, rather than all at once, or include other restrictions or incentives. An irrevocable life insurance trust allows you to keep the death benefit of your life insurance policy outside your estate, so the insurance proceeds won't increase your estate tax liability. And a charitable remainder trust allows you to transfer an appreciated asset — such as a stock or piece of real estate — to a charitable trust, thereby allowing you to defer or even avoid capital gains taxes on the sale of the asset. Plus, the trust can provide you with a lifetime income stream while the remainder of the assets can be distributed to your favorite charities.

As you can see, trusts are versatile instruments — but they are also complex. Consequently, you'll need to consult with your tax and legal advisors regarding your particular situation.

In fact, all the wealth-transfer techniques we've looked at will require some careful thought and preparation on your part — so don't wait

too long before getting started. Time has a way of sneaking up on all of us — but it's especially sneaky when we're unprepared.

— Harley Catlin and Ryan Catlin are with Edward Jones, 4828 Quail Crest Place, Lawrence. They can be reached at 785-841-6262.



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Tips for managing and reducing shoulder pain

Shoulders, as comic Rodney Dangerfield might say, never get no respect. They win lots of metaphorical attention—we have shoulders to cry on, we stand on the shoulders of giants, we shoulder heavy burdens—but knees and hips are far more widely discussed with respect to pain and coping. That’s a misfortune. Anyone who suffers from shoulder problems knows the truth: Shoulder pain can ruin your sleep, weaken your arms, and cause pain in nearby joints.



Laura Bennetts

If your shoulder hurts, you may find it hard to open jars, lift milk cartons, or reach for coffee cups. Your arm might feel heavy, stiff, and weak to the point that you rely on your other hand to lift, pull, or reach. You may find it hard to turn over in bed or dress yourself.

How can you manage and reduce shoulder pain? What causes the pain? How can you regain your strength?

Tendonitis

Shoulder pain can be caused by arthritis or by torn tendons. Tendons, the fibrous sinews that connect muscles to bones, can tear for any number of reasons—say, wear and tear after a lifetime of work, or if you fall and catch yourself with your outstretched arm. But shoulder pain is most often caused by inflammation of the group of muscles and tendons, the “rotator cuff,” that holds the shoulder joint together and allows it to move. This is called tendonitis.

Tendonitis can hurt acutely and limit or even “freeze” your shoulder

functionally.

If you have the following symptoms, you may have tendonitis:

1. Gradual onset of pain. Did your shoulder pain start suddenly or gradually? Did you injure yourself all at once—say, in a fall or in a forceful activity like hammering or heavy lifting? Or did the pain “sneak up on you” gradually?

2. An arc of pain. Reach up and notice when the pain starts and stops. Tendonitis often hurts in the middle of the movement, not during the whole movement. The pain begins, not when you start to raise your arm, but midway through the upward movement; and it lasts until your hand reaches shoulder height. Curiously, if you reach even higher, the pain often lessens or disappears.

3. Sleep woes. Trying to sleep on your side hurts your shoulder, waking you and forcing you on to your back or stomach.

Get Thee to Therapy

When you first notice pain in your shoulder, you can self-treat with ice, rest, and over-the-counter anti-inflammatory medication. But if the pain doesn’t subside and full motion hasn’t returned within two weeks, you should seek help from a physical therapist. Waiting and resting the arm for longer than that may actually delay your recovery, because the arm will become weaker and stiffer as you wait. Luckily tendonitis is treatable with a course of therapy that includes deep heat, manual therapy, and exercise.

Strengthening is Key

The longer your shoulder pain lasts, the longer it takes to recover. If your shoulder tightens, the therapist will need to restore your full range of motion by manually stretching your arm and shoulder blade. Strengthening, meanwhile, requires exercises (with weighted wands, hand weights, and elastic bands) to strengthen your weakened muscles. If you have neck

pain or elbow pain, the therapist will work those areas and strengthen them as well.

As your pain decreases, your joint mobility will improve and you’ll be able to accelerate the strengthening process. Your therapist will give you home exercises and monitor and increase these exercises as you get better. The more responsibility you take for your own recovery by exercising on your own, the faster you will improve.

Mobile = Vulnerable

An ounce of prevention is worth a pound of cure. So if you don’t have shoulder pain, you should take pains to protect yourself. The shoulder is your most mobile joint and can move in countless ways. When you have full range of motion you can reach over your head to touch your opposite ear or behind your back to scratch between your shoulder blades. The shoulder is also a shallowly anchored joint that can easily be dislocated or injured when grasped or pulled.

In order to protect yourself, there are positions you should avoid. If you put grab bars next to your toilet, you should work with a therapist to position the bars correctly so

that you can stand up easily without hurting yourself. Reaching up to a grab bar—to pull yourself to a standing position—can transfer your body weight to your shoulders, causing injury. The bar should be just high enough for you to raise yourself to a standing position by pushing up with your hands.

You should also avoid having other people lift you by your arms. Say that someone is helping you out of a chair. If they tried to lift you by your arms, that would force your shoulders to bear your full body weight. So if you’re in a chair and you need to get up, ask your helper to help you help yourself – say, by using your belt for leverage, or clasping you snugly around the waist, to better enable you to push yourself into a standing position.

Respect and protect your shoulders. Rodney Dangerfield will approve.

- Laura Bennetts, MS PT, is a physical therapist with 27 years experience. She co-owns Lawrence Therapy Services LLC (2200 Harvard Road, Suite 101, Lawrence 66049, 785-842-0656) and Baldwin Therapy Services (814 High St., Suite A, Baldwin City, 66006, 785-594-3162).



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How sweet it is!

The use of sugar or one of its many counterparts has been noted from the beginning of time in every culture. The first notation of sugar is noted with the Indians discovering how to crystallize sugar from cane during the Gupta dynasty. Today, according to the Food and Agriculture Organization of the United Nations, most of the cane sugar comes from Brazil.



Dr. Farhang Khosh

What is sugar? The most common answer to this question is that it's the white granulated sugar that is found at the dinner table. This type of sugar is sucrose and is only one type of sugar. There are three types of simple sugars: sucrose, fructose and glucose. A sugar that is similar to sucrose and is found in dairy products is lactose. Most table sugar comes from either sugar cane or sugar beets. Manufacturers who prepare food may use other sugars, including palm sugar or fructose. Dissolved sugar, known generally as syrups, can include honey, molasses or agave. Brown sugar comes from the late stages of the refining of sugar, or from coating refined sugar with molasses.

Fructose is a sugar found in many foods. The reason that fructose is used commercially in foods and beverages, besides the fact that it is inexpensive compared to sucrose, is because of its relative sweetness.

High fructose corn syrup (HFCS)

is known to have significant deleterious health consequences and is in most processed foods. Due to the increased price of sugar imports in the United States, domestically produced corn syrup and HFCS are an inexpensive alternative used in American made foods, candies, and sodas. Several studies indicate there are serious health problems in laboratory rats fed a constant diet of high fructose corn syrup.

Agave syrup or nectar is a relatively new sweetener that has received much public attention. Agave nectar is best known for coming from the plant from which tequila is made. It has been used for thousands of years as an ingredient in food. The Aztecs so prized agave that they recognized it as a gift from the gods.

Stevia, or *Stevia Rebaudiana*, is an herb from the Chrysanthemum family. The stevia plant is a shrub that is native to Brazil and Paraguay. Native Americans in these regions have used the leaves to season everything from their foods to teas. The world's consumption of stevia is variable, but, reportedly, Japanese consumers used the equivalent of 700 metric tons of Stevia leaves in 1987 alone.

Honey has been used throughout history as a sweetener. Honey has many medicinal properties to it, including being used for wounds and other antiseptic and antibacterial properties.

Remember that excessive sugar consumption is associated with many negative health benefits. So as we enjoy the holidays remember to use the sugar lightly.

- Dr. Farhang Khosh, N.D., is a Naturopathic Doctor practicing at Natural Medical Care in Lawrence. He can be reached at 785-749-2255.

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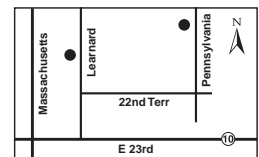


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Prize-winning second career revives jobs in rural area

Tim Will and his wife, Eleanor, moved to rural North Carolina a few years ago, hoping to pursue a decades-old dream of becoming organic farmers. Tim had spent his career working for big telecommunications companies as a systems analyst, and more recently had taught history and geography at an urban Miami high school.



Mark Miller

They picked Rutherford County in the heart of the Appalachian Mountains after seeing the 1992 film of James Fenimore Cooper's classic novel, "The Last of the Mohicans." "No matter where that is," Will told his wife during one particularly eye-catching scene of Appalachian beauty, "that's where I want you to bury me."

The couple had become interested in organic farming years earlier, while serving in the Peace Corps in Honduras and Fiji. They moved to Rutherford County when Tim was 58; his game plan was to continue his work as a high school teacher and take up farming on a small scale.

Instead, Will has found himself leading a unique effort to transform a region hit hard by globalization into an Internet-fueled center for locally-grown organic food. The initiative is returning the area to its agricultural roots, and putting people back to work.

Will's efforts have just been recognized with a 2009 Purpose Prize. The award, given annually by the Encore Careers campaign, recognizes older career trailblazers who've demonstrated creative and effective work tackling social problems. This year, the winners were chosen from 1,200 nominees; five winners will receive \$100,000 prizes, with another five recipients getting \$50,000 awards.

The prize, now in its fourth year, was created to promote and encourage civic engagement among baby boomers.

