OLLI'S SENIORS FOR SENIORS DOG ADOPTION PROGRAM MOVES INTO ITS SECOND YEAR

As OLLI's Seniors for Seniors dog adoption program approaches its one-year anniversary in January, a list of OLLI members who would like to adopt has been created, and the program organizers have now begun reaching out to additional animal rescue organizations in search of adoptable dogs.

The Leon County Humane Society in Tallahassee, Humane Societies and shelters in surrounding counties, local veterinarians, and assisted living facilities are among those organizations that have been added as the process of matching senior citizens with senior dogs moves forward. Humans reap many rewards by sharing their homes with pets. The benefits of pet ownership to seniors are well-documented through research. One study published in the Journal of the American Geriatrics Society, showed that seniors living independently with a pet tended to have better physical and mental health than those who do not. As cited in www.ParentGiving.com, a website about elder care issues, various studies have indicated that having a pet can help to lower blood pressure, relieve stress, combat loneliness, ease depression, encourage physical activity, and offer a sense of security to the pet owner. Have you thought about adopting a dog but would prefer an older pet to a puppy? Seniors for Seniors may be able to help
you locate and adopt your forever friend. The OLLI at FSU Seniors for Seniors initiative was launched in early 2018 in partnership with the Tallahassee Animal Service Center.

Our mission is to help OLLI members find senior dogs to bring into their hearts and homes. Each year, 5,000 dogs are brought to the Animal Service Center. Some are placed in foster care and eventually adopted, but 25 percent are euthanized. Many dogs are displaced when older owners move to elder care facilities or are unable to continue to care for them any longer. Dogs over eight years of age are often overlooked due to the higher demand for puppies. Yet, these senior dogs are often just what human seniors would love. The dogs are usually housetrained and calmer, and they may require less exercise. Some may have special needs. They are all looking for cuddles, love, and someone to bond with. By taking one of these pets into your home, you are also saving a life. (Ed. note: see the article that follows on the importance of avoiding loneliness.) If you are looking for that dog to love, are considering adopting or fostering, and/or would like assistance with navigating the application and meet-and-greet process, please let us know and we will add you to our contact list. Send an e-mail to Karyn Hornick at khornick1@comcast.net.

No commitment is required if you place your name on the list. For brochures, applications, and more information, please stop by the Seniors for Seniors table on January 25, 2019 at the Spring Showcase. We look forward to hearing from you!

ANOTHER REASON FOR OLLI'S IMPORTANCE: MASSIVE FSU STUDY CONFIRMS THAT LONELINESS INCREASES RISK OF DEMENTIA

BY: RON HARTUNG

A new Florida State University College of Medicine study involving data from 12,000 participants collected over 10 years confirms the heavy toll that loneliness can take on your health: It increases your risk of dementia by 40 percent.

The risk is across the board, regardless of gender, race, ethnicity or education — or whether you have regular social contact with friends and family. The study was published in the Journal of Gerontology: Psychological Sciences.

“We are not the first people to show that loneliness is associated with increased risk of dementia,” said Angelina Sutin, the principal
investigator on the study. “But this is by far the largest sample yet, with a long follow-up. And the population was more diverse.”

The Sutin team’s paper made use of the federally funded Health and Retirement Study, a longitudinal look at Americans 50 and older and their spouses. Participants reported on their loneliness and were also administered a cognitive battery every two years, up to 10 years after their reports of loneliness. During this time, 1,104 people developed dementia.

Participants who reported greater feelings of loneliness were more likely to develop dementia over the next 10 years. Individuals who feel lonely are likely to have several risk factors for dementia, including diabetes, hypertension and depression, and are less likely to be physically active and more likely to smoke. Even after adjusting for those shared risks, loneliness still predicted dementia.

“Lonely” can have many interpretations, said Sutin, an associate professor in the college’s Department of Behavioral Sciences and Social Medicine. Her team’s study referred to “the subjective experience of social isolation,” which is separate from actual social isolation.

“It’s a feeling that you do not fit in or do not belong with the people around you,” Sutin said. “You can have somebody who lives alone, who doesn’t have very much contact with people, but has enough — and that fills their internal need for socializing. So even though objectively you might think that person is socially isolated, they don’t feel lonely. The flip side is that you can be around a lot of people and be socially engaged and interactive and still feel like you don’t belong. From the outside it looks like you have great social engagement, but the subjective feeling is that you’re not part of the group.”

Sutin urges against blaming the victim for feelings of loneliness.

“People might say, ‘You’re lonely. Go make a friend,’” she said. “But it’s not that easy.”

There are significant long-term consequences to having these kinds of feelings. It’s not the individual’s fault or choice to be lonely.

“I think this study adds to the literature highlighting the importance of psychological factors and how individuals subjectively interpret their own situation,” Sutin said. “That’s equally important and separate from what we objectively measure. It also lends credibility to the idea of asking people how they feel about things — in this case, how they feel about their social interactions.”
There are a number of ways that loneliness may put one at risk for dementia. One way may be physiological, such as through higher inflammation — the body’s natural response to infection that can be harmful when it lasts a long time. A second way may be through behavior. People may cope with loneliness through behaviors that can damage the brain, such as heavy drinking or being sedentary. A third way is through lack of meaningful social interaction. Keeping the mind engaged in a meaningful way can promote cognitive health that provides the motivation and structure to help maintain cognitive functioning. In the end, Sutin said, loneliness is a signal that your social needs are not being met. And there are ways to counter that.

