Alternative Medicine for Pets: A **Personal Look**

By Cathy Dausman



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Midas greets Jamie Peyton, DVM, before acupuncture treatment.

He's a long-legged 8-year-

old, weighs 85 solid pounds, eats enthusiastically, sleeps (sometimes

idas is our Golden Retriever. red coated, gentle soul who lived to the age of 13 and died with quiet dignity. This dog, our current companion, must be nature's payback in snores) with great abandon, and a perverse Murphy's Law sort of loves to chase squirrels. We weren't way. He does not have the golden's laid out our dog's many options: ra-"soft mouth." Our hairy beast is teroverly concerned when he developed a limp last fall in his front left ribly stubborn and overly physileg (serves him right for constantly cally. He once made an off-leash vaulting over our backyard slope), mad dash toward my husband, but x-rays showed he had cancer, head-butted his master's leg, and most likely osteosarcoma, or OSA. broke it in two places. No malice With or without treatment, expected aforethought; just "I'm very glad to life span for a dog with that diagno- see you!"

sis is 6 to 18 months. Our family has kept Golden Re- and treatment, cancer in humans anti-inflammatory drugs and nartrievers for 20 years. Our first was a and animals is still a diagnosis that cotics.

Photos Cathy Dausman

stuns. And how do you explain a life-shortening diagnosis or soothe a four legged friend while treatments ensue?

Veterinarians at two hospitals diation and chemotherapy, limb amputation and chemotherapy, or limb spare surgery (damaged bone is removed and the remaining ends splinted between metal plates). Palliative care options included monthly Pamidronate (a human osteoporosis drug) infusions, or sim-Despite great strides in research ply treating symptoms with ... continued on page B11





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Living fully after a fall...





Vanessa Valerio, RN

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Questions with home care?

DEAR VANESSA,

My uncle recently had a fall in his home. He is in his late sixties and luckily did not greatly injure himself. He does use a cane sometimes to steady himself because of an old knee injury but otherwise is in fairly good health. I am worried that he may have another fall where he might not be so lucky. Are there any precautions we can take to lessen the chance of this happening again? How common is it for elderly to fall and is he more likely now to fall again? Are there any other measures we can take to ensure his safety in the home when we are not able to be with him? Thank you for your time and advice. MARGUERITE

VP and COO for Patient Care DEAR MARGUERITE,

I hope that your uncle has not unnecessarily restricted his activities because of fear of falling. Using a cane for added stability helps. It's good that he is in fairly good health but here are a few quick facts that you need to be aware of: the risk of falling increases with age (and is greater for women than for men); two-thirds of those who experience a fall will fall again within six months; and at least one-third of all falls in the elderly involve environmental hazards in the home.

The causes of falls are known as risk factors. The five key risk factors of falls among older adults include: osteoporosis; lack of physical activity; impaired vision; medications; and environmental hazards. Osteoporosis is a condition wherein bones become more porous, less resistant to stress, and more prone to fractures. Encourage your uncle to eat or drink sufficient calcium, get sufficient vitamin D to enhance the absorption of calcium, and regularly do weight-bearing exercises. Failure to exercise regularly results in poor muscle tone, decreased strength, and loss of bone mass and flexibility; these contribute to falls and the severity of injury due to falls. Engage your uncle regularly in exercises like walking and swimming, and introduce him to wearing proper-fitting supportive shoes with low heels or rubber/nonskid soles. Cataracts and glaucoma alter older people's depth perception, visual acuity, peripheral vision and susceptibility to glare, and these limitations hinder their ability to safely navigate their environment. Regular checkups by his opthalmologist, using color and contrast to define balance-aiding objects in the home, adding contrasting color strips to first and last steps to identify change of level, and cleaning eyeglasses often are preventive measures. Sedatives, anti-depressants, and anti-psychotic drugs can contribute to falls by reducing mental alertness, worsening balance and gait, and causing drops in systolic blood pressure while standing. Know the common side effects of all medications that your uncle is taking, and talk with his physician or pharmacist about using the lowest effective dosage. Does your uncle drink? If he does, advise him to limit intake of alcohol as it may interact with his medications. The most common hazard for falls is tripping over objects on the floor. Other factors include poor lighting, loose rugs, lack of grab bars or poorly located/mounted grab bars, electrical cords, raised doorway thresholds, slippery floors, clutter, and unsturdy furniture. Conduct a walkthrough of your uncle's home to identify problems that may lead to falling. Consider having an occupational therapist do a walk-through of your uncle's residence; he or she is trained to identify risk factors or spot the hazards that our untrained eyes miss, and recommend appropriate actions.

Be proactive. Encourage your uncle to be prepared to handle a fall. Does he wear a medical alert tag or bracelet? Keep emergency numbers by the phone and set his phone up to include local numbers for the emergency medical services, police or sheriff, and fire department. Purchase a cordless phone so that he doesn't have to rush to answer it. Make sure you and his family and friends know how to reach his health care provider, what drugs or foods he's allergic to, and what medications he is taking.

A lack of knowledge about risk factors and how to prevent them contributes to many falls; the more risk factors to which your uncle is exposed, the greater the probability of a fall and the more likely the results the next fall will threaten his independence (the most profound effect of falling). By maintaining an active, healthy lifestyle and making his home safe, your uncle can still live life to the fullest. VANESSA

Got Questions & Answers about Home Care is written by Vanessa Valerio, RN, VP and COO for Patient Care at Home Care Orinda. If you would like more information about senior care and how home care can help, please email Vanessa Valerio at vanessav@careindeed.com, call her at (925) 317-3080 or visit their website at www.homecareorinda.com/.