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# RI ARA

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"Fighting for the future of our members,  
NOW, more than ever"!!!!*



Publication 2015 / Issue 46  
Published in house by the  
RI ARA

## November 16, 2015 E-Newsletter

### Rhode Island AFL-CIO Constitutional Convention TPP Resolution



#### **On October 16, 2015, The Rhode Island AFL-CIO passed a Resolution Opposing TPP**

The Rhode Island AFL-CIO opposes the TPP because it fails to provide and create economic opportunities for workers, protect labor rights, protect and support a clean environment, a safe food supply, safeguard our country from being sued, lead to a negative impact on our already diminishing U.S. trade balance;

The Rhode Island AFL-CIO calls upon all federal elected officials representing the state to oppose TPP legislation, unless it includes the following:

The agreement will also jeopardize the government's ability to list and price prescription drugs in public programs, like Medicaid, by allowing drug companies to challenge public programs in a secret, international court if they believe drug pricing in these programs affects their profits.

#### **The Rhode Island Alliance for Retired Americans also opposes the TPP.**

The early, leaked version of the TPP agreement – the negotiations have been conducted in secret and even members of Congress have been prevented from seeing all of the provisions -- contains extreme patent protections for name-brand pharmaceuticals that threaten to restrict access to cheaper lifesaving medicines in all TPP countries, including in the United States. **After the TPP agreement was made public, the above proved to be true.**

Important cost-saving drug discount provisions of the Affordable Care Act and the Veterans Administration system are also in jeopardy. Under the TPP, if pharmaceutical companies determine that these discounts put the drugs at below "fair market" prices they can challenge them, increasing costs to taxpayers and consumers.

So-called free trade deals have been a bad deal for working people, from NAFTA to CAFTA, to the most recent agreements with South Korea and Colombia. Congress must stand up to the powerful corporations and CEOs pressing for the TPP and put the health and well-being of older Americans first.

Americans pay the highest prescription drug prices in the industrialized world, and last year drug prices went up by 13 percent. Congress should be working on ways to reduce drug costs, not making the problem worse. The Rhode Island Alliance for Retired Americans along with all Rhode Island senior citizens urge Senators Reed & Whitehouse, Congressmen Langevin & Cicilline to stand with America's seniors and continue to oppose TPP.

The Alliance for Retired Americans is trying to get resolutions passed by local municipalities in all 50 states to emphasize this is a movement across the country against the TPP. **I would to ask your members if they know any local elected officials who may pass a resolution like this.**

**Please contact RI ARA President, John A. Pernorio for more information @ [riarajap@hotmail.com](mailto:riarajap@hotmail.com)**

### Medicare premiums, deductibles for 2016 add to woes of no COLA

#### **Part B deductible jumps for all, most won't pay higher premiums**

Medicare has released the 2016 premiums and deductibles for inpatient hospital (Part A) and physician and outpatient hospital services (Part B) programs. The good news is most senior citizens will not pay more for outpatient care. The bad news is many will. And, no one will be pleased with the \$19 increase in the Part B deductible.



Everyone on Medicare will see this Part B deductible amount climb from \$147 this year to \$166 next year. This jump of almost 13 percent is the first time this deductible has increased since 2013.

A news release by the Centers for Medicare & Medicaid Services (CMS) announced the 2016 premiums and deductibles for the Medicare inpatient hospital (Part A) and physician and outpatient hospital services (Part B) programs... **[Read how this could effect you](#)**

## Aging brains protected by aerobic endurance that maintains brain connectivity

### Benefits of fitness for senior brains may not depend on being extremely fit

A new study of older adults finds the stronger your aerobic endurance, the stronger your brain connection and probably your long-term brain function as you age, according to a report in the journal *NeuroImage*.

Greater physical activity and cardiorespiratory fitness are firmly associated with reduced age-related cognitive decline and lower risk for dementia. However, significant gaps remain in the understanding of how physical activity and fitness protect the brain from adverse effects of brain aging.



The primary goal of the current study was to empirically evaluate the independent relationships between physical activity and fitness with functional brain health among healthy older adults, as measured by the functional connectivity of cognitively and clinically relevant resting state networks.

This study shows that age-related differences in brain health - specifically the strength of connections between different regions of the brain - vary with fitness level in older adults.

**Michelle Voss** led the study while a postdoctoral researcher at the University of Illinois with Beckman Institute director **Arthur Kramer** and kinesiology and community health professor **Edward McAuley**. Voss now is an assistant professor at the University of Iowa.

"Our study provides the strongest evidence to date that fitness in an older adult population can have substantial benefits to brain health in terms of the functional connections of different regions of the brain," Kramer said.