“Loneliness is a modifiable risk factor,” she said. “Most people might describe periods where they felt lonely and then periods where they didn’t feel lonely. So just because you feel lonely now, you don’t always have to feel this way.”

Sutin’s co-authors are Martina Luchetti, a research faculty member in Behavioral Sciences, and Antonio Terracciano, a professor in the medical school’s Department of Geriatrics.

The other co-author, Yannick Stephan, is from the University of Montpellier in France.

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The Pepper Institute on Aging and Public Policy – with support from the Claude Pepper Center, the College of Social Sciences and Public Policy, and Osher Lifelong Learning at FSU – sponsors weekly “Aging Today” segments on 88.9, WFSU-FM NPR. Airing each Tuesday at 3:04 p.m., the one-minute segments highlight critical aging-related trends, issues, and policies, with an emphasis on social science research. Here’s a recent Aging Today question:
WHY DO WOMEN TEND TO OUTLIVE MEN?

By Anne Barrett, Professor of Sociology and Director of Pepper Institute

American women can expect to live to about 81, compared with 76 for men. Evidence of women’s biological advantage is found at the very outset of life, with male mortality in their first year exceeding that of females. But women’s greater longevity also stems from gender differences in social factors.

Women are less likely to smoke, have drug or alcohol problems, or die in crashes – and they are more likely to have annual physicals and frequent visits with family and friends. Other factors, however, diminish women’s longevity advantage – like their higher risk of poverty and lower levels of physical activity. These patterns suggest ways that life expectancy could be extended for both genders. Men’s lives could be lengthened by reducing their risky behaviors and enhancing their social relationships, while women’s could be extended by improving their economic security and encouraging more physical activity. If you have an idea for an Aging Today question, send it to aging@fsu.edu.

OLLI'S THIRD ANNUAL CHRISTMAS BASH SET FOR DECEMBER 19

OLLI's Third Annual Christmas Bash, highlighted by the now-traditional Ugly Sweater Contest, will be held Wednesday, December 19 from 5:00 to 9:00 p.m. at the Capital City Country Club.

Music will be provided by Moondance. There will be heavy hors d’oeuvres and beverages from a full cash bar. Partygoers are encouraged to bring a favorite holiday cookie to share. The party’s highlight is the Ugly Holiday Sweater contest. Wear your holiday sweater (optional) and enter to become a winner of a free OLLI class. "This is a great opportunity for fun, laughter and just a wonderful evening," Director Debra Herman said. The cost is $25 to members; $30 for guests. Register online by going to the OLLI website. This event is sponsored by Capital Health Plan.

Also, be sure to bring a new children’s book for the OLLI Book ClubDrive.
A group of OLLI travelers paid a November visit to the National Aviation Museum in Pensacola. The museum, which opened in 1963, features 350,000 square feet of exhibit space on a 37-acre campus, is one of the largest aviation museums in the world, and is located just a few miles from the beach where pioneer naval aviators arrived to establish the Navy's first air station in 1914 and sits adjacent to the Navy's Blue Angels Flight Demonstration Squadron and Forrest Sherman Field, home of the Training Air Wing Six.

"Visiting this museum instilled in us the vital importance of our military in keeping us free, as well as our success in space exploration," George Waas said.

His wife, Harriet, actually sat in the pilot seat of a fighter jet. (See picture below) "That was truly an amazing and memorable experience," she said.

Also pictured below are the famous Blue Angels jets, the lunar landing module, and several different aircrafts used in war. A visit to the museum represents a passage through more than a century of heroism, technological innovation and thrilling achievements. There are more than 150 historic aircraft, including record-setters that bridged oceans and explored the South Pole; battle-tested veterans that survived combat from Midway to Iraq, and aircraft that flew the President of the United States.

There is also a priceless collection of artwork and memorabilia documenting the people and key events in Naval Aviation history.

The visit, arranged by OLLI's field trip coordinator Randy Soule, "gave all of us who attended an unforgettable experience," he said. His wife, Mary, also enjoyed the tour of the museum.

Admission to the museum is free and is open 9 a.m. to 5 p.m. daily, except Thanksgiving Day, Christmas Day and New Year's Day.
A group of OLLI members went on a guided tour of the historic portion of the St. John’s Cemetery, followed by a visit the church last month. The presentation highlighted the contributions of the early territorial founders of St. John’s Episcopal Church not only toward the establishment of their early mission church but to the state of Florida as well.

The group learned that many of the graves date back to the early 1800s. Carl Stauffer, in his book *God Willing* (1984), linked the establishment of St. John’s to the chain of events which can best be described as “Christianity’s epic struggle to gain a strong foothold in Florida which began in 1513 when Juan Ponce de Leon discovered Florida.

They were also told that the early beginnings of the church were preceded by bloodshed and human suffering until the final phase when St. John’s was incorporated as a parish in the act passed by Florida’s Legislative Council on October 30, 1829.