Will's teaching plans changed when he found jobs were scarce in his new home, so he accepted a job with the Foothills Connect Business and Technology Center, which had been created to support local small business entrepreneurs and provide community Internet access.

The challenges were daunting. The

area had lost most of the jobs in its key industries—textiles and manufacturing—to globalization. And Will was especially troubled by another discovery: The area had no broadband access to the Internet.

"I thought it was criminal," he recalls. "I tried explaining to folks that by the time you get out of high school, the world expects you to have mastered the Internet, not just getting introduced to it."

His first big achievement at Foothills was snagging a \$1.4 million foundation grant to bring broadband Internet access to the community. Aiming to leverage that connectivity to create jobs, Will tried creating an online marketplace to sell the wide array of Appalachian crafts made in the region, but the effort fell flat.

Along the way, however, Will stumbled onto another potential source of economic growth. While studying maps of the region, he noticed that thousands of families owned farmable land. "I confirmed with our local tax department that there were 7,000 families with five to 20 acres," he recalls. "Then we compared that list with the names of people who had lost jobs in the textile mills and furniture factories, and we had hundreds of matches."

Most of that land hadn't been under cultivation for years, due to the small size of the individual parcels, but Will knew that size wasn't a barrier for the specialized, organic crops he had in mind. "I started contacting folks to help them understand they didn't need 100 acres to be successful. We're trying to show people how they can grow organic and pesticide-free with high flavor—don't go for yield, but quality instead of quantity."

The next step was connecting farmers to a marketplace, and Will found a stream of eager customers in Charlotte restaurants, where chefs complained to Will that they had very little access to high-quality, locally-grown produce. That led to creation of Farmers Fresh Market, an online ordering system that connects Charlotte restaurants with Rutherfordton area farmers.

The marketplace has provided a foundation for rebuilding an agriculture-based economy in the region. The network has gone from 35 farmers in 2008 to 90 this year, growing high-value crops like heirloom tomatoes, fennel, leeks, garlic and Swish chard. "They're growing stuff they've never tasted before," Will says with a hearty laugh.

With the venture becoming more popular, Will is working to help farmers grow their business through computer training. Foothills Connect also has helped launch sustainable horticulture programs for adults in the community and high school students.

I've posted a video about Tim Will's work and features on the other 2009 Purpose Prize winners at

<http://retirementrevised.com/purposeprize>.

(Millions of Americans are re-inventing retirement, and Mark Miller is helping write the playbook for new career and personal pursuits of a generation. Mark blogs at www.retirementrevised.com; contact him with questions and comments at mark@retirementrevised.com)

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Vitamin D deficiency common but easily treated with supplements

DEAR MAYO CLINIC: At my last checkup, my blood work showed a vitamin D deficiency. My doctor recommended a vitamin D supplement but didn't say how much to take. I'm a healthy 51-year-old woman and eat a well-balanced diet. How much vitamin D do I need?

ANSWER: Vitamin D has been in the headlines recently. Researchers are learning more about the many ways it benefits health—and, as a result, increasing the recommendation for vitamin D intake.

It's well established that vitamin D helps with calcium absorption and helps keep bones strong. There's also evidence that vitamin D helps reduce the risk of common cancers, muscle and joint pain and perhaps even multiple sclerosis. Newer studies, including one published last year in the *Journal of the American College of Cardiology*, found that low levels of vitamin D are associated with increased risk of heart attack, stroke, high blood pressure, diabetes and obesity.

In the same study, researchers looked at data on the prevalence of vitamin D deficiency. They found that half of American adults may be deficient.

Given the importance of vitamin D—and the prevalence of vitamin D deficiency—it's good your doctor checked your vitamin D levels. For adults, the current recommended daily allowance (RDA) for vitamin D ranges from 200 to 600 international units (IU), depending on your age. For someone who's 51, the recommendation is 400 IU. However, many experts now say that adults should consume 800 to 1,000 IU of vitamin D daily. But before taking more than the recommended daily allowance, double check with your doctor. Taking doses higher than 2,000 IU per day can be harmful except in unusual cases, for example, when a person can't absorb vitamin D well because of a medical condition or disease.

For some people, it's difficult to get these higher amounts of vitamin D from the usual sources, which are diet and sunshine. Vitamin D is called the sunshine vitamin because your body can produce it when you are exposed to the sun's ultraviolet rays. If you aren't outside much, have dark skin or live in a northern climate, the sunshine factor is not enough. If you live where there is year-round sun, wearing sunscreen—still important be-

cause of skin cancer risk—cuts down vitamin D production.

A few foods are good sources of vitamin D—fortified dairy products as well as salmon, tuna and mackerel. A cup of fortified milk offers about 100 IU of vitamin D. Salmon (3.5 ounces) offers about 650 IU of vitamin D. Most people won't eat enough of these foods every day to reach the recommended amount. That's where supplements come in.

For your age and situation, a supplement that includes both calcium and vitamin D may be a good idea. Many women enter menopause in their early 50s, which is a time of more rapid bone loss. This is why the recommended daily allowance for calcium and vitamin D increases at age 50. Once you've gotten

the OK from your doctor, consider a supplement that includes 500 to 600 milligrams of calcium and 400 IU of vitamin D and take it twice a day. The supplement plus your normal dietary vitamin D should keep you in a range that is safe and will raise your levels back to normal. - Philip Hagen, M.D., Preventive Medicine, Mayo Clinic, Rochester, Minn.

(Medical Edge from Mayo Clinic is an educational resource and doesn't replace regular medical care. E-mail a question to medicaledge@mayo.edu, or write: Medical Edge from Mayo Clinic, c/o TMS, 2225 Kenmore Ave., Suite 114, Buffalo, N.Y., 14207. For more information, visit www.mayoclinic.org.)

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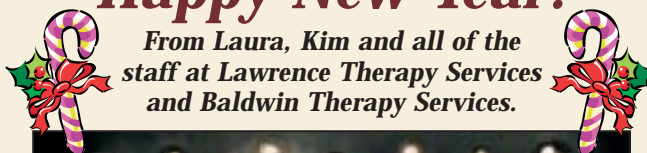
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If you would like to include your event(s) in our monthly calendar, please call Kevin Groenhagen at (785) 841-9417.

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MINI BINGO 6:30 PM,
REGULAR BINGO 7:00 PM

(785) 234-5656
BOOKMOBILE

MONDAYS
Prairie Commons, 5121 Congressional Circle,
Lawrence, 9:00-10:00 a.m.
Babcock Place, 1700 Massachusetts St., Law-
rence, 10:30-11:30 a.m.

WEDNESDAYS
Brandon Woods, 1501 Inverness Dr.,
Lawrence, 9:00-10:00 a.m.
Presbyterian Manor, 1429 Kasold Dr., Law-
rence, 1:30-2:30 p.m.
Drury Place, 1510 St. Andrews Dr.,
Lawrence, 1:00-2:00 p.m.

FRIDAYS
Vermont Towers, 1101 Vermont St.,
Peterson Acres, 2930 Peterson Rd.,
Lawrence, 11:15 a.m.-12:00 p.m.
Lawrence, 1:30-2:30 p.m.

BOOK TALKS

THIRD TUESDAY OF EACH MONTH
COTTONWOOD RETIREMENT CENTER, 1029 NEW
HAMPSHIRE ST., LAWRENCE, 2:00 PM
BABCOCK PLACE, 1700 MASSACHUSETTS ST.,
LAWRENCE, 3:00 PM

THIRD WEDNESDAY OF EACH MONTH
BRANDON WOODS, 1500 INVERNESS DR.,
LAWRENCE, 10:30 AM
PRAIRIE COMMONS, 5121 CONGRESSIONAL
CIRCLE, LAWRENCE, 1:00 PM
WINDSOR HOUSE, 3220 PETERSON RD.,
LAWRENCE, 2:15 PM

FOURTH WEDNESDAY OF EACH MONTH
PRESBYTERIAN MANOR, 1429 KASOLD RD.,
LAWRENCE, 9:45 AM
SENIOR CENTER, 745 VERMONT ST.,
LAWRENCE, 1:30 PM

■ CONTINUED ON PAGE 17

An Assisted Living
& Memory Care Residence

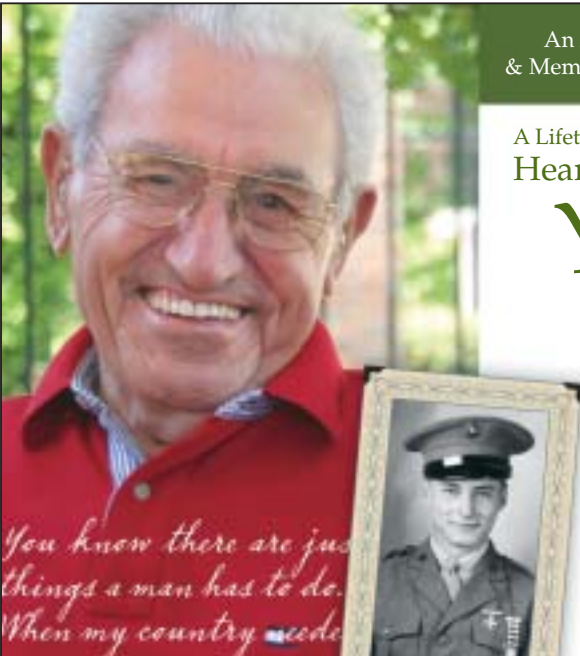
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- 300 to 800 stitches per minute
- snap on feet
- top-loading jam proof bobbin
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- heavy duty motor
- saw leather to silk

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Model 1183 **VIKING** Sapphire® 870 Quilt