There are many ways to measure brain health across the lifespan. One popular technique measures the strength of connections between different parts of the brain while the person is completing a task or during wakeful rest. The latter is known as resting-state functional connectivity.

Research has shown that some of these connections weaken with increasing age and indicate deteriorating brain health.

Using functional magnetic resonance imaging, Voss and colleagues measured the strength of these connections throughout the brain in younger and older adults at rest. As expected, the team confirmed that most connections were weaker for older adults when compared with younger adults.

Building on these findings, the researchers examined the role of cardiorespiratory fitness on resting-brain connectivity in older adults. Fitness is determined by how efficiently someone uses oxygen during physical activity such as running on a treadmill. Other factors aside from habitual physical activity may alter how fitness affects brain health. For example, a person's genetic makeup can influence his or her fitness and general brain health.

The researchers found a relationship between fitness and the strength of the connections between certain brain regions in older adults at rest that was independent of their level of physical activity.

"An encouraging pattern in the data from our study and others is that the benefits of fitness seem to occur within the low-to-moderate range of endurance, suggesting that the benefits of fitness for the brain may not depend on being extremely fit," Voss said.

The study concludes that there is a positive role of cardiorespiratory fitness, beyond habitual physical activity, on brain health as people age.

"The idea that fitness could be related to brain health regardless of one's physical activity levels is intriguing because it suggests there could be clues in how the body adapts for some people more than others from regular activity. This will help our understanding of how fitness protects against age-related cognitive decline and dementia," Voss said.

## Silent heart attacks have hit about 8 percent of seniors suggests new study

### Men more likely than women to have myocardial scars: 80% missed in evaluations

A study of boomers and seniors with an average age of 68 found eight percent had suffered a heart attack without knowing it and that 80 percent of myocardial scars from these attacks were not recognized in electrocardiography or clinical evaluation.

Their study group was multiethnic and about 52 percent males according to the report in the November 10 issue of *JAMA*. This issue, a cardiovascular disease theme issue, coincides with the American Heart Association's Scientific Sessions 2015.

Ischemic heart disease is an important public health concern, but the evidence shows a considerable proportion of myocardial infarctions (heart attacks) are clinically unrecognized.

Given the aging of the U.S. population, it is important to understand the prevalence, risk factors, and prognosis of unrecognized MI, according to the researchers.

In patients who survive a heart attack, normal contractile (having the property of contracting) tissue is replaced by noncontractile fibrosis (formation of excess fibrous connective tissue in a reparative process – or scar tissue). Myocardial scarring leads to abnormal heart function and poor prognosis. ...[Read More](#)



## Another wall falls that kept senior citizens from critical treatments

### Study rejects biologic age as limiting factor for stem cell transplants



More than 40 percent of older patients with acute myeloid leukemia (AML) can remain in long-term cancer remission through a modified, less aggressive approach to donor stem cell transplantation, according to the results of a phase 2 study led by oncologists at The Ohio State University Comprehensive Cancer Center. AML is an aggressive blood cancer that is life threatening and is typically diagnosed in patients older than 60. The data represents new hope in a disease where the five-year survival rate is often below 10 percent, despite achieving initial remission.

Previous observational studies have suggested that allogeneic hematopoietic stem cell transplantation -- which involves infusing a patient with healthy stem cells from a donor -- can reduce cancer recurrence and, therefore, improve overall survival for AML patients. Patients over 60, however, traditionally have been considered poor candidates and excluded from stem cell transplants due to other prohibitive health conditions or concerns about their ability to tolerate the intensive chemotherapy treatments necessary to eradicate leukemia cells before infusing the body with donor stem cells to rebuild healthy bone marrow. ...[Read More](#)

## Older drivers not ready for driverless cars, but like some new stuff

### Seniors like blind-spot warnings, back-up cameras but they aren't too new anymore

When it comes to self-driving cars, senior drivers, ages 50 to 69, express more interest in “test-driving” a driverless car than in actually purchasing one. But, there are a couple of new technologies they like and are willing to buy, according to new research.

As car manufacturers continue to introduce new technologies in their vehicles, blind-spot warning systems and back-up cameras are the technologies mature drivers are most willing to adopt, according to research by [The Hartford](#) and the [MIT AgeLab](#).

The *Vehicle Technology Adoption Among Mature Drivers* study found that mature drivers consistently favor technologies that improve driving safety, but some think certain advancements make drivers too reliant on technology.

Adoption was defined in terms of drivers wanting the technologies in the vehicle, thinking they are worth having, being willing to purchase them and being likely to use them.

