Chances are you’ve already experienced some tenderness, aching or pain in your hips or knees from arthritis. You might even have felt it long before you turned 65. But when pain gets so bad that it keeps you up at night or makes it difficult to go to the grocery store then you need a doctor’s help, and fast.

“Sometimes pain medication or cortisone shots is all patients need for pain relief,” says Orthopedist Charles Turek, M.D. “But when patients see me and they’re limping or having trouble getting in and out of a chair then we take a closer look.”

Who Needs Joint Replacement

Dr. Turek looks at x-rays of the affected joint and assesses a patient’s functional impairment. That's your ability to complete what physical therapists call activities of daily living.

“We need to have a history and a physical examination to give us an idea of how a joint is functioning,” says Dr. Turek. “Some people have minimal arthritis which doesn’t look too bad on x-ray, yet they have a lot of trouble getting around. Other people with terrible looking x-rays get around well.”

Dr. Turek treats some patients with knee or hip arthritis for years using nothing more than pain medication and injections before he recommends joint replacement.

“What you have with arthritis is rough surfaces grinding on each other,” says Dr. Turek. “Joint replacement replaces rough surfaces with smooth surfaces so that it's not grinding anymore. The operations are very good at alleviating pain and can really make a difference in a person’s life.”

Surgery and Recovery

Before joint replacement surgery a medical clearance is required from each of a patient’s doctors. Patients and their family members also take a class where a physical therapist explains what happens in the hospital.

“Speed of recovery really depends on person’s motivation and their physical strength and coordination,” says Dr. Turek. “Once the patient is over the acute discomfort we may send them to a rehabilitation unit for a few days. Some patients, especially the elderly, may need up to ten days of rehab. We want the patient to feel that they are stable on a walker, crutches or whatever they’re using for the remainder of their recovery.”

The average patient may use a walker at home for two to four weeks before transitioning to a cane for another two to four weeks, according to Dr. Turek. Within three months most patients no longer need any assistant devices.

“Patients should not be afraid of this surgery or feel that they’re too old for it. There is no too old for this procedure,” says Dr. Turek. “Hip or knee replacement can make a very significant difference in seniors’ lives and their ability to function and care for themselves.”

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This year, an estimated half million Americans will lose their lives to cancer, and three times that many will be diagnosed with this devastating illness. Many of these cancer victims are seniors.

“We see a whole variety of different cancers in seniors,” says Oncologist Dr. Hugo Hool. “Some of these include skin cancer (squamous or melanoma), prostate cancer, colon cancer, lung cancer, breast cancer and blood cancers.”

As scary as cancer is, Dr. Hool wants every senior to understand that cancer is not a death sentence - even if you’re well over 70.

**Warning Signs of Cancer**

“Many seniors ignore the early warning signs of cancer. They believe that there’s nothing they can do about cancer, or maybe they’re too old to do anything about it,” says Dr. Hool. “However, they’re often very surprised that there is something we can do about it, especially in the early stages. And treatment is very well tolerated, even by older seniors. The clinical benefit in those over the age of 70 is just as great as those under 70.”

Chances of successfully curing your cancer increase the earlier you seek treatment. That’s why it’s important for you to understand the early warning signs and symptoms of cancer.

“I would advise any senior to be on the lookout for fatigue, weight loss or lack of appetite. Any skin changes or discolorations, unusual bleeding or pain,” says Dr. Hool. “Even a cough that does not go away over a period of time. Any sudden change in your health is cause for concern.”

If you experience any of these warning signs of cancer, Dr. Hool encourages you to make an appointment with your primary care physician as soon as possible to discuss your symptoms.

**Screening for Cancer**

“Generally it’s the primary care physician that takes a closer look at a patient’s symptoms and moves them on to a specialist for further evaluation if necessary,” says Dr. Hool. “They’re very helpful in deciding if the problem is a common illness or something more serious like cancer. That’s why it’s very important for every senior to see their primary care physician on a regular basis.”