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■ CONTINUED FROM PAGE 16

CLASSES/LECTURES

ONCE A MONTH

AARP'S 55 ALIVE SAFE DRIVING COURSE

Monthly classes are held at Stormont-Vail. Call to make reservation. TOPEKA, (785) 354-5225

DEC 8 & 9

AARP DEFENSIVE DRIVING

The AARP Driver Safety Program is the nation's first and largest refresher course for drivers age 50 and older that has helped millions of drivers remain safe on today's roads. AARP has offered the course in the classroom for 25 years. You can expect to learn about current rules of the road, how to operate your vehicle more safely in today's increasingly challenging driving environment, and some adjustments to common age-related changes in vision, hearing, and reaction time. No testing. Fee. 10:00 a.m.-3:00 p.m., Lawrence Memorial Hospital, Meeting Room D. LAWRENCE, (785) 749-5800

EXHIBITS/SHOWS

NOV 1-DEC 31

AMERICAN INDIAN REALISM

This exhibition features modern prints from vintage glass plate negatives. The photographs reflect the dignity maintained by Native Americans in spite of upheaval caused by relocation of tribes. Photographers focused on people who still wore traditional dress and lived in traditional homes as a means of documenting a lifestyle that has been irrevocably altered. Open 9:00 a.m.-5:00 p.m. 1515 SE Monroe. TOPEKA, (785) 235-3939

NOV 6-DEC 31

SUDLOW

More master artworks by the master of Kansas landscape painting. Beauchamp's Gallery. TOPEKA, (785) 233-0300

DEC 4-JAN 15

TWO FOR THE ROAD FEATURING WORKS BY STAN HERD & DEB GROESSER

Works by Stan Herd & Deb Groesser. Southwind Gallery at Framewoods. TOPEKA, (785) 273-5994

HEALTH

**MONDAYS THROUGH THURSDAYS
FIT FOR LIFE**

LMH Kreider Rehabilitation Services offers safe, nurturing environment with one-on-one instruction on aerobic and cardiovascular equipment. Especially helpful for those with osteoporosis, balance problems, post CVA/stroke, knee/hip replacement, arthritis. Fee. Mondays through Thursdays, 9:00-11:00 a.m. or 2:00-5:20 p.m. at LMH. Tuesdays and Thursdays 8:00-11:00 a.m. at LMH South. LMH KREIDER REHABILITATION SERVICES (785) 840-2712

**TUESDAYS, WEDNESDAYS AND THURSDAYS
JAZZERCISE LITE**

Fitness that's invigorating, not intimidating! This 60-minute class pairs moderate aerobics with exercises designed to improve your strength, balance, and flexibility. 10:20-11:20 a.m. at 3115 W. 6th St. LAWRENCE, (785) 331-4333

**TUESDAYS AND THURSDAYS
BLOOD PRESSURE CLINIC**

Conducted at Stormont-Vail's Healthwise 55 office at 2252 S.W. 10th Ave., at the northeast corner of S.W. 10th and MacVicar, from 10:00 a.m.-1:00 p.m. No appointment necessary. TOPEKA, (785) 354-6787

**TUESDAYS AND THURSDAYS
FREE BLOOD PRESSURE CLINIC**

Held at the Wakarusa Wellness Center, 4920 Bob Billings Parkway, located 1 block west of Wakarusa at the intersection of Research Park Drive. From 9:00 a.m.-1:00 p.m. and 3:00-6:00 p.m. No appointment necessary. LAWRENCE, (785) 856-6030

**TUESDAYS AND THURSDAYS
SENIORCISE PROGRAM**

Seniorcise is a specialized program for women over 60 years of age, in January. The focus of the program is on balance, movement, low impact cardio aerobics, and strength training for toning. In addition, there's a strong emphasis on flexibility and range of motion to improve and/or increase joint mobility and quality of life. Senior classes are held at Body Boutique from 11:00 a.m. to noon. Fee. LAWRENCE, (785) 749-2424

■ CONTINUED ON PAGE 18



Not typically what one thinks of when looking for a "dementia care facility"



Catering to the needs of family members who can no longer be cared for at home or live alone because of some type of dementia, Harbor House associates are specifically trained and skilled in the ever changing world of the individual of those with memory impairments and behavior challenges. Both of which are mainstream and "the norm" at Harbor House.

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Life in the
Moment...
One simple,
Joy-filled
Moment at a
Time...**



With only 8 residents and always at least 2 professional associates on duty, residents (and their family members, too) enjoy the individualized attention and care that can only be found in our small intimate environment. Our residents are quick to find Harbor House easy to call Home.



We invite you to be our guest and would welcome a visit from You. We would love to show you our home.

Call Kitty Shea 785-760-5508

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■ CONTINUED FROM PAGE 17

FIRST AND THIRD FRIDAYS OF EACH MONTH HEALTH CHECKS

Blood pressure checks, glucose checks, skin checks, and education on nutrition and weight loss strategies BY Washburn University School of Nursing Mobile Health Unit. YWCA of Topeka, 225 SW 12th St., south entrance of the building, 9:00 a.m.-1:00 p.m. TOPEKA, (785) 233-1750, EXT. 252

SECOND THURSDAY OF EACH MONTH BLOOD PRESSURE AND HEALTH INFORMATION

Sponsored by the West Ridge Mall merchants. Conducted in mall's food court. No appointment necessary.

WEST RIDGE MALL, TOPEKA, 8:15-9:15 AM

THIRD THURSDAY OF EACH MONTH MEDICATION CLINIC

Bring questions about your medications (prescription or over-the-counter), 1:30-2:30 p.m. Call for appointment. Healthwise 55 Resource Center, 2252 S.W. 10th Ave. TOPEKA, (785) 354-6787

FOURTH THURSDAY OF EACH MONTH NUTRITION CLINIC

Call for an appointment. Healthwise 55 Resource Center, 2252 S.W. 10th Ave. TOPEKA, (785) 354-6787

DEC 2 BONE DENSITY SCREENING

Advance appointment required. Appointment takes about 20 minutes and includes education about osteoporosis prevention as well as the screening. Note: this is NOT the same as a DEXA scan which is ordered by a physician and scans the hips and the spine. That is done through Radiology. Lawrence Memorial Hospital, HealthSource Room, 9:00-11:00 a.m.

LAWRENCE, (785) 749-5800

DEC 2 CHOLESTEROL SCREENINGS

These screening events offer a total only cholesterol by fingerstick. No appointment or fasting necessary; just drop in. Please note there may be a wait involved. We are sorry but at this time we are not offering a full lipid panel test option. \$5/test. Lawrence Memorial Hospital, HealthSource Room, 3:00-4:30 p.m. LAWRENCE, (785) 749-5800

DEC 5 BONE DENSITY SCREENING

See December 2 description. Lawrence Memorial Hospital, HealthSource Room, 9:00-11:00 a.m.

LAWRENCE, (785) 749-5800

DEC 14 BONE DENSITY SCREENING

See December 2 description. Lawrence Memorial Hospital, HealthSource Room, 4:00-6:00 p.m.

LAWRENCE, (785) 749-5800

HOLIDAY EVENTS

NOV 21-DEC 31 TARC WINTER WONDERLAND

A Topeka tradition featuring more than one million lights winding through a two mile stretch at scenic Lake Shawnee. Runs nightly.

TOPEKA, (785) 232-0597

NOV 30-DEC 3 FESTIVAL OF TREES

Local artists display their one of a kind Christmas trees. Auction benefits Shelter Inc. Liberty Hall.

LAWRENCE, (785) 843-2085

<http://www.visitlawrence.com>

DEC 3-6 FESTIVAL OF TREES

View over 65 beautifully designed Christmas trees and wreaths, purchase homemade baked goods and products made by local vendors in

the Mistletoe Market and Bakery. Enjoy holiday entertainment, Candy Cane Lane (a craft area sponsored by Hobby Lobby), and visit the Silent Auction. Ag Hall-Kansas ExpoCenter. TOPEKA, (785) 266-8686 <http://www.shelteredliving.org>

DEC 5 2009 OTTAWA CHRISTMAS PARADE

Christmas Parade at 11:00 a.m. Enjoy carriage rides through elegant downtown. Warm apple cider and Kettle Corn Carolers in the streets Live entertainment. Enjoy different and unique entertainment in shops. Train Show, Quilt Show Children's carnival, Live Nativity and the rest of the story (Bethlehem - shuttle stop) Dec. 4th through 6th.

OTTAWA, (785) 242-1000 <http://www.ottawavictorianchristmasfestival.com>

DEC 5 DOWNTOWN LAWRENCE OLD-FASHIONED CHRISTMAS PARADE

Bring the entire family and enjoy the annual Old-Fashioned Christmas parade. Features exclusively horse-drawn carriages, wagons and coaches decorated for the season. Santa is the parade's grand finale. Downtown.

LAWRENCE, (785) 838-9400

DEC 5 HOLIDAYS IN WELLSVILLE 2009

Festivities include Tree Lighting Ceremony, Wellsville Tour of Homes, Home Lighting Contest and Business Window Decorating Contest. Holiday Craft Show, Pictures with Santa, Entertainment Junior & Luetta Crist Christmas Drawing and Local Girl Scout Bake Sale.

WELLSVILLE, (785) 883-4532

<http://www.wellsvillechamber.com>

DEC 5-20 FESTIVAL OF NATIVITIES

View over 300 nativity sets during this annual festival and shop the craft sale. Weekends only. Centenary United Methodist Church.