The "Talking Tombstones" tour conducted on November 9 also highlighted the on-going research efforts by the history survey team. The stories that each of the graves are revealing today indicate that while the early pioneers clearly harbored a
longing for corporate worship, they were often caught up in the grim realities of their own daily existence. The tombstones talk through the writings and etchings on them.

Some familiar names known to Tallahassee natives and longtime residents that appears on the tombstones include Brevard, Murphree, Murat, Gray, Meginniss, Lively, Betton, Holland, Bradford, Bloxham, Eppes. (See pictures below.)

The group was also treated to a tour of the church, including a musical demonstration of the magnificent pipe organ and some even got to ring the church bells.
The Travel Club hosted an "armchair" tour of China on November 9 at the Northeast Library, courtesy of John and Linda Kilgore, who traveled to China earlier this year.

If, for whatever reason, you can't travel to China, "(t)his is a wonderful and the next-best way to enjoy the sights and sounds of this vast country," said OLLI Director Debra Herman. "This is the third armchair program we have had, and these are a great way to inform OLLI members of how much fun travel can be," Harriet Waas, co-chair of the Travel Club said. (See pictures below.)

The Kilgores regaled the audience with a virtual travelogue through the vast China landscape--the Great Wall, the Terra Cotta soldiers of Xian, pandas, and beyond. They brought with them scrolls with Chinese calligraphy, silk, chopsticks, fans, etc.

Both Kilgores, as well as Herman and Waas, expressed hope that, with the success of these three armchair
travels, and with past trips to England, Italy, Spain and Portugal, and with another trip to Italy and a visit to Ireland coming up in 2019, there will be more armchair programs in the future.

"If you can't visit these countries, the next best thing to do is to bring these countries to you. And these 'armchair' programs are designed to do just that," Waas said.
DEALING WITH BACK PROBLEMS AND INJURIES

Most people will have a minor back problem at one time or another. Our body movements usually do not cause problems, but it's not surprising that symptoms develop from everyday wear and tear, overuse, or injury. Back problems and injuries often occur during sports or recreational activities, work-related tasks, or home projects.

Back pain can cause problems anywhere from the neck to the tailbone (coccyx). The back includes:

- The bones and joints of the spine (vertebrae).
- The discs that separate the vertebrae and absorb shock as you move.
- The muscles and ligaments that hold the spine together.

Back injuries are the most common cause of back pain. Injuries frequently occur when you use your back muscles in activities that you do not do very often, such as lifting a heavy object or doing yard work. Minor injuries also may occur from tripping, falling a short distance, or excessive twisting of the spine. Severe back injuries may result from car accidents, falls from significant heights, direct blows to the back or the top of the head, a high-energy fall onto the buttocks, or a penetrating injury such as a stab wound.

Although back pain is often caused by an injury to one or more of the structures of the back, it may have another cause. Some people are more likely to develop back pain than others. Things that increase your risk for back pain and injury include getting older, having a family history of back pain, sitting for long periods, lifting or pulling heavy objects, and having a degenerative disease such as osteoporosis.

Slumping or slouching alone may not cause low back pain. But after the back has been strained or injured, bad posture can make pain worse. "Good posture" generally means your ears, shoulders, and hips are in a straight
line. If this posture causes pain, you may have another condition such as a problem with a disc or bones in your back.

Low back pain may occur in children and teenagers, but children and teens are less likely to see a doctor for low back pain. Although most back problems occur in adults ages 20 to 50, back problems in children younger than 20 and adults older than 50 are more likely to have a serious cause.

**Sudden (acute) injuries**

Pain from an injury may be sudden and severe. Bruising and swelling may develop soon after the injury. Pain from an acute injury usually does not last longer than 6 weeks. Acute injuries include:

- An injury to the ligaments or muscles in the back, such as a sprain or a strain.
- A fracture or dislocation of the spine. This can cause a spinal cord injury that may lead to permanent paralysis. To immobilize and transport the injured person correctly to reduce the risk of permanent paralysis.
- In rare cases, tumors or infections can develop in or around the spine. Some medical conditions can cause pain to spread to the back from other parts of the body (referred pain).
- A torn or ruptured disc. If the tear is large enough, the jellylike material inside the disc may leak.
- An injury that causes the compression of nerves in the lower back (cauda equina syndrome).

**Overuse injuries**

You may not remember a specific injury, especially if your symptoms began gradually or during everyday activities. These injuries occur most often from improper movement or posture while lifting, standing, walking, or sitting, or even while sleeping. Symptoms can include pain, muscle spasms, and stiffness. The pain often goes away within 4 weeks without any treatment.

**Conditions that may cause back problems**

Back pain or problems may not be related to an injury.

- Conditions that weaken the spine, such as ankylosing spondylitis, osteoarthritis, osteoporosis, spinal stenosis, or Paget's disease, can cause back pain. These conditions are most common in older adults.
- Spinal deformities such as scoliosis and spondylolisthesis can cause back pain. Chronic pain syndrome caused by a previous injury or degenerative disease with aging can cause back pain.
• **Treatment**

Most back pain will get better and go away by itself in one to four weeks. Home treatment will often help relieve

It is usually a good idea to continue your regular activities while your back is healing. Avoid heavy lifting and activities that seem to make your back problems worse.

