

Saline County Aging Services

Improving and enriching the quality of life and independence of older persons in Saline County

PO BOX 812, 109 W. 3rd Wilber, Ne 68465 402.821.3330



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Breast Cancer and Seniors

When detected early, breast cancer is treated successfully 98% of the time. Researchers continue to make impressive gains in the detection, diagnosis, and treatment of breast cancer. For example, according to the Mayo Clinic, the radical mastectomy, once a standard procedure for women with breast cancer, is now rarely performed.

However, breast cancer in seniors remains a very potent disease that will only be eradicated if women follow the recommended schedule and undergo annual mammograms. Recent statistics suggest that women are skipping annual mammograms, the key procedure to screening.

The National Cancer Institute estimates that 226,870 women will be diagnosed with and 39,510 women will die of cancer of the breast in 2012. The number of new cases has increased every year for the past thirty years, though death from breast cancer has decreased slightly. Breast cancer remains the second leading cause of cancerous death after lung cancer. It is also the second most common cancer among women after non-melanoma skin cancer.

Like all cancers, breast cancer begins with abnormal cell growth. These "bad" cells develop too quickly and spread, or metastasize, throughout the breast, often entering lymph nodes located under the arm or even moving into other parts of the body.

There are several signs of potential breast cancer, including a bloody discharge from or retraction of the nipple; a change in the size or contour of the breast; and a flattening, redness, or pitting of skin over the breast. A lump in the breast remains the most common sign.

If a woman detects a lump, she should see her doctor; however, the Mayo Clinic recommends waiting through one menstrual cycle, as breast shape changes throughout the cycle. The Importance of Screening

The Importance of Screening

"I cannot stress enough the importance of early detection and screening," states Dr. Constance Lehman, professor of radiology at the University of Washington School of Medicine and director of breast imaging at the Seattle Cancer Care Alliance.

Unfortunately, Lehman sees a disturbing decline in annual screenings. "Cancer is affecting more and more women, yet they are screening less," she says. "It could be due to the costs of an annual mammogram for women with low or no health insurance or because, with new technology like targeted MRIs, women feel that mammography is no longer effective."

Lehman says clinicians may also be partially responsible. Some, including all major cancer research centers, recommend annual screenings but others suggest a biannual exam. Lehman, co-winner of the Second Annual Ladies' Home Journal "Health Breakthrough Award," remains unequivocal: "There is no ambiguity-women past the age of 40 should be screened every year."

Risk Factors

Several primary risk factors are believed to increase the likelihood of breast cancer. However, it's important to keep in mind that most people with one or even several of these risk factors do not get breast cancer.

The Mayo Clinic and National Cancer Institute list these primary risk factors:

- Age
- · Chest radiation as a child
- Start of menarche before the age of 12
- Adolescent weight gain
- No pregnancy or late pregnancy (after 30)
- Lengthy use of oral contraceptives
- Post-menopausal weight gain
- Late menopause (after age of 50)
- Increased breast tissue density

Excessive exposure to estrogen, the hormone that promotes

the appearance of female secondary sex characteristics, appears to be the leading factor in developing breast cancer. Exposure to a combination of estrogen and progesterone for over a four-year period also increases the risk of breast cancer. This is especially significant due to trends in estrogen therapies to stave off premenopausal syndrome and other maladies. The more recent reduction of hormone replacement therapy has perhaps led to the recent slight decline in breast cancer cases for women over 50. Lehman believes women over 50 should consult their physicians about the apparent risks of hormone replacement therapies, especially if they have a family history of cancer.

Secondary factors, including smoking, obesity, alcohol, family history, diet, and stress, are also significant. As with reducing the risk of all cancers, a healthy lifestyle, including a good diet, frequent exercise, and moderate stress, is recommended.

Genetics may also play a role in breast cancer. Even though less than 10 percent of the breast cancer cases are inherited, women with a family history of the disease have a much greater risk of breast (and ovarian) cancer.

Breast Cancer in Seniors

Eighty percent of all breast cancer occurs in women over 50, and 60% are found in women over 65. The chance that a woman will get breast cancer increases from 1-in-233 for a woman in her thirties, to a 1-in-8 chance for a woman in her eighties.