During your regular visits with your primary care physician you should receive routine cancer screenings such as:

- A fecal occult blood test, flexible sigmoidoscopy, colonoscopy or barium enema to detect colon cancer.
- Mammography and a clinical breast exam to detect breast cancer in women.
- A Pap test and pelvic exam to detect cervical and vaginal cancers in women.
- A PSA blood test and digital rectal exam to detect prostate cancer in men.

**Preventing Cancer**

Besides regular screenings, your biggest safeguard against cancer is improving your general health. As part of Cancer Control Month Dr. Hool encourages you to work with your doctors to control your blood sugar, blood pressure, cholesterol levels and weight. Keeping each within healthy range as well as eating a balanced diet and exercising regularly can dramatically reduce your risk of developing cancer.
“Scale Down” Secrets of Losing Weight & Keeping It Off!

Maintaining a healthy weight is especially important for seniors. As you get older, your body’s ability to metabolize food slows down. Suddenly, it’s easier to pack on pounds and harder to lose them and keep them off.

The National Institute on Aging Reports that 73% of Americans between the ages of 65 and 74 were considered overweight in the last decade versus only 57% in 1980.

But there’s good news! Getting fit and staying that way is possible if you learn why most diets fail the seniors who try them.

What’s the Best Diet?

“Basically, almost any diet plan will work for weight loss.” says James O. Hill, PhD, director of the Center for Human Nutrition at the University of Colorado in Denver. “But the problem is that almost none of them work for weight loss maintenance.”*

Weight loss maintenance requires learning how to eat once you’re off the diet so you can maintain your new, healthy weight. This is hard to do on your own. That’s why Torrance Memorial Medical Center created their “Scale Down” Program.

It’s the foundation of any good diet. But while most diets end here, Scale Down provides extra help to keep the weight off with access to behavioral psychologists, exercise specialists, experts in meditation and a full year of free support group meetings.

Change the Way You Think About Weight Loss

“If you want to lose weight successfully you have to do more than change the way you eat,” says Cathy Hargrove. “You have to change the way you think about weight loss and you need support.”

The Scale Down program accepts 25 people per session. Each session is divided into two phases. The first phase, the weight reduction phase, consists of weekly 1 ½ hour meetings over 14 weeks. The second phase, the weight maintenance phase, consists of weekly support group meetings for the next 9 months.

For more information on the Scale Down program, including cost and start dates for the next session, contact Cathy Hargrove at 310-784-4897.

*Lose Weight Without Sacrificing Your Favorite Foods

“We teach you how to bring your favorite foods back into your life and enjoy them appropriately,” says Cathy Hargrove, Scale Down’s manager. “Once you start dropping pounds you feel really excited and are ready to learn new habits to keep the weight off.”

Scale Down participants lose an average of 22 pounds by following an eating plan developed by registered dieticians.

The plan includes:

- nutritional supplements
- portion control
- tips on making healthier food choices.

Tuscan Kale Salad

Ingredients: (servings for 2)

- 2 cups Kale, cleaned, chopped
- 5 pc. Olives, sliced
- ½ cup Artichoke hearts, marinated, chopped
- 1 tbsp. Breadcrumbs, plain
- 1 tsp. Parmesan cheese
- 1 clove Garlic, pressed
- 5 pc Cherry tomatoes
- 2 Eggs, poached
- 1 slice Lemon, chopped

(Recipe continued on bottom of page 4)
**Tuscan Kale Salad - Directions**

1. Mix all the vegetables and Parmesan cheese together with two tbsp. of marinade from the artichokes.

2. Prepare the poached eggs with water (at least 3-inches deep) and 1 tbsp. balsamic or apple cider vinegar.

3. Cook on medium low temperature around 160-180 °F.

4. When it’s ready, mix the breadcrumbs into the salad, place the eggs on the top and serve with a toast.

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**Health benefits of kale:**

Kale is a great anti-inflammatory vegetable. It’s low in calories, high in fiber, iron and vitamin K. Kale is also filled with powerful antioxidants that provide cardiovascular support and detoxification benefits. Kale also provides an ample supply of vitamin A and bone-building calcium.
As a Medicare Advantage Plan member who selected THIPA as your medical service provider, you enjoy access to the South Bay’s leading doctors and specialists, plus cutting edge medical care at Torrance Memorial Medical Center. Now you may also be eligible for additional medical coverage if you qualify as a “Medi-Medi”.