Other treatments for a back problem or injury may include first aid measures, physical therapy, manipulative therapy (such as chiropractic), medicine, and, in some cases, surgery. Treatment depends on:

• The location, type, and severity of the injury.
• Your age, health condition, and activities (such as work, sports, or hobbies). Check your symptoms to decide if and when you should see a doctor.

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**VITAMIN REQUIREMENTS FOR SENIORS**

Vitamins play an important role in virtually all the important events in the body, including the production of energy, hormones, enzymes, immune cells, and neurotransmitters (chemical messengers in the brain). Vitamins can be divided into two general categories: fat-soluble (A, D, E, and K) and water-soluble (the B's and C). It doesn't take much of any one vitamin to meet your needs.

While proteins, carbohydrates, and fats are measured in grams, vitamins are measured in milligrams (one-thousandths of a gram) micrograms (one-millionths of a gram), and International Units (an international standard of measurement that varies depending on the potency of the vitamin). But those microscopic amounts have powerful health-promoting properties. Although we tend to think of supplements when we talk about vitamins, food -- not supplements -- should be your primary source.

Fruits and vegetables are the primary sources of water-soluble vitamins and some fat-soluble vitamins (beta-carotene, which the body converts to A; E; and K). Fortified dairy products are the primary dietary source of vitamin D. Your skin also manufactures some vitamin D when exposed to sunlight, which explains its nickname: "the sunshine vitamin."

Getting adequate amounts of the following nutrients is especially important now that you're over 50:
Vitamin B2 (Riboflavin)

Recommended Intake: Men: 1.3 milligrams a day; Women: 1.1 milligrams a day
This B vitamin makes it possible for your body to access energy from the food you eat, and it helps each of the body's cells produce its own energy. It also plays an important role in maintaining your vision and keeping your skin healthy. Riboflavin is required for the production of niacin, another B vitamin.

While the recommended intake for riboflavin doesn't actually increase with age, the fact that it stays the same while your calorie needs drop means that you have to make wise food choices to get enough riboflavin in your diet. Moreover, researchers suspect that you become more sensitive to riboflavin deficiencies with age.

Vitamin B6 (Pyridoxine)

Recommended Intake: Men: 1.7 milligrams a day; Women: 1.5 milligrams a day
Vitamin B6 helps new cells to develop and is an important participant in the production of the B vitamin niacin and the neurotransmitter serotonin. It boosts the immune system and helps to regulate blood sugar levels. Pyridoxine is also a member of the trio of B vitamins (B6, B12, folic acid) that help reduce your risk of heart disease by keeping blood levels of the amino acid homocysteine low. High levels of homocysteine have been linked with clogged arteries and heart disease.

As you age, your risk of developing a vitamin B6 deficiency increases. There are two reasons for that. First, older people generally consume less protein, which is the richest source of vitamin B6, so their diets are more likely to be low in it. Second, many older adults metabolize the vitamin more rapidly than they did when they were younger, increasing the need for it on a daily basis. Signs of severe vitamin B6 deficiency include skin problems, anemia, depression, confusion, and convulsions.

Vitamin B12 (Cyanocobalamin/cobalamin)

Recommended Intake: Men and Women: 2.4 micrograms a day
Vitamin B12 is critical for proper nerve and brain development and for the production of healthy red blood cells. If you don't get enough of this vitamin, mental functioning can diminish and balance and coordination can be impaired. A prolonged, severe deficiency of B12 that goes uncorrected can cause irreversible nerve damage.

A B12 deficiency usually is not caused by a lack of B12 in the diet. The vitamin is found in animal foods such as meat and liver, as well as in eggs, fish, and dairy products. Only strict vegetarians who don't eat dairy or eggs are at risk of a deficiency because of diet.

A B12 deficiency is usually the result of either pernicious anemia, an inherited disease in which the stomach lining stops producing a substance called intrinsic factor that is needed to absorb vitamin B12, or a lack of stomach acid, which is also fundamental to the absorption of the vitamin.

A decline in stomach acid, a condition called atrophic gastritis, is experienced by as many
as 30 percent of people age 50 and older and by 40 percent of those age 80 and older. However, most do not realize they have the condition. Pernicious anemia also becomes much more common with age.

A deficiency caused by atrophic gastritis can be treated with vitamin B12 supplementation because the synthetic form doesn't require stomach acid for absorption. Pernicious anemia, however, must be treated with injections of vitamin B12.

In recent years, researchers have learned that, along with vitamins B6 and folic acid, B12 can also help ward off heart disease, stroke, and peripheral vascular disease by preventing the buildup of homocysteine, an artery-clogging compound that sometimes accumulates in the blood.

Folate/Folic acid

Recommended Intake: Men and Women: 400 micrograms a day
Folate is the catch-all term used to describe different forms of this B vitamin. However, folate refers to the forms found in food, while folic acid is the synthetic form found in vitamin supplements. This is the last of the B trio to tackle the buildup of homocysteine in the blood. It also appears to play an important role in keeping cells healthy and fending off potentially cancerous changes.

Research has suggested that getting enough folic acid may help protect against cancers of the cervix, colon, and rectum. A low intake of folic acid may not, by itself, trigger cancerous changes in cells, but when combined with other potentially harmful cellular changes, it could set the stage for cancer to take hold. Folate is also needed for the production of proteins that build, maintain, and repair tissues -- a process that continues throughout your life.