SHIIP Event in Wilber



"The average age of diagnosis is 62," says Dr. Julie Gralow, associate professor of medical oncology at the University of Washington School of Medicine and medical oncologist at the Seattle Cancer Care Alliance. "So the majority of women getting breast cancer are over the age of 50."

Gralow is especially concerned about the lack of women over 70 years of age in clinical trials.

"There are several situations unique to our older patients. We find it difficult to determine the toxicity levels of chemotherapy," she explains, "because we simply don't have enough information. This is significant because older women tend to have more tumors and thus be more sensitive to estrogen receptor positivity; or they might avoid chemotherapy altogether."

Lack of information is just one of several issues surrounding breast cancer in seniors. An obligation as routine as visiting the doctor can prove challenging if the patient cannot drive or does not have anyone to take her to the appointment. This is quite significant with cancer treatment, as the patient must make sixto-eight weeks of daily trips to the hospital for radiation therapies.

"Nausea and other side effects are often much more severe with older patients," explains Gralow. "And insurance of oral medicine can be spotty, especially if the patient depends upon Medicare." Gralow also notes the possible tensions between family involvement and doctor-patient discretion. "I need to know what the patient wants shared because we need to respect patient privacy while keeping the family informed. So, as with all medicine, we try to bring the patient and her family together for a meeting at the start of the treatment."

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Just For Laughs . . .



BEING FIVE A BOY AND HIS BLOG



BY GEORGE SFARNAS @ 2009 WHEN THE REST OF HIS BUDDIES JOIN HIM, I'LL HAVE SOMETHING TO JUMP IN!

"All our summer shade is falling down!"



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Always plant trees so that the prevailing wind blows the autumn leaves next door.



"We get twice the candy when we bring Marmaduke trick-or-treating."



"You shouldn't eat pumpkin pie near a jack-o'-lantern!"





Kidney Health



One in three Americans are at-risk for developing kidney disease. Risk factors include being diabetic, having high blood pressure, having a family history of the disease, and being over age 60. As we age, our kidney function gradually starts to decline.

Often times there are no symptoms and the disease can go undetected until it's very advanced. According to a study by John Hopkins University, more than 50 percent of adults over age of 75 are believed to have kidney disease. The National Kidney Association recommends having an annual screening for individuals over age 60 and those in high-risk groups.

Eating a healthy diet is important for our body's overall health and to promote a healthy kidney function. There are several "super" foods identified by the National Kidney Association as having a positive impact on kidney health.

Apples

Apples are a good source of fiber, packing in about 4 grams per serving. It contains a soluble fiber called pectin that can help lower cholesterol and glucose levels. It is also a source of antioxidants and anti-inflammatory compounds, which



can have positive benefits on kidney health. Apples are great to add in as a snack or dessert. Try thinly slicing an apple, sprinkling with cinnamon, and microwaving for approximately two minutes - delicious!

Blueberries



Blueberries contain high amount of antioxidants called anthocyanins. These antioxidants have been shown to protect the body against free radicals that may cause cancer and heart disease. Blueberries are

available all year round but their peak season is in the spring. Frozen blueberries are also a great option. Try adding in some blueberries to your oatmeal, yogurt, or smoothie for a sweet treat!

Fish

Fish provide healthy fats called Omega-3 fatty acids, which are essential to our body. Omega-3 fatty acids have been shown to have positive effects on heart health by lowering blood



pressure and triglyceride levels. More research has emerged that higher intake of omega-3 fatty acids may help protect against kidney disease. Salmon, albacore tuna, mackerel, herring and sardines are all good sources of Omega-3 fatty acids.

The American Heart Association recommends consuming fish at least two times per week. Baked salmon with lemon juice, ground black pepper and some fresh/dried dill is a delicious and easy meal!

Cabbage

Cabbage is a cruciferous vegetable that is packed full of phytochemicals that can help protect against damage from free radicals. Cabbage is also high in Vitamin K, Vitamin C and fiber.

There are many ways you can add cabbage to your di-

et. Try steaming, boiling or microwaving with some light seasonings and a little bit of butter. Chop and add to your favorite salad.