These older drivers are most willing to adopt the following technologies out of a list of seven included in the study...[Read More](#)



## It's never too soon for seniors to plan their 'Driving Retirement'

Harriet Kelly has one word to describe the day she stopped driving four years ago: miserable.

“It's no fun when you give up driving, I just have to say that,” she says.

By [John Daley, Colorado Public Radio](#)



Harriet Kelly, of Denver, says she hasn't had even a fender bender since the 1960s. Still, she noticed in her 80s that her eyesight was starting to decline. So she made a plan to stop driving at 90 — and did just that.

Kelly, who lives in Denver, says she started to notice her eyesight decline in her 80s. She got anxious driving on the highway so she decided to stop before her kids made the move for her.

“I just told them I'd stop driving on my birthday, my 90th birthday, and I did. And I was mad at myself because I did it,” she says, laughing. “I thought I was still pretty good!”

Kelly is now 94. She says her last accident was in the 1960s. But, she says, “I think it's just better to make up your own mind than have your kids go through trying to tell you and end up with arguments and threats and everybody gets mad.”

Her daughter Leslie Kelly says she's grateful she and her siblings didn't have to have that tough conversation. Still, she knows it's been tough for her mom.

“It really cut down on her ability to feel independent,” says Leslie. Harriet chimes in, “It certainly did!”

But Kelly is a great example of planning for a “driving retirement,” says Dr. Emmy Betz, with the University of Colorado School of Medicine.

“Retirement is something that happens to all of us. Maybe we even look forward to it. You prepare for it, you make financial plans, you think about what you're going to do,” she says.

But she says most seniors don't do that when it comes to driving.

“It's sort of the elephant in the room that no one wants to talk about, but it's an issue that's coming for most of us and our family members and so denial isn't probably the most helpful option,” she says....[Read More](#)

## Low-Impact exercise helps women in senior centers decrease pain, improve mobility

### It helps arthritis - actually helps decrease pain



It may seem counterintuitive that exercise could help people with arthritis and other musculoskeletal conditions, but a new study being presented today finds that a low-impact exercise program is improving quality of life for many older adults with these conditions.

The program, offered by Hospital for Special Surgery (HSS) in senior centers in New York City's Chinatown and Flushing, Queens communities, has helped decrease pain, improve mobility and enhance the overall health of many participants.

The study, titled, "The Effectiveness of a Low-Impact Exercise Program on Musculoskeletal Health of Asian Older Adults," will be presented at the American College of Rheumatology/ Association of Rheumatology Health Professionals annual meeting today in San Francisco.

"Getting seniors to be active in any way will generally improve their quality of life and help them function better in their everyday activities," said Linda Russell, MD, a rheumatologist and chair of the Public and Patient Education Advisory Committee at Hospital for Special Surgery.

"People believe that if you have arthritis you shouldn't exercise, but appropriate exercises actually help decrease pain.

Fifty percent of adults age 65 and older have received a diagnosis of arthritis, according to the Centers for Disease Control and Prevention. Previous studies have shown that participation in low-impact physical activity can improve pain, function, mood and quality of life without worsening arthritis symptoms or disease severity. However, individuals with arthritis are less likely to be physically active....[Read More](#)

## Doctors, Lawyers And Even The Bank Can Help Identify Elder Abuse

By [Shefali Luthra](#)

Elder abuse, which can take the form of sexual or emotional abuse, physical violence and even financial manipulation, affects at least 10 percent of older Americans, according to [a review article](#) in the Nov. 12 New England Journal of Medicine.

That figure, researchers note, is likely an underestimate, since it's based on self-reported cases, and potential victims often suffer from dementia or are otherwise isolated from people who might notice something is wrong. But the estimate drives home how pervasive the problem is, and how familiar its victims might be.

Elder abuse can happen to residents in nursing homes or those living with family members. The "young old" are more likely to be affected. And if unchecked, elder abuse increases risk of death and can result in long-term harm – putting its victims in the hospital and emergency room and increasing their odds of physical and mental illness....[Read More](#)



The New England ARA state affiliates are actively pursuing these Petitions.

**Petition Subject: Observation Status: "Current Hospital Issues in the Medicare Program"**

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**Get The Message Out:  
SIGN THE PETITION!!!!**

**Petition Subject: House Concurrent Resolution 37 and Senate Concurrent Resolution 12 to get power doors installed in Post Offices and other federal buildings.**

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**Petition Subject: Elimination of the Unfair GPO and WEP Provisions of the Social Security Act to make sure the Congress of the United States enacts legislation, HR.973 & S.1651**

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