LAWRENCE, (785) 843-1756 <http://www.visitlawrence.com>

DEC 9 HOLIDAY CONCERT

Topeka Symphony Orchestra Concert: "Capitol Federal Holiday Concert" A program of seasonal favorites featuring soprano Kristen Watson; White Concert Hall, Washburn University.

TOPEKA, (785) 232-2032

<http://www.topekasymphony.org>

DEC 12 CHILDREN'S HOLIDAY SHOP

Children love picking out just the right gift for everyone in the family at a low price. In addition to shopping kids can visit Santa. For children aged 4th grade and younger. Lawrence Arts Center.

LAWRENCE, (785) 843-2787

DEC 18-20 THE NUTCRACKER

Holiday presentation of the Nutcracker performed by the Ballet Midwest. Performances are: December 18 - 8:00 p.m. December 19 - 2:00 p.m. / 8:00 p.m. December 20 - 2:00 p.m. Call for ticket information. Topeka Performing Arts Center.

TOPEKA, (785) 272-5991

MEETINGS

FIRST MONDAY OF EACH MONTH BEREAVEMENT SUPPORT GROUP

Facilitated by Heartland Hospice and open to any who have lost loved ones. Call Terry Frizzell or just show up. Meets at Heartland's office, 2231 SW Wanamaker Rd., Ste. 202, at 6:30 p.m.

TOPEKA, (785) 271-6500

■ CONTINUED ON PAGE 19

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United Way of Greater Topeka

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**FIRST AND THIRD MONDAY OF EACH MONTH
BEREAVEMENT SUPPORT GROUP**
LAWRENCE SENIOR CENTER
2:15-3:45 PM, (785) 842-0543

**FIRST AND THIRD MONDAY OF EACH MONTH
BEREAVEMENT SUPPORT GROUP**
Facilitated by LMH Chaplain Angela Lowe.
Meets in the LMH Chapel, 2nd floor. Lawrence Memorial Hospital.
LAWRENCE, (785) 505-3140

**FIRST AND THIRD MONDAY OF EACH MONTH
CAREGIVER SUPPORT GROUP**
For adults who have lost loved ones. Call LMH Chaplain Angela Lowe for more information.
LAWRENCE MEMORIAL HOSPITAL
4:00-5:00 PM, (785) 840-3140

**FIRST AND THIRD MONDAY OF EACH MONTH
CAREGIVER SUPPORT GROUP**
Do you sometimes feel overwhelmed with the responsibilities of caring for a spouse, parent, or loved one? Do you need information about Alzheimer's disease or other disorders? Please join us in one of our Caregiver Support Groups. Sponsored by Douglas County Senior Services, Inc. Douglas County Senior Services, Inc., 745 Vermont St., 2:15-3:45 p.m.
LAWRENCE, (785) 842-0543

**FIRST TUESDAY OF EACH MONTH
LAWRENCE AREA COALITION TO HONOR
END-OF-LIFE CHOICES**
Works with 31 other Kansas communities to help all Kansans live with dignity, comfort and peace at the end-of-life, regardless of age. Members have backgrounds in health-care, pastoral care, senior citizens' services, funeral home care, library and educational services. Meets at 3:00 p.m. in Conference E of LMH.
LAWRENCE, (785) 830-8130

**FIRST TUESDAY OF THE MONTH
SCRAPBOOK MEMORIES**
Heart of America Hospice, 3715 SW 29th St., Suite 100, 6:00 p.m. All supplies provided (except photos).
TOPEKA, (785) 228-0400

**FIRST TUESDAY OF EACH MONTH
LOSS AND GRIEF SUPPORT GROUP**
Heart of America Hospice invites individuals coping with the loss of loved ones to join us. For more information, call Heart of America Hospice at (785) 228-0400 or 1-800-396-7778. Aldersgate Village, Manchester Lodge, 7220 SW Asbury Dr., 2:00 p.m.

**FIRST TUESDAY OF EACH MONTH
GRIEF SUPPORT GROUP**
Aldersgate Village, Manchester Lodge, 7220 Asbury Lane, 2:00 p.m. Sponsored by Heart of America Hospice.
TOPEKA, (785) 228-0400

**TUESDAYS
GRIEF & LOSS SUPPORT GROUP**
Midland Hospice, 200 SW Frazier Circle.
3:00-4:00 p.m.
TOPEKA, (785) 232-2044

**TUESDAYS
GRIEF & LOSS SUPPORT GROUP**
Midland Hospice, 200 SW Frazier Circle.
5:30-6:30 p.m.
TOPEKA, (785) 232-2044

**FIRST AND THIRD TUESDAY OF EACH MONTH
HEALING AFTER LOSS BY SUICIDE (HEALS)**
For those who have lost a loved one by suicide. Fellow survivors offer an atmosphere of understanding and emotional support by encouraging families and individuals to share healthy ways of coping and grieving. Contact Steve Newcomer at for more information. Pozez Education Center, 1505 SW 8th St.
TOPEKA, (785) 478-4947 or (785) 296-8349

**FIRST WEDNESDAY OF EACH MONTH
OLDER WOMEN'S LEAGUE**
Meetings are held in the Lawrence Public Library auditorium. Social time begins at 1:30 p.m. and the meeting begins at 2:00 p.m. The public is welcome to join members at all meetings. For more information, call Gayle Sigurdson at (785) 832-1692.

**FIRST WEDNESDAY OF EACH MONTH
INVESTMENT UPDATES**
Sponsored by Brian Casebeer, an Edward Jones financial advisor. Guest speaker. 634 S. Kansas Ave., 7:30-9:00 a.m.
TOPEKA, (785) 233-0366

**WEDNESDAYS AND SUNDAYS
OLDSTERS UNITED FOR RESPONSIBLE
SERVICE (O.U.R.S.)**
Members of O.U.R.S. have met to dance since 1984. The group meets to dance from 2:30-4:30 p.m. on Wednesdays, and from 6:00-9:00 p.m. on Sundays at the Eagles Lodge.
LAWRENCE

**THURSDAYS
GRIEF & LOSS SUPPORT GROUP**
Midland Hospice, 200 SW Frazier Circle.
3:00-4:00 p.m.
TOPEKA, (785) 232-2044

**THURSDAYS
CANCER SUPPORT GROUP**
This group is open to anyone living with cancer. If you are interested or have questions, please call for more information. LMH Oncology Center.
LAWRENCE, (785) 505-2768

**FIRST THURSDAY OF EACH MONTH
LAWRENCE AREA PARTNERS IN AGING**
Networking group. Call Ashley at (785) 842-0543 for more information. \$12.00 to attend (includes lunch).
JADE MONGOLIAN BARBEQUE, LAWRENCE
11:30 AM-1:00 PM

**FIRST AND THIRD THURSDAY OF EACH
MONTH
TRANSITIONS SUPPORT GROUP**
3:00 p.m. - Brewster Place, 1209 SW 29th St. Sponsored by Heartland Hospice of Topeka. Call Terry Frizzell for information and specific location.

**FIRST FRIDAY OF EACH MONTH
STROKE SUPPORT AND RECOVERY GROUP**
Providing an opportunity for learning and sharing experience. Meetings begin at 1:30 p.m. for blood pressure readings and at 2:00 p.m. for program. For information, call Jan Dietrich in the Adult Field Services Office. Health Agency Main Library.
TOPEKA, (785) 232-7765

**SECOND MONDAY, SEPT-MAY
LAWRENCE CLASSICS, GENERAL
FEDERATION OF WOMEN'S CLUBS**
Volunteer service club.
LAWRENCE, (785) 331-4575

**SECOND MONDAY OF THE MONTH
CAREGIVER SUPPORT GROUP**
Administered by Senior Outreach Services in cooperation with Jayhawk Area Agency on Aging, Inc. Designed to be a safe place to assist and empower caregivers of seniors. Rose Hill Place Clubhouse, 3600 SW Gage Blvd. 11:00 a.m.
TOPEKA, (785) 235-1367, EXT. 130

**SECOND TUESDAY OF EACH MONTH
LOSS AND GRIEF SUPPORT GROUP**
Heart of America Hospice in association with Pioneer Ridge Retirement Community invites individuals coping with the loss of loved ones to join us. For more information call (785) 841-5300 or 1-800-396-7778. Pioneer Ridge Assisted Living, 4851 Harvard Rd., Lawrence, 10:30 a.m.