There are many

foods that we can incorporate into our diet to help promote healthy kidney function. If you have been diagnosed with kidney disease, discuss any diet-related changes with your doctor or registered dietitian.

Article is from Aging Partners

Senior Arthritis: Symptoms

Most people commonly think of arthritis as the condition of having painful, stiff joints. In fact, there are many kinds of arthritis, each with different symptoms and treatments. Most types of arthritis are chronic with symptoms lasting years.

Arthritis can attack joints in almost any part of the body. Some forms of arthritis cause changes you can see and feel such as pain, swelling, warmth and redness in your joints. Other types cause less troublesome symptoms, but slowly damage your joints.

Arthritis is one of the most common diseases in this country. Millions of adults and half of all people age 65 and older are troubled by this disease. Older people most often have osteoarthritis, rheumatoid arthritis, or gout.

Osteoarthritis

Osteoarthritis (OA) is the most common type of arthritis in older people. OA starts when cartilage begins to become ragged and wears away. Cartilage is the tissue that pads bones in a joint. At OA's worst, all of the cartilage in a joint wears away, leaving bones that rub against each other. You are most likely to have OA in your hands, neck, lower back, or the large weight-bearing joints of your body, such as knees and hips.

OA symptoms can range from stiffness and mild pain that comes and goes with activities like walking, bending, or stooping to severe joint pain that keeps on even when you rest or try to sleep. Sometimes OA causes your joints to feel stiff when you haven't moved them in a while, like after riding in the car. But the stiffness goes away when you move the joint. In time OA can also cause problems moving joints and sometimes disability if your back, knees, or hips are affected.



What causes OA? Growing older is what most often puts you at risk for OA. Other than that, scientists think the cause depends on which part of the body is involved. For example, OA in the hands or hips may run in families. OA in the knees can be linked with being overweight. Injuries or overuse may cause OA in joints such as knees, hips, or hands.



Rheumatoid Arthritis

Rheumatoid Arthritis (RA) is an autoimmune disease. In RA, that means your body attacks the lining of a joint just as it would if it were trying to protect you from injury or disease. For example, if you had a splinter in your finger, the finger would become inflamed-painful, red, and swollen. RA leads to inflammation in your joints. This inflammation causes pain, swelling, and stiffness that lasts for hours. This can often happen in many different joints at the same time. You might not even be able to move the joint. People with RA often don't feel well. They may be tired or run a fever. People of any age can develop RA, and it is more common in women.

SHIIP Event in Wilber



Medicare D's PDP (prescription drug plan) annual open enrollment event runs from October 15 through December 7 every year. This is a good opportunity to have your PDP compared to other plans for 2018—to see if there is a plan that would work better (be more cost effective) for you in the new year. The drug insurance companies are allowed to change their plans annually, either by changing the cost of the premiums, the drugs, or both, so you, too, are allowed to find and change to a plan that will better for you in 2018.

Volunteers from Lincoln's SHIIP (Senior Health Insurance Information Program) will be available in Wilber at the Dvoracek Memorial Library all day on Thursday, November 9, 2017, to do Medicare D Prescription Drug comparisons.

The staff at Saline County Aging Services (SCAS) are also SHIIP volunteers and will be doing Medicare D comparisons during open enrollment. The comparisons done by the SCAS staff will be on a first come, first served basis. A worksheet will need to be filled out stating which drugs you are currently taking. As in the past, the staff will do the comparison based on your worksheet and send you the results. Then if you wish to have questions answered or want to change plans, an appointment will be made.

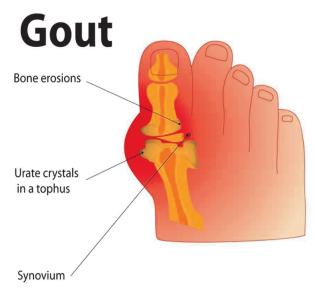
Please call SCAS at 402-821-3330 for more information and/or to set up an appointment to attend the SHIIP event at the library on November 9.