Choline

Recommended Intake: Men: 550 milligrams a day; Women: 425 milligrams a day.

This is probably the least well-known of the "B's." It was officially recognized as an essential nutrient for the first time in 1998 and is involved in a wide variety of body functions.
Choline is the raw material of neurotransmitters and cell membranes. Animal studies suggest that adequate intake of choline early in life can diminish the severity of memory loss that comes with aging.
Some animal research suggests that choline may help improve memory in older adults, but human studies are needed to determine if choline is useful for preventing dementia in people as they age. Recommended intakes are no higher for someone who is 69 than for someone who is 19, but it can be difficult to assess whether you are getting enough choline since it is not specifically listed on the Nutrition Facts label of food products.
Vitamin C

Recommended Intake: Men: 90 milligrams a day; Women: 75 milligrams a day.
Another of the water-soluble vitamins, C is probably best known for its purported role in fending off colds. While it may help reduce the duration and the severity of cold symptoms, it's never been proved to prevent the cold itself. It is, however, a proven antioxidant nutrient that helps to neutralize free radicals that can damage DNA. Damaged DNA can turn normal cells into cancerous ones.

Vitamin C also plays a critical role in the formation of white blood cells that fight infection and in the production of collagen, the connective tissue that holds skin, bone, ligaments, and cartilage together. Vitamin C helps keep blood vessel walls strong and tiny blood vessels pliable and resistant to damage. As if that weren't enough, it also is essential to the production of red blood cells, plays a role in wound healing, and helps keep gums healthy.

Getting enough vitamin C is especially important as you get older because of its role in preventing diseases, particularly those to which you are more susceptible as you age. Vitamin C helps fight heart disease by regulating cholesterol levels in the blood, fights free radicals that cause cataracts and macular degeneration, and helps protect against cancers of the esophagus, stomach, pancreas, cervix, rectum, breast, and lung.

Because smokers have lower blood levels of vitamin C than nonsmokers, the recommended intake for men who smoke is 125 milligrams a day and 110 milligrams for women who smoke. However, some vitamin C experts say that to get optimum protection, it may be best for everyone to saturate the body's tissues with the nutrient, which takes as much as 200 milligrams a day.

Vitamin D

Recommended Intake: Men and Women over 50: 400 International Units a day (or 10 micrograms); Men and Women over 70: 600 International Units a day (or 15 micrograms)

Almost all the calcium in your body is stored in your bones, and vitamin D plays a critical role in making sure it gets there. The vitamin acts as calcium's gatekeeper, regulating the absorption of this essential mineral. Vitamin D helps keep bones strong and helps maintain blood levels of calcium so it can be used as needed for other body functions, such as muscle contractions and the transmission of nerve impulses.

Recent research also suggests vitamin D plays a role in preventing some cancers, and, along with calcium, lessens the risk of developing type-2 diabetes. Some vitamin D is produced in your skin when it is exposed to the sun. The ultraviolet rays of the sun act as a trigger for conversion to an active form.

In healthy people, it takes only about 10 to 15 minutes of unprotected exposure to the sun on a summer day to make enough vitamin D to store in the liver, a reserve that can last for months. However, if you're slathering on sunscreen with a sun protection factor (SPF) of 8 or above -- as you should to prevent skin
cancer -- you may not be getting enough sunlight for the conversion to take place.

The best advice is to get a few minutes of unprotected sun exposure in the early morning or late afternoon, when the sun's rays are least likely to damage your skin. As you age, the recommended intake of this fat-soluble vitamin increases more than for any other nutrient. Why the jump? As your skin ages, it loses some of its ability to produce vitamin D when it is exposed to sunlight. To make matters worse, the body doesn't absorb vitamin D from the diet as well as it did when you were younger.

Inadequate vitamin D can translate into weak bones, osteoporosis, and bone fractures. Getting enough vitamin D is especially important for menopausal and postmenopausal women to help slow the rapid rate of bone loss that typically occurs when estrogen levels plummet.

Inadequate vitamin D can translate into weak bones, osteoporosis, and bone fractures. Getting enough vitamin D is especially important for menopausal and postmenopausal women to help slow the rapid rate of bone loss that typically occurs when estrogen levels plummet.

**Vitamin E**

Recommended Intake: Men and Women: 15 milligrams of alpha-tocopherol a day

Another of the fat-soluble vitamins, vitamin E acts as an antioxidant, protecting the body's cells from free radicals that can damage DNA and are capable of turning normal cells into cancerous ones. Vitamin E also fights off free radicals that damage LDLs (low-density lipoproteins) --"bad cholesterol." Damaged LDLs are more likely to clog arteries, causing heart attack and stroke.

Much has been made about the benefits of supplemental vitamin E. Some researchers believe that intakes much higher than the recommended daily intake may help lower the risk of heart disease, cataracts, and prostate cancer. Though recent studies have called into question E's effectiveness in holding heart disease at bay, a moderate supplement of alpha-tocopherol may still be a good idea.