■ CONTINUED ON PAGE 20

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**For more information, please call 785-542-2176
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■ CONTINUED FROM PAGE 19

**SECOND TUESDAY OF EACH MONTH
NATIONAL ASSOCIATION OF RAILROAD
AND VETERAN RAILROAD EMPLOYEES
(NARVRE)**

Meets at 9:30 a.m. at Coyote Canyon Buffet.
TOPEKA, <http://www.narvre.com>

**SECOND TUESDAY OF EACH MONTH
GRIEF SUPPORT GROUP**

Pioneer Ridge Assist Living, 4851 Harvard Rd.,
10:30 a.m. Sponsored by Heart of America
Hospice.
LAWRENCE, (785) 841-5300

**SECOND TUESDAY OF EACH MONTH
SCRAPBOOK MEMORIES**

Heart of America Hospice, 1420 Wakarusa,
6:00 p.m. All supplies provided (except
photos).
LAWRENCE, (785) 841-5300

**SECOND AND FOURTH TUESDAY OF
EACH MONTH
CAREGIVER SUPPORT GROUP**

Do you sometimes feel overwhelmed with the
responsibilities of caring for a spouse, parent,
or loved one? Do you need information about
Alzheimer's disease or other disorders? Please
join us in one of our Caregiver Support
Groups. Sponsored by Douglas County Senior
Services, Inc. Douglas County Senior Services,
Inc., 745 Vermont St., 6:30-8:00 p.m.
LAWRENCE, (785) 842-0543

**SECOND AND FOURTH WEDNESDAY OF
EACH MONTH
ALZHEIMER'S EARLY STAGE PATIENT
SUPPORT GROUP**

For patients with early stage Alzheimer's.
SEABROOK UNITED CHURCH OF CHURCH
(785) 234-2523

**SECOND WEDNESDAY OF EACH MONTH
MEMORY SUPPORT GROUP**

Held at The Windsor of Lawrence, 3220 Peter-
son Rd., 2:00 p.m. For more information,
please call Amy Homer.
LAWRENCE, (785) 832-9900

**SECOND WEDNESDAY OF EACH MONTH
DIABETES EDUCATION GROUP**

The Diabetes Education Center provides a free
monthly program for those with diabetes and
their support persons, at 6:00 p.m. Lawrence
Memorial Hospital, Meeting Room A.
LAWRENCE, (785) 505-3062

**SECOND THURSDAY OF EACH MONTH
NAACP MEETING - LAWRENCE CHAPTER**

Meets at the Lawrence public Library Gallery
Room at 6:30 p.m.
LAWRENCE, (785) 841-0030, (785) 979-4692

**SECOND SATURDAY OF EACH MONTH
HAPPY TIME SQUARES SQUARE DANCE
CLUB**

Meets at First United Methodist Church-West
Campus, 867 Hwy 40 (1 block west Hwy
40/K10 Bypass). Plus: 7:30-8:00 p.m., Main-

stream 8:00-10:00 p.m. Contact Frank & Betty
Alexander.
LAWRENCE, (785) 843-2584
www.happytimesquares.com

**THIRD TUESDAY OF EACH MONTH
SCRAPBOOK MEMORIES**

Heart of America Hospice, 3715 SW 29th St.,
Suite 100, 6:00 p.m. All supplies provided
(except photos).
TOPEKA, (785) 228-0400

**THIRD TUESDAY OF EACH MONTH
LAWRENCE PARKINSON'S SUPPORT
GROUP**

FIRST PRESBYTERIAN CHURCH, 2415
CLINTON PARKWAY, LAWRENCE, 2:00 PM

**THIRD TUESDAY OF EACH MONTH
GRANDPARENT AND CAREGIVER
SUPPORT GROUP**

Strengthening family relationships and
improving positive parenting skills. Meets
from 6:30-8:00 p.m. at St. Francis Hospital,
2nd floor meeting rooms. Child care available
with 48 hours notice.
TOPEKA, (785) 286-2329 or (785) 231-0763

**THIRD WEDNESDAY OF EACH MONTH
RETIRED GOVERNMENT EMPLOYEES**

The Lawrence chapter of the National Active
and Retired Federal Employees (NARFE) meets
the third Wednesday of each month at Con-
roy's Pub, located at 3115 W 6th in Lawrence.
Lunch begins at noon and is followed by a
program and business meeting. NARFE's mis-
sion is to defend and gain benefits that retired
career government employees earned. Employ-
ees from all branches of government are wel-
come and encouraged to attend. For more
information, please call John or Linda Surritte.
LAWRENCE, (785) 856-0558

**THIRD THURSDAY OF EACH MONTH
LUNCH AFTER LOSS**

11:00 a.m. - Paisano's Ristorante, Fleming
Place, SW 10th St. & Gage Blvd. A social sup-
port group to re-engage life after the death of a
loved one. Dutch treat.
Call Terry Frizzell at Heartland Hospice of
Topeka for reservations.
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1630 Elm, 1:00-2:30 p.m.
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**FOURTH WEDNESDAY OF EACH MONTH
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TGS promotes and stimulates the education,
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Ave., 7:00 p.m. No meeting in April, Novem-
ber or December.
TOPEKA, (785) 233-5762
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The Democrats say they want a "truth" commission. However, they want to limit their "investigation" to the Bush years.

 Of course, if one really wants to examine the truth about Iraq and the war against terrorism, you also have to look at the Clinton administration's record. Download a free copy of *What Really Happened: The Story of Clinton Inc.'s Efforts to Rewrite Bill Clinton's Record on Iraq and Terrorism* at www.sinsofthehusband.com/wrh.pdf

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Essential steps to conserve energy through the winter

(ARA) - Now that winter has arrived, it's important to take these four steps to improve your home's energy efficiency—they'll save you money and keep you warm, all season long.

Insulate

When the temperature drops, we often grab a blanket to help stay warm. Adding insulation to your home is like wrapping it in a warm blanket. Insulating areas such as attics, basements and crawlspaces can make your home more comfortable and lower your energy bills.

To get the biggest bang for your buck, according to the U.S. Environmental Protection Agency, add insulation to your attic. If your insulation is at or below the floor joists, you likely need to add more—12 to 24 inches, depending on where you live.

Seal your windows

Even if windows are sealed with weather stripping, cold air can still enter through gaps. Use silicone caulk to seal air leaks or place shrink-wrap film over drafty windows to help reduce energy loss.

You can locate drafts on windy days by slowly moving a burning candle near the window. Whenever the flame moves or smoke blows, you've got an air leak that needs to

be sealed.

Have your furnace inspected and clean your HVAC system

As you close up your home for the cold season, the contaminants that are in your air ducts and furnace recirculate through your home over and over throughout the entire winter. Your HVAC system can collect everything from mold, fungi and bacteria to tiny dust particles and allergens that can cause irritation to everyone in the house. In fact, according to the EPA, indoor air can be two to five times more polluted than outdoor air.

"Having your HVAC system inspected and cleaned can extend the life of your furnace and can even make it run considerably more efficiently, saving the homeowner money on their monthly heating and cooling bills" says Aaron Marshbanks, board member at NADCA - The HVAC Inspection, Maintenance

& Restoration Association. "Having your system cleaned can also increase air flow which often times translates into increased comfort for occupants in the home."

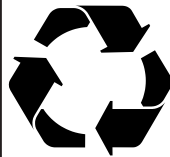
Change filters regularly

Once you have a clean HVAC system, it's crucial to change your furnace filters regularly. Filters are designed to remove the dust and debris from the air flowing into your

home. When the filter is dirty, the furnace has to work harder to pull air through the clogged filter and your utility bills will be higher. Change your furnace filter once a month to keep your system running at peak performance.

For more information on how to winterize your home, visit NADCA.com.

Courtesy of ARAcontent



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Nosy Nelida

For Nelida Nacamora, the White House award was more than recognition. It was vindication. Nelida had been called "Nosy Nellie" since she was a child.

Kids were always telling Nelida to "mind your own bee's wax." As an adult she continued to bug people—relatives, friends, neighbors, acquaintances, but they were often



Larry Day

more subtle than the kids in the way they manifested their irritation.

Someone once mailed Nelida a copy of *The Caine Mutiny* with the episodes depicting Captain Queeg's incessant nosiness highlighted in yellow. Nelida was delighted. She considered Captain Queeg the hero of the book.

Officers in several organizations to which Nelida belonged took precautions to keep her from eavesdropping, and they kept her away from organization documents.

The efforts to keep Nelida at arm's length annoyed her. She considered her vigilance and her sleuthing talents priceless gifts that she was obliged to share with everyone.

Nelida ran a small shop in one of Letongalooosa's strip malls. There were several "for lease" signs. A medical equipment and supply store opened down the way from Nelida's shop. True to form, Nelida kept an eye on the place as workers renovated it. A sign went up, and lettering

went on the front door and the plate glass window.

A van arrived. Men unloaded boxes and equipment. The very next day—and this irked Nelida—medical and hospital equipment were in place in the store. Someone had worked very late that night. The store didn't open for a week or so. Nelida was curious. No "grand opening," signs appeared. There were no ads in the local media.

Then one morning there was an "open" sign on the door. A man was inside.

Nelida walked down.

"Hi. I'm Nelida. My shop is up the way."

The man nodded, "Nick," he said. Nick was tall, dark and hatchet-faced.

"No grand opening signs, no ads in the paper," said Nelida. "How are you going to stay in business?"

Nick gave Nelida a "Clint Eastwood" stare. After a few seconds he said, "We're not retail. We ship from a big warehouse outside of town."

"Then why have this place?" asked Nelida

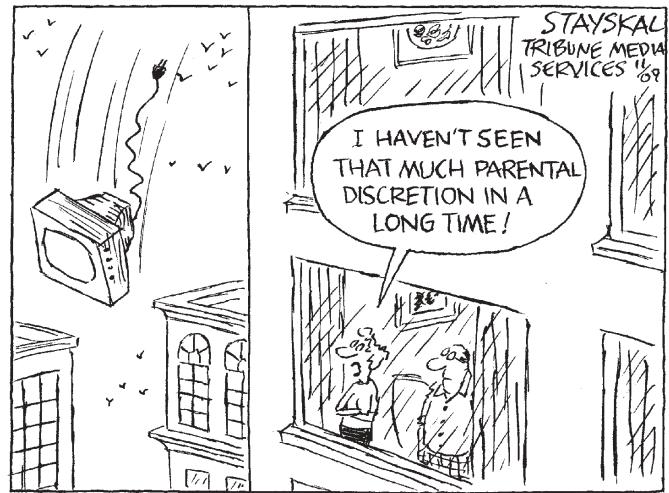
Another Clint Eastwood stare and another pause. "A customer just went into your shop," said Nick.

"I'd better go," she said.

There was no customer. Nelida went to the window. The hatchet-faced man had put up the "closed," sign, and was locking the door.