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RA can attack almost any joint in the body, including the joints in the fingers, wrists, shoulders, elbows, hips, knees, ankles, feet, and neck. If you have RA in a joint on one side of the body, the same joint on the other side of your body will probably have RA also. RA not only destroys joints. It can also attack organs such as the heart, muscles, blood vessels, nervous system, and eyes.

Gout is one of the most painful forms of arthritis. An attack can begin when crystals of uric acid form in the connective tissue and/or joint spaces. These deposits lead to swelling, redness, heat, pain, and stiffness in the joint. Gout attacks often follow eating foods like shellfish, liver, dried beans, peas, anchovies, or gravy. Using alcohol, being overweight, and certain medications may also make gout worse. In older people, some blood pressure medicines can also increase your chance of a gout attack.

Gout is most often a problem in the big toe, but it can affect other joints, including your ankle, elbow, knee, wrist, hand, or other toes. Swelling may cause the skin to pull tightly around the joint and make the area red or purple and very tender. Your doctor might suggest blood tests and x-rays. He or she might also take a sample of fluid from your joint while you are having an attack.



Other forms of arthritis include psoriatic arthritis (in people with the skin condition psoriasis), ankylosing spondylitis (which mostly affects the spine), reactive arthritis (arthritis that occurs as a reaction to another illness in the body), and arthritis in the temporomandibular joint (where the jaw joins the skull).

Arthritis Symptoms

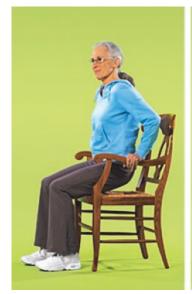
- Lasting joint pain
- Joint Swelling
- Joint Stiffness
- Problems using or moving a joint normally
- Warmth and redness in a joint
- Tenderness or pain when touching a joint

If any of these symptoms lasts longer than two weeks, see your regular doctor or a rheumatologist. If you have a fever, feel physically ill, suddenly have a swollen joint, or have problems using your joint, see your doctor sooner. Your health care provider will ask questions about your symptoms and do a physical exam. He or she may take x-rays or do lab tests before suggesting a treatment plan



Look for the treatments in next month's newsletter
Article is from aplaceformom.com

Exercise of the Month — Chair Dip





TARGETED MUSCLES: Arm muscles WHAT YOU NEED: Sturdy chair with armrests

This pushing motion will strengthen your arm muscles even if you are not able to lift yourself up off the chair.

- 1. Sit in a sturdy chair with armrests with your feet flat on the floor, shoulder-width apart.
- 2. Lean slightly forward; keep your back and shoulders straight.
- 3. Grasp arms of chair with your hands next to you. Breathe in slowly.
- 4. Breathe out and use your arms to push your body slowly off the chair.
- 5. Hold position for 1 second.
- 6. Breathe in as you slowly lower yourself back down.
- 7. Repeat 10-15 times. Rest; then repeat 10-15 more times.

Recipe of the Month

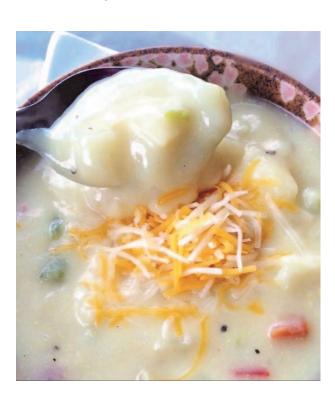
Creamy & Easy Potato Soup

Ingredients:

- 1 28oz package Potatoes O'Brien
- 1 packet Country Gravy Mix
- 32oz Chicken Broth

Directions:

- Mix all the ingredients together in a large pot.
- Bring to a boil while occasionally stirring.
- Once it's boiling, reduce heat and let it simmer until it begins to thicken. (The soup will continue to thicken as it cools).