The recommended intake for vitamin E doesn't increase with age, but many people over the age of 51 do not get the recommended intake. The most potent of the eight forms of vitamin E, alpha-tocopherol, is found in foods such as avocados, sunflower seeds, and almonds (one ounce of whole almonds, about 24, supplies half your daily recommended intake of alpha-tocopherol). Alpha-tocopherol is also found in supplements.

**Vitamin K**

Recommended Intake: Men: 120 micrograms a day; Women: 90 micrograms a day--

Vitamin K is one of the less glamorous vitamins, long known mainly for its role in blood clotting. But this fat-soluble vitamin also plays an important role in bone metabolism, which is just beginning to be understood. The recommended intake doesn't
increase with age, but the recommended intakes for men and women of all ages were recently raised in light of new findings showing the potential role of vitamin K in health.

Dietary surveys show that half of men and women over the age of 51 don't get the current recommended intake of the vitamin. Research has shown that people with osteoporosis and bone fractures have lowered blood levels of vitamin K. It's believed that vitamin K is important for activating the bone-building protein osteocalcin. If there is not enough vitamin K to activate this important protein, then osteoporosis can result. Vitamin K may also help prevent arteries from becoming clogged; researchers are currently investigating this.

**HOW TO GET RID OF JUNK MAIL AND TELEMARKETING CALLS FOR GOOD**

by Carrie Kerskie, Kerskie Group, Inc.

As a child, I used to get so excited when I received something in the mail. Maybe it was because the only time I would get mail was either around my birthday or Christmas and it usually contained a check from my grandmother. Now, as an adult, my relationship with mail is quite the opposite. The only correspondence I receive is either bills or junk, neither of which I look forward to receiving.

While there is not much anyone can do to eliminate their bills, there are a few things you can do to get rid of junk mail. In fact, scams and spam seem to be on the rise via most methods of communication these days. Taking steps to declutter your mailbox and protect your phone number(s) can greatly minimize your frustration and reduce your vulnerability to fraud and identity theft.

**How to Opt Out of Junk Mail**

The first step toward eliminating a large portion of one’s junk mail is to participate in the DMAchoice program from the Data & Marketing Association (DMA). This program was created to give you control over what mail you receive and help the DMA’s more than 3,600 members avoid mailing to uninterested customers.

The categories of mail you may opt out of receiving include credit card offers, catalogs, magazine offers
(such as subscription offers, newsletters, periodicals and other promotional mailings), donation requests, bank offers, retail promotions and more. You can choose to opt out of specific direct mail categories like the ones above or all of them. Once registered, the DMA forwards your preferences to the appropriate members.

To register, visit [www.dmachoice.org](http://www.dmachoice.org) and enter your information. There is a $2 fee to register online, but this registration lasts for 10 years. Caregivers also have the option to register on behalf of their care recipients to prevent them from receiving junk mail as well. Just visit the DMA website’s **Do Not Contact for Caretakers** page and follow the instructions. There is no cost for removing a vulnerable senior from the DMA’s databases.

### Cancelling Pre-Approved Credit Offers

In the same way that DMAchoice works with member organizations to streamline marketing and promote consumer satisfaction, the OptOutPrescreen program works directly with the credit bureaus Experian, Equifax, TransUnion and Innovis to allow consumers to opt out of pre-approved and pre-screened credit and insurance offers.

To register for the program, visit [OptOutPrescreen.com](http://OptOutPrescreen.com) or call 888-567-8688. If you register online or by telephone, your registration is valid for five years. To opt out permanently, you will need to print, sign and mail back a permanent opt out election form. This form will be emailed to you when you register online or be mailed to you if you register by telephone.

### Doing Away with Unsolicited Mail

In order to opt out of generic mail (the type that says “Dear Occupant” or “Current Resident”), you must directly contact the organization that sent you the solicitation. If you’d like to send a written request, provide your name and mailing address and state clearly that you wish to opt out from receiving future mail.

### “Junk” Can Overwhelm Your Phone, Too

While junk mail is a nuisance that can literally pile up, unsolicited telephone calls can be equally as annoying but even more dangerous. Scammers will
often call pretending to be from a legitimate organization in an attempt to get you to send them money or share your sensitive financial or identifying information.

One common scam is where the caller pretends to be from the IRS. He or she states that you owe money and if you do not pay within a certain timeframe you will be arrested. They use fear and intimidation to get the victim to do what they want.

But how can you tell which calls are legitimate and which are scams? It is often difficult to make that determination based on the call alone.

One way to reduce, if not eliminate, legitimate solicitation calls is to register both your home and cell phone numbers on the Federal Trade Commission’s national Do Not Call Registry. Once you have registered, solicitors are prohibited from contacting you.

However, this does not apply to organizations with which you currently conduct business (known as established business relationships or “ERBs”) or tax-exempt organizations. You will still receive calls from entities you have given permission to contact you, like your bank, charities soliciting donations and—everyone’s favorite—political calls.

To register for this free service, call 1-888-382-1222 from the telephone number you wish to register. You can also register online at www.donotcall.gov. Keep in mind that this registration does not expire, so there is no need to ever re-register.

Telemarketers have 31 days from your registration date to remove your information from their call list and cease contact. If you receive a call after this 31-day period, notify the caller that you are on the national Do Not Call Registry and ask to be removed from their contact list. If they continue to call you, then you can report them online at the FTC’s complaint website. By law, organizations that are not tax exempt must remove a consumer’s contact information from their call list upon request.