**What is a Medi-Medi?**
A “Medi-Medi” is a term that describes someone who qualifies for Medicare who also qualifies for Medi-Cal.

**Who is Covered?**
Medicare coverage is based on your age or disability, but Medi-Cal coverage is based on your income and asset levels. The Medi-Cal income level depends on your situation, whether you’re married or single, disabled or able-bodied. The asset level is up to $3000 for a couple or $2000 for a single person. Some assets are not considered such as your home, one vehicle or certain household goods and belongings.

**What is Covered?**
Medi-Cal has three programs that provide additional healthcare coverage for seniors with Medicare. Under these programs Medi-Cal provides varying levels of coverage for “medically necessary” health care such as physician visits, x-ray and lab tests, hospital and nursing-home care, home health care, certain prescription drugs excluded as a Medicare Part D benefit, medical equipment and devices, ambulance care and hospice care.

In each instance Medicare is the primary payer. In other words, your Medicare Advantage plan pays first and Medi-Cal is the secondary payer.

If you do qualify for Medi-Cal in addition to Medicare, you may also consider a Medicare Advantage Special Needs Plan or D-SNP. These plans have certain features that work very well for Medi-Medi seniors.

**What to Do**
If you believe you may qualify as a Medi-Medi, you can learn more about eligibility and the three Medi-Cal plans for seniors by logging onto [http://www.cahealthadvocates.org/low-income/medi-cal.html#qualify](http://www.cahealthadvocates.org/low-income/medi-cal.html#qualify). You may also call Senior Member Services Toll Free 866-568-4472 and ask for Loretta Morrow.

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**Did You Know?** You May be Eligible for Extra Medical Benefits

Every day, counseling makes a difference in the lives of people around the world. And it’s especially helpful for seniors.

“Seniors are living longer today and experiencing unique problems. They’re dealing with a loss of purpose after retirement and the loss of loved ones in addition to physical ailments,” says Psychologist Morris Gelbart, Ph.D. “Seniors are more likely to have higher levels of depression and anxiety than the general population.”

**Reduce Stress and Anxiety**
Many seniors often hide these feelings of worry, frustration, loneliness and anxiety from their friends, family and doctors.

If this sounds like you, consider talking to your primary care physician or to a THIPA psychologist or psychiatrist. This month is National Counseling Month and a time to recognize professional counseling can help you deal with:

- The death of a spouse, partner or friend
- Caring for a spouse with dementia
- Moving from your home
- Health problems
- Lack of social connections
- Sadness or grief around the holidays

**Prevent or Treat Depression**
Counseling is especially important for seniors who experience feelings of sadness or hopelessness lasting longer than one month. These feeling are often associated with depression.

“Depression is not a state of mind, it is a true illness,” says Psychiatrist Stephen Prover, M.D. “The good news is depression is very treatable at any age. Most older people have the skills to cope. If they’re treated they can do very well.”

**Avoid Substance Abuse**
Counseling is also important for seniors who may be “self-medicating” with prescription pain medication, anti-anxiety medication or alcohol. Instead, counseling can provide you with new behaviors or thought patterns that can help you deal more easily with daily challenges so you don’t need to rely on alcohol or drugs.
Senior Living NEWSLETTER
Are You Eligible for Extra Medical Benefits? Find Out Now
(See page 5 ...)

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Questions? Call the Member Services Team
1-866-568-4472 (Toll-Free)
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