The Fun Pages



Arachnophobia Moon Bat Black Cat Cauldron Costume Coven Evil Eye of Newt Garlic Ghost Goblin Haunting Hex Howl Midnight Monster

Nightmare Occult Phantom Potion Pumpkin Raven Salem Shrieks Silber Bullet Spooky **Tombstone** Vampire Wicked Witch

Ι E W T Ε Ι В

Riddle of the Month

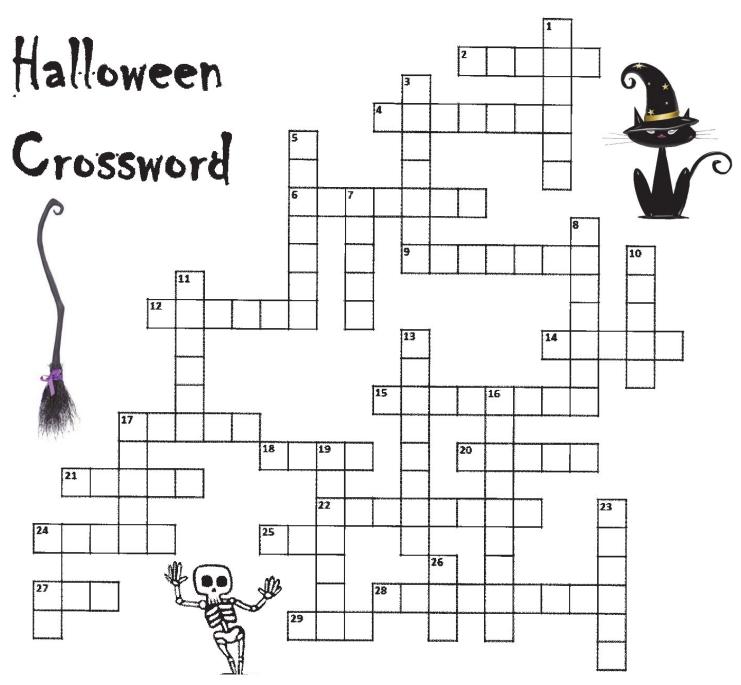
Zombie

We see it once in a year, twice in a week, and never in a day. What is it??

Answer the riddle correctly at Saline County Aging Services and get entered into a drawing to win a prize at the end of the month!

Please include your phone number with your answer!

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



Across:

- 2. Frightening
- 4. He hates garlic
- 6. Frankenstein had one
- 9. The Count
- 12. Where a vampire sleeps
- 14. ____ or treat
- 15. Scare
- 17. A skeleton is just a bunch 28. Playground for ghosts of these
- 18. Mr. O'Lantern

- 20. What the pot might call the kettle
- 21. stories
- 22. A boney sort of fellow
- 24. Found in Egypt
- 25. Lives in the belfry
- 27. Whoo? Whoo?
- 29. What a spider spins

Down:

- our skin crawl, it's this
- 3.____house
- 5. Makes a popular pie
- 7. When ghosts come out to 19. Disguise play
- 8. Fire burn, and ____ bubble
- 10. Samantha for example
- 11. Evil or mischievous creature

- 1. When something makes 13. Comes out on full moon nights
 - 16. October 31st
 - 17. Witch transportation

 - 23. Incey wincey is on of these
 - 24. Might be full, half, or new
 - 26. He swallowed the canary

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Where: Saline County Aging Services
109 W. 3rd St.—Wilber, NE
When: Wednesday, October 4, 2017
9 a.m.—12 p.m.



Aging Partners Nursing Students will check the following things:

- * Heart Rate/Blood Pressure
- * Grip Strength
- * Finger Stick Cholesterol
- * Finger Stick Glucose
- * Sahara Bone Density



Aging Partners Nutritionist
Paula Gooder-Ridder
will do nutrition Physicals with
hand grip testing.



ShopKo

Will be doing vaccinations. They will have:

- * Influenza
- * Whooping Cough (dTaP)
- * Pneumonia
- * Shingles
- *****Bring your Insurance/Medicare cards



Downtown Family
<u>Vision</u>

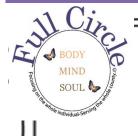


Audiologist—Cassie
Garner
From Hearing Care
at Home



<u>Deines Pharmacy</u> will have information on their Durable Medical Equipment

Full Circle





On Monday, October 23rd

we will have pizza and play Halloween Bingo!

Please bring a \$1 prize.

Over 60, suggested contribution \$3

Under 60, fee of \$4.

Come to 'The Back Room' - SCAS 12:00 PM

Please RSVP by October 20th to attend this event!