This will not eliminate all calls, but it will greatly reduce the number of legitimate, unsolicited calls. You should be wary of whatever calls continue to come in from unknown sources. Here are a few indications that you’re talking to a scammer on the phone:

- Caller is asking you to provide sensitive information
- Caller is threatening or bullying you
- Caller demands money, especially in the form of a money order
Caller refuses to remove your information from their call list
Calls claims to be from the IRS or another “official source” and demands money or sensitive information
Caller threatens your arrest if you do not comply

Also, don’t be fooled by what appears on your caller ID. Caller ID can easily claim to be from the IRS, you can visit the IRS website (www.irs.gov) or call them.

This process is called “spoofing.” I could call you and have the caller ID read “IRS” or “police station.” It really is just that simple.

If you are in doubt when you receive an unsolicited telephone call, simply hang up the phone. If you get a call from someone claiming to be from your bank or credit card company, hang up and call the official telephone number printed on your bank

Tackling Unwanted Text Messages

If you receive spam-type text messages on your cell phone, you can typically report it to your carrier by forwarding the text message to 7726. This works for AT&T, T-Mobile, Verizon, Sprint and Bell customers. They will then add this to their identified spam messages list and attempt to block the sending number. This process is similar to identifying an unsolicited email as spam or junk mail. Once you have labeled it as such, your email provider will block future emails from that sender from getting into your inbox.

The same handling rules for spam emails apply for text messages as well. Don’t reply to the sender, click on any links in the messages or provide any personal information. Legitimate businesses will not ask for your account or login information via text. The next safest thing after reporting the message to your carrier is to delete it immediately.

While you may not be able to block all potential frauds and scams, these tools will help you to eliminate most legitimate solicitors, making it easier for you to identify the remnants as fraudsters and scammers. At that point, you can simply toss the mail, hang up the telephone or delete the text.
Santa will come a little late this year. The OLLI elves who are responsible for the course catalog will begin the mail out during the first week in January. Now let’s hope our U.S.Postal Service Santa does its job! When you get your catalog, I hope you like your holiday gifts—more classes in Spring than ever before, and some new faculty.

**MUSIC CLASSES:**
Music lovers will have classes taught by two new FSU faculty. I know everyone who has taken their classes loves Brad Rohrer, Leon Anderson, and Ruth Akers, but we want to introduce you to some new faculty. It is by introducing new faculty that we can keep the OLLI classes fresh and vibrant. And yes, we will try to get Leon to teach for us again in May! It all depends on his schedule.

The new music classes for Spring are: Tantalizing Sounds and Images of Claude Debussy and Maurice Ravel and Jazz Appreciation.

Andre Golbert is an FSU Ph.D. candidate and accomplished pianist. Jazz Appreciation will be taught by FSU professor Kevin Jones. Kevin was highly recommended by Leon Anderson. Kevin is a jazz trombone player and his class will have a different focus than our prior classes about jazz. Kevin come to us from the University of Texas.

For the piano players… back by popular demand and also the availability of faculty, **we will be offering the Group Piano Lessons class again**. That class is limited to 15, so if you want to enroll, you have to enroll early on the day of registration.

**SPECIAL THREE WEEK CLASS**
**Norman Rockwell**
If you love the Norman Rockwell drawings of time past, make time to take the class at the Gadsden Arts Center and Museum: **Rockwell in the 1960’s**. The Center is exhibiting Rockwell’s art from his Museum. The
two Gadsden Center staff who will be teaching the class are delightful FSU grads in art history. I have met with them and they can tell you anything you want to know about Norman Rockwell and his influence on American art and artist.

Baseball Memories
Baseball fans get ready! Jeff Lickson has put together a class for those of you who love baseball, want to share your memories and hear from some of those who have played the game. It will be a lots of fun, storytelling and information. I might even bring my 1957 signed Yankee baseball to the class. Not sure about the popcorn, cracker jack and beer, but we’ll see.

Economics of Social Security
For those of you who attended former Dean of the College of Social Sciences and Public Policy, Dr. David Rasmussen’s lecture on the Economics of Social Security, you know that there is much more to learn. David is going to teach a three-week class which will expand his lecture and give us a look at how current economic policies are affecting our aging population.

REPEAT CLASSES
So many ask me about repeat classes. Repeat classes depend upon the availability of the faculty, whether the class had a wait list, and whether the faculty had a good evaluation from the attendees. We also repeat the language classes because there is a continuing interest, and Great Decisions is a semi-annual course.

The good news for those of you who wanted to take the 3D Printing Class, Kevin Curry can teach the class again. It is still limited to 15, so sign up early if you are interested.

SHOWCASE
Santa does not want to give you information about all your gifts, so come to Showcase, January 23rd at the Turnbull Center. And bring a friend. If they love music, films, history, technology, etc, share your course curriculum catalog with them so they can expand their love of learning.

Happy Holidays to all… See you at Showcase.
The following entries are from current sources regarding the world, U.S., and Florida aging population:

“People 45 and older made up 30.9 percent of the (U.S.) population in 1980, 41.3 percent in 2016.” (So, the older population is growing in size much faster than the younger population.)