Nick never came back. After that the store was manned by a series of clerks who ranged from tight lipped to downright rude.

"Something's not right," said Nelida. Nelida blew the whistle loud and long, but local, county and state functionaries had all developed an "ignore Nosy Nellie" mentality. At



the national level her alarms disappeared into a miasma of answering machine messages that thanked her for her efforts and promised that someone would "get in touch soon," No one ever did.

Meanwhile at the U.S. Department of Justice, Agent Jenks' special task force had a huge medical equipment scam in its sights. Before he could move in and arrest the scammers Jenks had to protect the government's key undercover informant—a hatchet-faced man whose code name was "Nick."

"Sir," said Jenks' assistant, "A whistleblower in Kansas could foul up the whole operation."

"Shut her up," said Jenks. Then, "No, hold it! Get her on the phone!"

With that phone call Agent Jenks protected his undercover informant and started Nelida Nacamora—who agreed to keep her mouth

shut for a month—on her way to a national award and a visit to the White House. The media later gave Nelida credit for blowing the whistle on the medical equipment scam.

Sometime later, a group of recipients of the "Good and Faithful Citizen Award," including Nelida, received their plaques from the President himself. As the group left the Oval Office to take a VIP tour of the White House, the President, who was always very well briefed, spoke quietly to one of the Secret Service agents.

"Keep a very close eye on Mrs. Nacamora," he said.

"Yes, Mr. President," said the agent.

- Larry Day, B.A., M.A., Ph.D., is a former foreign correspondent, newspaper reporter and journalism professor. He has written humorous fiction—sometimes intentionally—all his life.

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The sea seduces at tropical Tortola

By Anne Kazel-Wilcox
www.TravelMuse.com

Tortola, the capital of the British Virgin Islands (BVI), is all about enjoying the Caribbean Sea. The island is hugely popular as a base for chartering sailboats, is renowned for pristine scuba-diving reefs and draws surfers from all over the world to visit its north shore's perfect waves. When visitors dry off from ocean fun, they can explore a lush, volcanic island characterized by steep, hilly roads with enough twists and turns to make one dizzy, but with nearly every turn unveiling yet another exquisite white, crescent-shaped beach to enjoy on your Caribbean vacation.

USVI NEIGHBOR

Tortola, which means "land of turtle doves" in Spanish, is situated just northeast of the U.S. Virgin Islands (USVI), collectively forming the Virgin Islands archipelago "discovered" by Christopher Columbus. Amerindians/Pre-Columbians actually first settled the BVI in 600 B.C.; the islands were more recently occupied by the Dutch, followed by the British, with BVI officially becoming a British self-governing territory in 1967.

Visitors to Tortola typically arrive either via ferries from the USVI (Native Son or Road Town Fast Ferry) or via air, primarily through San Juan. Hotels and charter boats are about 15 to 45 minutes by taxi from the arrival points.

SAILING HAVEN

Tortola serves as the northern backbone to Sir Francis Drake Channel, a swath of water that cuts through the middle of the long BVI chain, the islands on each side buffering the channel for easy passage, hence its status as a sailing haven. Most BVI charters are picked up from Tortola bases such as at Nanny Cay Marina, a naturally sheltered marina with restaurants, boutiques, provisioning and more.

Nanny Cay Village within the marina offers luxury villas, starting at \$2,000 for a minimum five-night stay, a perfect respite before embarking on one's sea legs, while Nanny Cay Hotel offers more modest accommodations; rates for doubles start at \$120 per night in the summer season (May 1 to Oct. 31), \$180 per night in the winter (Nov. 1 to April 30).

Favorite sailing destinations around Tortola include the natural wonders of The Baths on Virgin Gorda, where huge granite boulders form caverns and grottos along the beach's edge. Jost Van Dyke, the most popular day

trip destination, is renowned for its beach bars like Foxy's and a casual feel that's the antithesis of contrived Caribbean settings. The Bight, a bay at Norman Island, is a very popular anchorage, once a hideout for swash-buckling pirates and now home to Willy T, a floating bar/restaurant, and caves nearby through which visitors can snorkel or dive. The list of gorgeous sailing spots goes on.

CARIBBEAN'S MOST PRIZED SHIPWRECK

Long known for some of the prettiest reefs and the most famous shipwreck in the Caribbean, Tortola also boasts many prized mooring spots that are also great for Caribbean diving. The wreck of the Royal Mail Ship (R.M.S.) Rhone sank in a fierce hurricane off of Salt Island in 1867. At the time, it was a custom to strap in passengers to keep them from falling from their bunks, resulting in all perishing in the hurricane but one lucky Italian and some crew.

The ship's remains are amazing to view, scattered over a football-size field with the colorfully encrusted bow, crow's nest and even the Italian's "lucky" porthole all teaming with fish. Blue Water Divers gives a thorough guided tour of the wreck site. A single-tank dive starts at \$70.

Another favorite dive site is Santa Monica rock near Norman Island with tons of ledges and pinnacles playing home to eels, octopus, enormous crabs and graceful eagle rays. Near to that is Angelfish Reef where you may spot an elusive seahorse and just about every other Caribbean underwater creature imaginable. Fort Recovery Beachfront Villas (standard suites start at \$210 per night) and Nanny Cay Village are both convenient to diving.

FULL MOON PARTIES

When the sun's gone down, the north shore of Tortola also offers some of the island's liveliest restaurants and nightlife. Bomba Shack by Sebastian's is infamous for full moon parties that draw hundreds to the quirky seaside bar where donated patron panties hang from the ceiling. Close by is Cane Garden Bay, home of a gorgeous beach and popular beachside restaurant/bars like Myett's and Quito's. Or, many visitors make the short trek to Jolly Roger on the west end of Tortola, which is always lively.

MORE TORTOLA ACTIVITIES

So what else is there to do on the island? The main town, Road Town, is not particularly well suited for tourists, and instead is aimed more



Tortola is a popular port for ships of all sizes in the British Virgin Islands.

at business such as offshore banking, which is a staple of the BVI economy. However, the French bistro in town, Le Cabanon, is good for fine dining and the Sky Bar, a quarter mile above town, offers wonderful sunset views.

Other touring highlights on Tortola include a hike atop Sage Mountain, a national park featuring the highest peak on the island (1,716 feet) with great vistas and bird watching; a visit

to the Callwood Rum Distillery in Cane Garden Bay where rum is produced much the same as 200 years earlier; or a swim with the dolphins at Dolphin Discovery near Road Town.

Vacation Planning - British Virgin Islands Tortola:

<http://www.travelmuse.com/articles/bvi/top-tortola-attractions>.

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Dogs can use human insulin

QUESTION: Can you use human insulin for dogs? - K.T., Cyberspace

ANSWER: The short answer is yes. Human insulin is not necessarily the best choice for dogs, however, explains Dr. Louise Murray, an internal medicine specialist and director of medicine at the ASPCA's Bergh Memorial Animal Hospital in New York City.



Steve Dale

If you'd asked this question a few days earlier, Murray says, her answer for the insulin of choice for diabetic dogs would have been a product called Vetsulin. "It's made for dogs and is the closest thing to a real canine insulin replacement. Dogs generally do well on it, though all dogs are different, so choices are important."

As I was interviewing Murray, the U.S. Food and Drug Administration Center for Veterinary Medicine issued a warning Nov. 3 about using Vetsulin due to problems with the product (having varying amounts of crystalline zinc insulin in the formulation), which may cause a delay of onset and duration of activity. This instability can be dangerous, resulting in unpredictable glucose fluctuations. Pet owners using Vetsulin are encouraged to call their veterinarians, and perhaps transition to another insulin product until further notice. <http://www.chicagonow.com/blogs/steve-dale-pet-world/2009/11/stop-using-vetsulin-on-diabetic-pets-contact-your-veterinarian.html>

Murray, author of "Vet Confidential: An Insider's Guide to Protecting Your Pet's Health" (Ballantine Books, New York, NY; \$25), says the second choice insulin used in dogs is Levemir, which is, in fact, a specific type of human insulin.

The concern is that you may be considering using your own human

insulin for your dog and letting an insurance carrier pick up the tab. Ethically, I couldn't support that. But honestly, it could work. Keep in mind that different insulin products have a range of effectiveness for individual dogs. If you have your mind set on this approach, be sure to tell to your veterinarian and watch your dog closely for any changes or signs of hyperglycemia (increased thirst, increased urination, weight loss and lethargy) or hypoglycemia (disorientation, unsteadiness, weakness and seizures).

QUESTION: We adopted some goldfish at our school. They all died but one, which now has some black parasite growing on its head. Or is it more like an ammonia burn? Any suggestions on treatment? - K.D., Chicago, IL

ANSWER: "Most of the time when there's a mass die off, the problem is the water quality," says William Hana, collection manager of quarantine at the Shedd Aquarium in Chicago. "I don't know what the black spot is. Ammonia level is certainly a concern; you want that to be as close to zero as possible. But I don't know about an ammonia burn. And parasites would generally be white spots, not black spots."

Hana suggests taking the surviving fishy to an aquarist who understands how to identify fish disease and parasites, or a veterinarian who treats fish. Take extra tank water with you. When a fish veterinarian asks for a "sample," he won't hand you a tiny cup; he's looking for a water sample.

(Write to Steve at Tribune Media Services, 2225 Kenmore Ave., Suite 114, Buffalo, NY. 14207. Send e-mail to PETWORLD@STEVE DALE.TV. Include your name, city and state.)

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WORD OF WISDOM

In a free society the state does not administer the affairs of men, It administers justice among men who conduct their own affairs.