402.821.3330

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On Wednesday, October 25th we will

"Rethink Our Drinks"

Join us for a lunch of

Potato Soup and Warm Ham and Cheese

to be served in the cafeteria

at Friend Community Healthcare System at **noon**.

Please RSVP by October 17th to attend this event!

402.821.3330

For those over age 60: \$4.50 suggested contribution for the meal.

For those under age 60: \$5.00 fee



Announcements



AARP Elderly Safe Driving Class will be at the Wilber Care Center Tuesday, October 3, 2017 @ 9:30 am.

> Call for more information or to register for the class! 402-821-3330 or 402-821-2331



Have you moved? Do you have a new phone number? How about a new Emergency Contact? If any of this information changes please let us know so we can still get ahold of you!



Please don't hang up! We have a new phone system! To leave a message for Amy you will press 1. To leave a message for Laura you will press 2. To leave a message for Katie, you will press 3. Don't know who it is you are looking for? That's ok too, you can leave a general message and we will get it to the right person! Let us know if you are having difficulties and we will do our best to help you!



Interested in coming to one of our foot clinics? We have clinics in Dorchester, Crete, Friend and Wilber. Call Laura at 402.821.3330 to make an appointment near you!



As we know all too well, Nebraska weather can be very unpredictable. So please remember that Saline County Aging Services will be closed when

- the Saline County Courthouse is closed.
- Wilber-Clatonia Public Schools closes because of bad weather.
- We will come in late if the Wilber-Clatonia Public schools are having a late start because of weather.
- And if the closing happens to fall on a foot clinic day, the foot clinics will be cancelled. We will call you to reschedule your appointment.

Be safe this winter and know what the driving conditions are like before you try to go out and about! If you are not sure if Saline County Aging Services will be open or not, do not hesitate to call 402-821-3330 and find out!

Care Giver's Corner

Caregiver Depression: A Silent Health Crisis



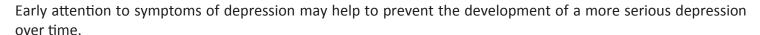
One of today's all-too silent health crises is caregiver depression. A conservative estimate reports that 20% of family caregivers suffer from depression, twice the rate of the general population. Of clients of California's Caregiver Resource Centers, nearly 60% show clinical signs of depression. And former caregivers may not escape the tentacles of this condition after caregiving ends. A recent study found that 41% of former caregivers of a spouse with Alzheimer's disease or another form of dementia experienced mild to severe depression up to three years after their spouse had died. In general, women caregivers experience depression at a higher rate than men.

Caregiving does not cause depression, nor will everyone who provides care experience the negative feelings that go with depression. But in an effort to provide the best possible care for a family member or friend, caregivers often sacrifice their own physical and emotional needs, and the emotional and physical experiences involved with providing care can strain even the most capable person. The resulting feelings of anger, anxiety, sadness, isolation, exhaustion—and then guilt for having these feelings—can exact a heavy toll.

Unfortunately, feelings of depression are often seen as a sign of weakness rather than a sign that something is out of balance. Comments such as "snap out of it" or "it's all in your head" are not helpful, and reflect a belief that mental health concerns are not real. Ignoring or denying your feelings will not make them go away.

People experience depression in different ways; they type and degree of symptoms vary by individual and can change over time. The following symptoms, if experienced for more than two consecutive weeks, may indicate depression:

- A change in eating habits resulting in unwanted weight gain or loss
- A change in sleep patterns—too much sleep or not enough
- Feeling tired all the time
- A loss of interest in people and/or activities that once brought you pleasure
- · Becoming easily agitated or angered
- Feeling that nothing you do is good enough
- Thoughts of death or suicide, or attempting suicide
- Ongoing physical symptoms that do not respond to treatment, such as headaches, digestive disorders, and chronic pain



The National Institute of Mental Health offers the following recommendations:

- Set realistic goals in light of the depression and assume a reasonable amount of responsibility.
- Break large tasks into small ones, set some priorities, and do what you can as you can.
- Try to be with other people and to confide in someone; it is usually better than being alone and secretive.
- Participate in activities that may make you feel better, such as mild exercise, going to a movie or ballgame, or attending a religious, social, or community event.
- Expect your mood to improve gradually, not immediately. Feeling better takes time.
- It is advisable to postpone important decisions until the depression has lifted. Before deciding to make a significant transition—change jobs, get married, or divorced—discuss it with other ho know you well and have a more objective view of your situation.
- People rarely "snap our of" a depression. But they can feel a little better day by day.



