

ANNIE'S MAILBOX

Torn by brother's addictions

Dear Annie: My adult brother is a drug addict. "Keith" has been in and out of rehab programs, but hasn't succeeded in staying clean. He lies to family members and lives in his car and various fleabag motels. He is still working, but only enough to support his habit. Frankly, I'm amazed he can hold down a job.



Kathy Mitchell & Marcy Sugar

I feel torn when it comes to being in his company and having him in my home. I try to be understanding of his addiction, but I am extremely uncomfortable around him. And I don't trust him. He stole from my parents, and when he received thousands of dollars through an inheritance, he spent all of it on drugs.

Am I wrong to want to distance myself from my brother? Keith keeps saying he's going to get his act together, but it hasn't happened. Meanwhile, I dread his calls because I feel obligated to listen to his sob stories, and then I feel guilty for wanting him to leave me alone. How do I handle this?

— *Torn in Maryland*
Dear Torn: It's hard to remain lovingly invested in the life of a drug addict. It requires tremendous patience and effort, and there's no guarantee of a payoff. You do not need to have Keith in your home if he is not trustworthy, nor do you have to spend a great deal of time in his company. However, if there are family gatherings, we urge you to be there, not only to support your parents but to give Keith hope that his family has not given up on him. Please contact Nar-Anon (nar-anon.org) at 1-800-477-6291. It's an excellent resource for friends and relatives of drug addicts.

Dear Annie: My sister-in-law, "Edith," is a professional organizer. Recently, we invited her to our home for a social visit, along with her husband and children.

While here, Edith noticed a messy pile of papers on my kitchen counter. She took it upon herself to sort through the papers, unsolicited, going so far as to open a folder to determine its contents. I was so shocked that I didn't know what to say.

I am reluctant to invite Edith into my house again because I feel her behavior was an invasion of our privacy. Is this acceptable conduct from a professional organizer?

— *Fuming Sister-in-Law in Canada*
Dear Fuming: Professional organizers do not stick their noses in your private papers without an invitation. Edith sounds like a Nosy Nellie who found a career that suits her proclivities. However, she is your sister-in-law, and cutting her off will create hard feelings within the family.

Instead, give her the benefit of the doubt and assume she is overly accustomed to going through people's things. If you catch her at it again, say with a smile, "Edith, I know you are only trying to help in your professional capacity, but we insist you let us clean our own messes." Then steer her somewhere else.

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Stroke rehab doesn't have to be high-tech to help

By ALICIA CHANG and MARILYNN MARCHIONE Associated Press

The largest study ever on stroke rehabilitation found that doing physical therapy at home improved walking just as well as a high-tech treadmill program.

More surprising, patients who started rehab late — six months after their strokes — still improved. It's long been thought that there was little to gain from rehab after half a year.

"We now have evidence that a prolonged course of therapy will have benefits," said Dr. Jeffrey Saver, director of the stroke center at the University of California, Los Angeles. "For virtually everyone, we should be doing more intensive therapy than we are."

He had no role in the federally funded study, which was led by Duke University researchers and discussed Friday at an American Stroke Association conference in Los Angeles.

Each year, nearly 800,000 Americans suffer a stroke, and up to two-thirds of survivors have problems walking. Sophisticated machines like robots and weight-supporting treadmills increasingly are being used, but there's limited research on how well they work compared to more traditional therapy.

Such equipment is popular in high-end rehab hospitals like the one in Houston where Rep. Gabrielle Giffords is being treated after her gunshot wound to the head.

The new study included 408 stroke survivors who had trouble walking. On average, they took 1,700 steps a day; normal is 10,000 steps a day. They either traveled to a facility to get high-tech rehab or received physical therapy at home. Some began therapy two months after a stroke; others started six months after the stroke to see if there was a difference.

In high-tech rehab, patients exercised on a treadmill while their weight was supported



Physical therapist Joann Gallichio, seated, and assistant Amanda Ayala, left, use a body weight treadmill system to help train a stroke patient with walking. Associated Press

by an overhead harness. As they gained speed and endurance, they could practice walking on their own.