- Walter Lippmann



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Lamb stew can be prepared in a jiffy

By Wolfgang Puck

Tribune Media Services

Especially during the colder months, I always love a great stew. And it's not hard to understand why.

Just imagine the ultra-tender, succulent, bite-sized pieces of meat, poultry, or seafood, all swimming in flavorful liquid. Every spoonful offers soul-satisfying pleasure. The aromas alone that fill the kitchen as a stew slowly cooks make my mouth water with happy anticipation.

But let's be honest. Achieving an ideal stew usually takes time, something most of us lack in the busy rush of our lives not only on weekdays but often weekends as well. Who can take several hours out of the day to cook stew?

My answer is that anyone and everyone can make stew quickly and easily—if they have a pressure cooker.

Now, don't let those last two words make you anxious. The rumbling, hissing, scary-looking pressure cookers our parents and grandparents used are things of the past. Today's pressure cookers are safe, quiet, easy, and foolproof. (Though you still should carefully read and follow the instructions that come with yours for the best, safest results.)

Use a pressure cooker and you can have a delicious main course like my Moroccan Lamb Stew ready to serve in just about an hour, start to finish. (That doesn't include leaving the lamb in the refrigerator for several hours to marinate in its spice coating, an optional step that will deepen the already excellent flavor.)

Why do I feature lamb in this recipe? Mild, sweet, and just slightly gamey, it's an ideal meat for robust cold-weather eating. Boneless lamb

shoulder, used in this recipe, is relatively inexpensive and widely available in markets, often already cut into chunks for stewing. You could also use lamb shanks. Or substitute a good stewing cut of pork or beef if you prefer.

Speaking of substitutions, you can easily transform the nationality of the recipe itself. Replace the cumin with chili powder and the dried fruit with drained canned hominy, for example, and you have a Mexican stew. Or leave out the cumin, add more garlic and some oregano, and substitute pitted black olives and sun-dried tomatoes for the fruit and the stew becomes Italian.

You can even change how you cook it. If you don't want to use a pressure cooker, prepare the stew in a Dutch oven, cooking it in a 325 degrees F. oven until the lamb is tender, 1-1/2 to 2 hours, adding the dried fruit for the last 30 minutes or so. Or use a slow cooker, cooking the stew for about 4 hours on the high-heat setting or 8 hours on the low-heat setting.

Any way you make it, I promise you the results will be exactly what you want to eat for an autumn-into-winter dinner you'll love.

MOROCCAN LAMB STEW

Serves 4 to 6

2 pounds boned and trimmed lamb shoulder, cut into 2-inch pieces

Salt

2 teaspoons ground cumin

Freshly ground black pepper

1 teaspoon chopped fresh thyme leaves

1/4 cup olive oil

1 large onion, chopped

1 large organic carrot, peeled and

diced

1 organic celery stalk, diced

2 large garlic cloves, sliced

1 teaspoon chopped fresh rosemary leaves

1 cup dry red wine

2 cups organic chicken broth or beef broth

6 ounces peeled, seeded, and chopped tomatoes

1/4 pound pitted prunes

1/4 pound dried apricots

1/2 cup blanched almonds, lightly toasted

Steamed rice or couscous, for serving

Put the lamb in a large mixing bowl. Sprinkle with 1 teaspoon salt, 1 teaspoon cumin, 1 teaspoon pepper, and the thyme. Toss the lamb and knead in the spices. If time allows, transfer the meat to a resealable plastic food storage bag and refrigerate for several hours or overnight.

In a large, heavy skillet, heat 2 tablespoons of the oil over high heat. Working in batches to avoid crowding, brown the lamb on all sides, 5 to 7 minutes per batch. As the lamb is browned, transfer it to a pressure cooker.

Pour off all fat from the skillet and add the remaining oil. Reduce the heat to medium, add the onion, carrot, celery, and 1/2 teaspoon salt, and saute until the onion is tender and has colored slightly, about 5 minutes, stirring frequently with a wooden spoon and scraping the skillet to deglaze the pan deposits. Add the garlic, remaining cumin, and the rosemary, and stir for 1 minute; then, add the tomato and continue

to cook until the tomato has given up a lot of its juices or begins to stick to the skillet, about 5 minutes.

Stir in the wine, raise the heat, and bring to a boil, scraping the bottom and sides of the skillet to deglaze the pan deposits. Pour and scrape the contents of the skillet into the pressure cooker. Add the broth, 1 teaspoon salt, and 1/2 teaspoon pepper.

Secure the pressure cooker lid, set the cooker to "Meat" or an equivalent setting (see the manufacturer's instruction book), and bring the pressure to high. When high pressure has been reached, set a timer for 22 minutes.

When the cooking time is up, turn off the heat and let the pressure return to normal on its own, without using the quick-release valve. When the pressure has returned to normal, use the quick-release valve to make sure all the pressure has been released; then, carefully remove the lid. The lamb should be fork tender. If it is not, bring back to pressure for 5 minutes, turn off the pressure cooker, let the pressure return to normal, and proceed with the recipe.

Transfer the meat to the skillet or a casserole. Using a hand blender, puree the sauce. Scrape into the skillet or casserole holding the meat. Add the prunes and apricots and bring to a simmer. Cover and simmer gently until the dried fruit is soft, about 15 minutes. Taste the sauce and adjust the seasonings. Sprinkle with almonds and serve with rice or couscous.

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* An online form is available at www.seniormonthly.net/directory.html

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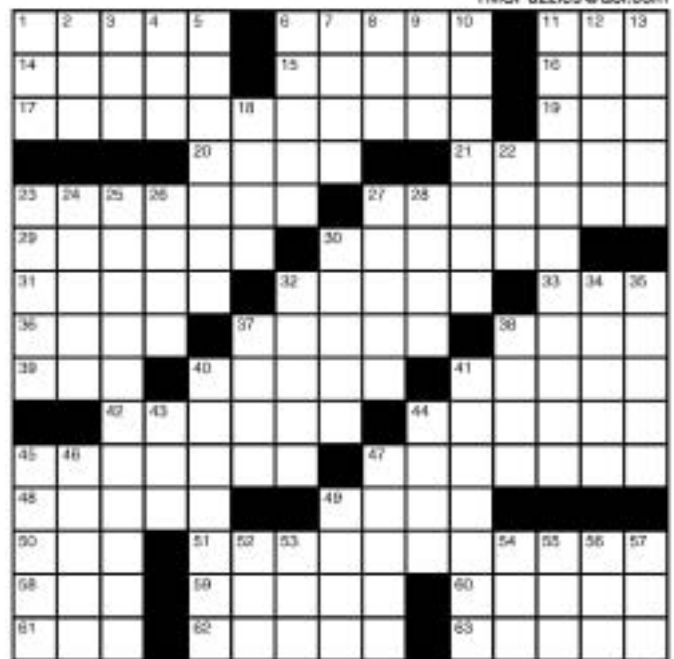
- 1 Come together
- 6 Surgical beam
- 11 PC key
- 14 Thin-shelled nut
- 15 Accustom
- 16 Barcelona bravo
- 17 All inclusive, nautically
- 19 Shoofly ___
- 20 Trail grooves
- 21 Trencherman
- 23 Romantic liaisons
- 27 Zones or tracts
- 29 Payola
- 30 Really excellent
- 31 Buenos ___
- 32 Ardent in the extreme
- 33 Galley blade
- 36 Examine
- 37 Orlando team
- 38 Caesar's penultimate words
- 39 Guess: abbr.
- 40 Number of Roman hills
- 41 Stage
- 42 Ragged piece of cloth
- 44 Colorful wrap
- 45 Searched high and low
- 47 Chromosome sets
- 48 Dot lead-in
- 49 Dune material
- 50 Last of a collection?
- 51 Queue order
- 58 Dog tags, e.g.
- 59 Hair-raising
- 60 Scalawag

61 ___ on your life!

- 62 Elements in a procedure
- 63 Mimicry

DOWN

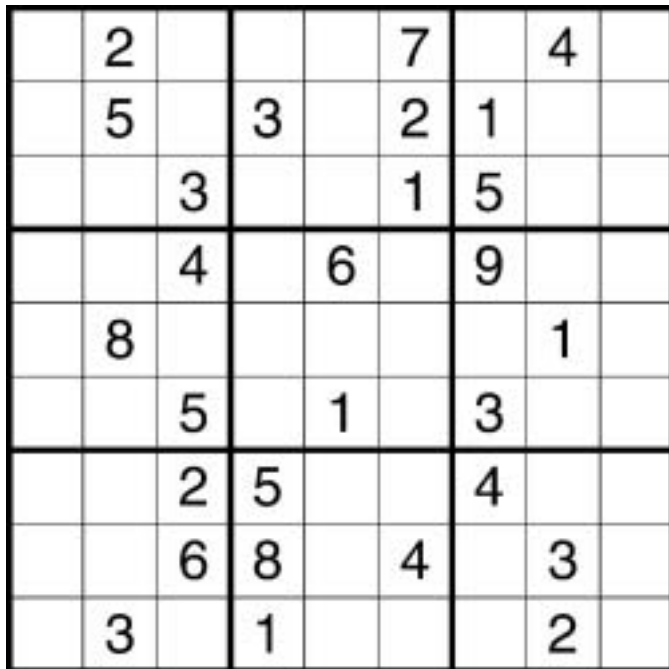
- 1 Raises, as stakes
- 2 Butterfly catcher
- 3 Cool down
- 4 Highland cap
- 5 Ways in
- 6 Itemizations
- 7 Formicary residents
- 8 Take to court
- 9 Make a blunder
- 10 Failed to keep a promise
- 11 Throughout
- 12 Green card holder
- 13 Sudsy orders
- 18 Something shared
- 22 Show on the tube
- 23 Die down
- 24 Fast-food order
- 25 Choice arrangement
- 26 Help with a holdup
- 27 Harp on
- 28 Larger-than-life
- 30 More astute
- 32 Spoke wildly
- 34 Make amends
- 35 Ladder features
- 37 Deal (out)
- 38 Continental currency
- 40 Aerial attacks
- 41 Mythical box-opener
- 43 Arctic sea bird



By Diane C. Baldwin
Columbia, MD

- 44 Transmitted
- 45 El Cid's land
- 46 Housing option
- 47 Bill of Microsoft
- 49 Small piece
- 52 Dampen hemp
- 53 Mining product
- 54 Art Tatum's jazz style
- 55 Become mellow
- 56 Mongrel
- 57 Bogart movie, "___ Largo"

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SUDOKU: Fill in the grid so that every row, every column and every 3x3 box contains the digits 1 through 9 with no repeats.