Care Giver's Corner Continued....

- Remember, positive thinking will replace the negative thinking that is part of the depression. The negative thinking will be reduced as your depression responds to treatment.
- Let your family and friends help you.

The most frequent treatment for depressive symptoms that have progressed beyond the mild stage is antidepressant medication such as Prozac or Zoloft, which provides relatively quick symptom relief, in conjunction with ongoing psychotherapy, which offers new strategies for a more satisfying life. A mental health professional such as a psychologist or psychiatrist can assess your condition and arrive at the treatment most appropriate for you.



Respite care relief, positive feedback from others, positive self-talk, and recreational activities are helpful in avoiding depression. Look for classes and support groups available through caregiver support organizations to help you learn or practice effective problem-solving or coping strategies needed for caregiving. For your health and the health of those around you, take some time to care for yourself.

The Family Caregiver Alliance fact sheet <u>Depression and Caregiving</u> offers a more indepth discussion of this issue and is available in both English and Spanish on the FAC website.

Article is from caregiver.com

October Activities

Fire Pup Day	Coffee 9am Bridge 10:30-230 Pitch 11a-2pm	Foot Clinic Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Bridge 10:30-230 Tai Chi 11a-12p Stepping On 1:30 Tai Chi 2:30-3:30	Foot Clinic Health Fair 9a-12 Lunch 12:00 p.m. Flu Shots 9a-1p	Tai Chi 9-10 Quilting 1-5 Board Mtg 5:30p Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00	6 Noodle Day	7
8	9 Coffee 9am Pitch 11a-2pm	Foot Clinic Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00 Stepping On 1:30	Foot Clinic Bridge 10:30-230 Lunch 12:00 p.m. Foot Clinic	Foot Clinic Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00	13	Dessert Day
15 I Love Lucy Day	16 Coffee 9am Work Day 9a-12p Bridge 10:30-230 Pitch 11a-2pm	17 Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00 Stepping On 1:30	18 Lunch 12:00 p.m.	19 Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00	20 Mammography Day	21
22	23 Coffee 9am Pitch 11a-2pm Full Circle 12pm	24 Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00 Stepping On 1:30	25 Bridge 10:30-230 Lunch 12:00 p.m. Full Circle 12pm	26 Tai Chi 9-10 Quilting 1-5 Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:30-3:30 Senior Dinner	27 Senior Luncheon- Friend Christian Assembly	28 Chocolate Day
Cat Day	30 Coffee 9am Pitch 11a-2pm	31 Tai Chi 9-10 Quilting 1-5 Trick or Trunk Tai Chi 930-1030 Tai Chi 11a-12p Tai Chi 2:00-3:00 Senior Dinner				
Key: Crete Dorchester Wilber Friend DeWitt			All foot clinics are by appointment only.	Interested in a foot clinic appointment for Wilber, Crete or Friend Call us at 402.821.3330	For DeWitt call Bev Plihal at 402.683.6475 or 402.520.0873	
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What's Happening Near You?

DeWitt Senior Center Meal Schedule

For meal reservations, call Bev at 683-6475 or 520-0873

WEDNESDAY, October 4th

Program—Ex-offenders Need a Second Chance

Menu—Chicken leg quarters, carrots, potato salad, & fruit

Bridge or Dominos

WEDNESDAY, October 11th

Program—Memory Challenge by June Knudsen Menu—Cod, fried potatoes, peas & fruit

Dominos or Cards

WEDNESDAY, October 18th

Program—Tri County Exchange Student

Menu— Chili, cinnamon rolls, cheese & crackers & fruit

Bridge or Dominos

WESNESDAY, October 25th

Program— Halloween Bingo (Bring \$1 prize) Menu—Sweet n Sour Pork, rice, broccoli & fruit

Celebrate Birthdays



Winner of September's riddle: Lorene Doremus of Crete

received a \$5 gift card to Subway! Get your answers in by the 15th for this month's riddle so you can be the next winner!