“According to the U.S. Census Bureau, Florida had the largest percentage of people age 65 and older last year (2017) at 20.1% of its population, followed by Maine at 19.9% and West Virginia at 19.4%. Utah had the smallest percentage of its population age 65 or older at 10.8%, followed by Alaska at 11.2% and the District of Columbia at 12.1%.” [Kiplinger’s Retirement Report, page 13, August, 2018.]
[Data in this entry relates to age 65 and older; the preceding entry relates to age 45 and older.]

“Older Americans have consistently show up at the polls . . . . In 2016:

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 65+</td>
<td>70.9%</td>
</tr>
<tr>
<td>Ages 45-64</td>
<td>66.6%</td>
</tr>
<tr>
<td>Ages 30-44</td>
<td>58.7%</td>
</tr>
<tr>
<td>Ages 18-29</td>
<td>46.1%</td>
</tr>
</tbody>
</table>

even as they make up a greater portion of the total population:”

<table>
<thead>
<tr>
<th>Year</th>
<th>Under age 45</th>
<th>Age 45-64</th>
<th>Age 45-64 +</th>
<th>Age 65+</th>
</tr>
</thead>
<tbody>
<tr>
<td>1980</td>
<td>69.1%</td>
<td>19.6%</td>
<td>+ 11.3% = 30.9%</td>
<td></td>
</tr>
<tr>
<td>2016</td>
<td>58.7%</td>
<td>26.1%</td>
<td>+15.2% = 41.3%.</td>
<td></td>
</tr>
</tbody>
</table>


“For nearly 40 years, the turnout of voters over age 45 has significantly outpaced that of younger Americans. In the 2016 presidential election, 71 percent of Americans over 65 voted, compared with 56 percent among 18- to 29-year
olds. . . . At the same time, the number of voters who fall in the category of “older” keeps rising.” [AARP Bulletin, May 2018, page 3.]

“Older Americans . . . are healthier than their middle-aged kids. Due to the increase in diabetes, obesity and other chronic diseases among people in their 40s and 50s, the chance that older parents will not only outlive their kids but will have to care for them, financially and physically, is on the rise. [AARP The Magazine, April / May, 2018, page 24.]

“The divorce rate for those age 50 and older has doubled since the 1990s.” [Kiplinger’s Retirement Planning 2018, page 13.]

“The oldest person in the world, (Chiyo Miyako) has died at age 117 . . . (on Sunday, July 22, 2018) south of Tokyo, Japan. Her replacement is yet to be announced by Guinness World Records, but according to media reports, the new oldest person is Kane Tanaka, a 115-year-old woman who lives in a nursing home in Fukuoka, a city in southern Japan. Miyako, born May 2, 1901, became the world’s oldest person in April (2018) after Niabi Tajima, a fellow Japanese national, died at age 117.” [Tallahassee Democrat, July 28, 2018, page 3B.]

Despite an economic boom, Americans ages 65 and older are filing for bankruptcy in record numbers, and the trend is likely to continue. In nearly three decades, the rate at which seniors file for bankruptcy more than doubled and the percent of seniors in the bankruptcy system increased by almost five times. Of seniors 75 and older, the increase since 1991 was nearly 10 times. From 1991 to 2015, the share of people 65 and older rose from 16 percent of the adult population to 19.3 percent, (but) the broader trend of an aging U.S. population can explain only a small portion of the effect.

The change, the study suggested, is caused by a shift in responsibility for caring for older people, as employers phased out (defined benefit) pension plans and replaced them with 401(k) plans, transferring the risk for paying lifetime benefits from the company to workers. And while the financial misfortune of older Americans likely won’t have much effect on the overall economy, it could become a significant social problem. In five or 10 years it might be a more serious social problem that people are more concerned about.

It’s a difficult public policy and social issued that the political process will have to sort out. Source: Quotes from Frank Witsil, Detroit Free Press, USA Today
FRIENDSHIP FORCE PLANNING FOR INCOMING VISIT; THREE OUTBOUND TRIPS FOR 2019

We are planning for an incoming short visit for the Friendship Force Villages club January 14-17, 2019.

We need home hosts to accommodate a single person or a couple; day hosts to help with driving our guests; dinner hosts for small dinners of 4-8 people; and OLLI members to be on the planning committee.

We are working on three **Outbound** trips:

- **April 29-May 5, 2019.** Lake Hartwell Georgia. Our visitors from Montreal stayed with this club prior to their visit here in September 2017 and gave them great reviews for their hospitality.

- **July 12-28, 2019.** Iguazu Falls, (note: Iguazu Falls is one of the Seven Wonders of the World), Belo Horizonte and Campinas Brazil. Escape Tallahassee’s summer heat and visit Brazil during their winter season.

- **September 2019.** Raleigh NC. Our visitors from March 2018 are requesting that we visit with them so they can return the warm hospitality they received on their visit here.

For more information please contact Wendy Johnston at mrswendyjohnston@gmail.com
For publication in the OLLI times send your information to George and Harriet Waas at waas01@comcast.net

Do you have an idea for a class? Please submit any ideas for future OLLI classes and instructors to Susan Yelton, OLLI's Curriculum Team Chair at susanwyelton@gmail.com