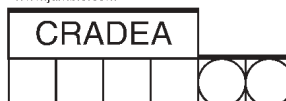
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JUMBLE

Unscramble these four Jumbles, one letter to each square, to form four ordinary words.

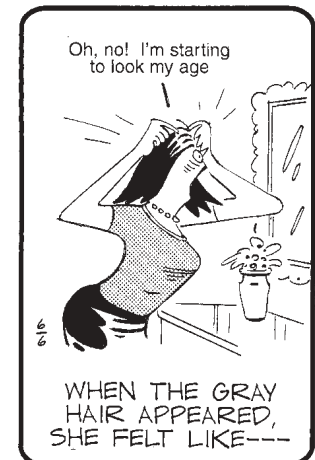


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Print answer here: "□ □ □ □ - □ □ □ □"

FINAL SCRAMBLED WORD GAME
by Henri Arnold and Mike Argirion



Now arrange the circled letters to form the surprise answer, as suggested by the above cartoon.

BRIDGE

Which game?

By Omar Sharif and Tannah Hirsch

Neither vulnerable. North deals.

NORTH
 ♠ A Q 6 2
 ♥ K J
 ♦ J 8 4
 ♣ K 10 8 2

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

SOUTH
 ♠ 10 8 5 4 3
 ♥ Q 2
 ♦ K Q 9 5
 ♣ A 7

The bidding:
 NORTH EAST SOUTH WEST
 1C Pass 1S Pass
 2S Pass 4S Pass
 Pass Pass

Opening lead: Ace of H

South, declarer at four spades, made his contract with an overtrick. Did he play the hand well or badly? The auction was standard. Once his spades were supported, South could hardly bid less than game in spades.

West led the ace of hearts and another, won in hand by the queen after declarer jettisoned the king under the ace. A trump to the queen held and, when both defenders followed to the ace, declarer claimed 11 tricks, conceding a trick to the ace of diamonds. What's your opinion of declarer's play?

Declarer played the hand very badly or quite well, depending on whether the game was rubber bridge or duplicate. The contract is always safe if trumps are 2-2. The only 3-1 distribution declarer can guard against if West has the long trumps is if East's singleton is the king. Correct technique is for declarer to lead a trump to the ace and, if nothing happens, return to hand with the ace of clubs and lead another spade up to the queen, covering any trump West produces. That guarantees 10 tricks.

But that's a terrible way to play the hand at duplicate. The odds on the king being the singleton are 3-1 against whereas making an overtrick via a finesse works whenever trumps are 2-2 with the king onside, and lands the contract against any singleton in the East hand except the king. Take the finesse at duplicate.

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Jumbles: PUTTY KNACK TINGLE ARCADE

Answer: When the gray hair appeared, she felt like - "DYE-ING"

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SUDOKU SOLUTION

6	2	1	9	5	7	8	4	3
8	5	9	3	4	2	1	6	7
7	4	3	6	8	1	5	9	2
2	1	4	7	6	3	9	5	8
3	8	7	4	9	5	2	1	6
9	6	5	2	1	8	3	7	4
1	7	2	5	3	6	4	8	9
5	9	6	8	2	4	7	3	1
4	3	8	1	7	9	6	2	5

NOSTALGIA NOTEBOOK

December 1939

Births

- December 1:** Dianne Lennon, American singer (The Lennon Sisters)
- December 2:** Harry Reid, U.S. Senate Majority Leader
- December 17:** Eddie Kendricks, American singer (The Temptations)
- December 27:** John Amos, American actor (*Good Times*)

Events

- December 2:** La Guardia Airport opens for business in New York City.
- December 14:** The League of Nations expels the USSR for attacking Finland.
- December 15:** The film *Gone with the Wind*, starring Vivien Leigh, Clark Gable, Olivia de Havilland and Leslie Howard, premieres at Loew's Grand Theatre in Atlanta, Georgia. It is based on Margaret Mitchell's best-selling novel. It is the longest American film made up to that time (nearly four hours).
- December 27:** The 1939 Erzincan earthquake in Eastern Anatolia, Turkey, kills 30,000.

December 1949

Births

- December 4:** Jeff Bridges, American actor
- December 7:** Tom Waits, American singer, composer, and actor
- December 11:** Teri Garr, American actress
- December 15:** Don Johnson, American actor
- December 16:** Billy Gibbons, American guitarist (ZZ Top)
- December 17:** Paul Rodgers, British rock singer (Bad Company)
- December 22:** Robin Gibb, British rock musician (The Bee Gees)
- December 25:** Sissy Spacek, American actress

Events

- December 8:** The government of the Republic of China finishes its evacuation to Taiwan.
- December 15:** A typhoon strikes a fishing fleet off Korea, killing several thousand.
- December 16:** Sukarno is elected president of the Republic of Indonesia.
- December 30:** India recognizes the People's Republic of China.

December 1959

Births

- December 13:** Johnny Whitaker, American actor (*Family Affair*)
- December 30:** Tracey Ullman, English/American comedian and actress
- December 31:** Val Kilmer, American actor

Events

- December 1:** Cold War - Antarctic Treaty: 12 countries, including the United States and the Soviet Union, sign a landmark treaty, which sets aside Antarctica as a scientific preserve and bans military activity on that continent (the first arms control agreement established during the Cold War).
- December 2:** Malpasset Dam in southern France collapses and water flows over the town of Frejus, killing 412.
- December 13:** Three years after its first telecast, MGM's *The Wizard of Oz* is shown on television for only the second time, but it gains an even larger viewing audience than its first television outing, spurring CBS to make it an annual tradition.

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Contraindications: The device is contraindicated in patients with: an allergy to titanium or titanium alloy; spinal anatomy or disease that would prevent implantation of the device or cause the device to be unstable in situ, such as: significant instability of the lumbar spine, e.g. isthmic spondylolisthesis or degenerative spondylolisthesis greater than grade 1.0 (on a scale of 1 to 4), an ankylosed segment at the affected level(s), acute fracture of the spinous process or pars interarticularis and significant scoliosis (Cobb angle greater than 25 degrees); cauda equina syndrome defined as neural compression causing neurogenic bowel or bladder dysfunction; diagnosis of severe osteoporosis, defined as bone mineral density (from DEXA scan or some comparable study) in the spine or hip that is more than 2.5 SD below the mean of adult normals in the presence of one or more fragility fractures; and active systemic infection or infection localized to the site of implantation.

Warnings: The X-STOP implant must be placed in the concavity between the spinous processes. Posterior positioning of the implant may result in dislodgement. If correct placement of the implant cannot be achieved due to variant anatomy, the surgeon should consider aborting the procedure because incorrect placement may result in device dislodgement, particularly if the patient experiences a traumatic event.

Precautions: Radiological evidence of stenosis must be correlated with the patient's symptoms before the diagnosis can be confirmed; if the spinous processes at the affected level are not distracted in flexion, the X-STOP system may not be indicated; the safety and effectiveness of the X-STOP device has not been studied in patients with the following conditions: axial back pain without leg, buttock or groin pain, symptomatic lumbar spinal stenosis at more than 2 levels, prior lumbar spine surgery, significant peripheral neuropathy, acute denervation secondary to radiculopathy, Paget's disease, vertebral metastases, morbid obesity, pregnancy, a fixed motor deficit, angina, active rheumatoid arthritis, peripheral vascular disease and advanced diabetes or any other systemic disease that may affect the patient's ability to walk; surgeons should not implant the X-STOP implant until receiving adequate training regarding surgical technique because inadequate training may result in poor patient outcomes and/or increased rates of adverse events; and a stress fracture of the spinous process may occur if strenuous physical activity is resumed too soon postoperatively.

Potential Adverse Events: The following potential adverse events may occur as a result of interspinous process decompression with the X-STOP system; some of these adverse events were reported in the Pivotal Clinical Trial. X-STOP system related: implant dislodgement/migration; implant not positioned correctly; fracture of the spinous process; additional surgery, which could include removal of the X-STOP implant; foreign body reaction; mechanical failure of the device; failure of the device/procedure to improve symptoms and/or function. Surgery Related: reactions to anesthesia; myocardial infarction; infection; blood vessel damage/bleeding; deep vein thrombosis; hematoma; pneumonia; neurological system compromise; stroke; nerve injury or spinal cord damage; paralysis; thrombus formation; wound dehiscence or delayed healing; pain/discomfort at the operative site; and death.

Note: Medication or additional surgery may be necessary to correct some of these potential adverse events.

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