> The answer to September's riddle was NEEDLE.



A special wish to all of the October birthdays out there from Saline County Aging Services!

***We are just busting with activities this summer! Look for "Fascinating People" to come back in the fall. If you know a fascinating person in Saline County that we should honor and be proud of, please call us and nominate them at 402.821.3330

COMMUNITY SUPPER: Join community members of all ages and walks of life at the First Evangelical Lutheran Church in Wilber every Monday at 5:30 p.m. for a meal and fellowship. No cost, open to everyone regardless of age.

SENIOR CITIZENS DINNER: Come to the noon dinner on Thursday, October 26, 2017, in the Wilber Care Center's Activity Room. Please RSVP by October 20th to one of the following numbers: 821-2014, 821-2271 or 821-3259.

Interested in Home Delivered Meals??

For DeWitt call: 402.683.6475

For Wilber & the rest of Saline County call: 402.821.3330



Service Spotlight



Answers to last months puzzles.

Durable Medical Equipment



Saline County Aging Services makes free, short term loans of durable medical equipment to any Saline County Resident, regardless of age!

Our loan program is perfect for individuals :



- Recovering illness or injury
- Recuperating from surgery
- Attending events, doctor's appointments or day trips
- Trying a new device before buying one
- Students with sports injuries or recovering from sprains, strains or breaks

Our Equipment



- Walkers
- Grab Bars
- Wheelchairs
- * Crutches
- Toilet Risers
- * Canes—regular
- Tub/Shower
- and quad
- chairs, stools
- Portable
- and benches
- commodes







2017 HOLIDAYS that SCAS WILL BE CLOSED

Saline County Aging Services will be closed in observance of the following County holidays.

If in doubt, please call 402-821-3330.

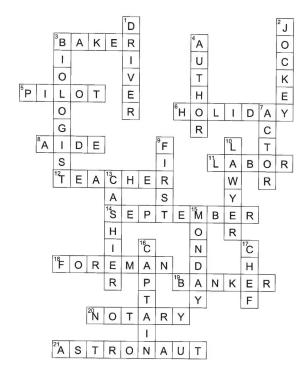
Oct. 9 Columbus Day

Nov. 11 Veterans' Day

Nov. 23 Thanksgiving

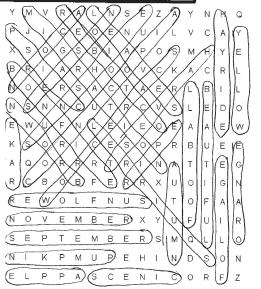
Nov. 24 Day after Thanksgiving

Dec. 25 Christmas Day



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





Do you want the Saline County Aging Services Newsletter sent to your door?



Cut this slip out, fill the information in below, and mail it to Saline County Aging Services-PO Box 812-Wilber, NE 68465 or bring it into our office at 109 W. 3rd Street in Wilber or call us at 402-821-3330.

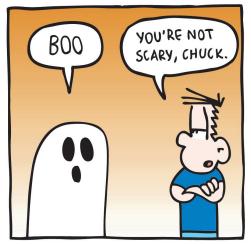




Name: Mailing Address:



If you would rather have it send via email, please provide your email address, printing carefully









Mark your calendars!



Medicare Prescription Drug Enrollment

October 15 - December 7

Improving and enriching the quality of life and independence of older persons in Saline County PO BOX 812, 109 W. 3rd Wilber, Ne 68465 402.821.3330





20 | Saline County Aging Services | 20

origin, sex, age, or disability. on the basis of race, color, national or activity, or activity, or activity, efits, or otherwise subjected to discrimcluded from participation, denied benensuring that no person is ex-Saline County Aging Services is com-Saline County individuals over 60 and their caregivers. Le of Saimmer gord gaibivord of bates saline County Aging Services is dedi-





PO BOX 812, 109 W. 3rd Wilber, Ne 68465 402.821.3330

Vinuo Saline County of life and independence of older persons in Saline County