In the home program, a physical therapist helped patients do exercises to improve strength and balance, and to walk every day.

After a year, both groups made similar improvements in how far and how fast they could walk. However, the treadmill exercisers were more likely to feel dizzy or faint during training, and had a higher risk of falling.

What's more, fewer patients dropped out of the home therapy — 3% compared to 13% in high-tech rehab.

"There's a tendency in our country to go

to high-tech machines," but this study shows they're not always better, said Dr. Walter Koroshetz, deputy director of the National Institute of Neurological Disorders and Stroke, the study's main sponsor.

The bigger message, said study leader Pamela Duncan of Duke University, is that longer treatment and more treatment is best. She said many insurance companies allow 20 visits, while this study gave 36.

The care that stroke victims usually get now — less intense therapy for three to six months — "does not get them to the point where they could be," Koroshetz said.

Doctors are working on a cost comparison, but believe the home program is much cheaper. High-tech rehab requires expensive equipment and two to three therapists per patient; the home program needs only one.

Also at the conference:

Doctors may be missing "silent strokes" in a small but significant number of children with severe anemia, who may be unfairly labeled as slow learners when in fact they have a medical problem.

Strokes have long been known to be a risk for kids with sickle cell anemia, an inherited blood disease. The new study found they also were occurring undetected in children with other conditions that can cause anemia, such as cancer, kidney failure or blood loss from trauma such as a car crash.

"I don't think there's any reason to panic," but doctors need to consider the possibility of stroke when treating any child with severe anemia, said Dr. Michael Dowling of the University of Texas Southwestern Medical Center in Dallas.

Dowling led the study involving 52 children at Children's Medical Center Dallas — 22 with sickle cell and 30 with other causes of severe anemia.

SLEEP AND WEIGHT LOSS FROM PAGE A13

Eating several small, well balanced meals throughout the day is key in maintaining healthy eating habits, Levine said.

"You want to go by your hunger level. A good rule of thumb is that you should get hungry for a snack every four hours. If you're not hungry for six hours after a meal, then the meal was too big."

Eliminating caffeine after about 2 p.m. and alcohol before getting some shut-eye will lead to better sleep. Levine said there are some foods are unexpected sources of caffeine such as root beer, dark chocolate and some medications.

Sleeping on an uncomfortable, old mattress may make it difficult for some people to sleep, according to Stanley Haywood, manager of Palmdale's Sit 'n Sleep store. He said a good mattress can improve the quality of sleep.

"A good mattress can go a long way," Haywood said. "If the mattress is great you will sleep deep and you will feel like you got eight hours of sleep."

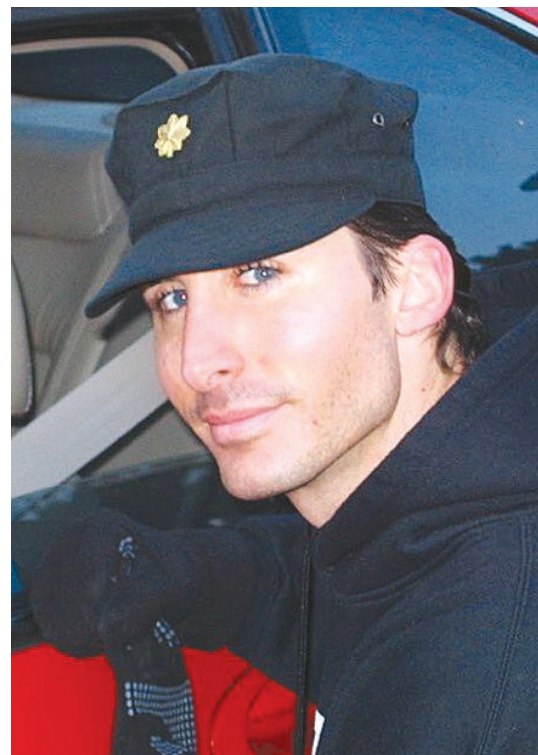
Exercising regularly can also help improve sleep quality, and getting enough sleep will improve how well your exercise, according to Jay Kerwin, owner of Boot Camp LA, an outdoor military-style fitness program in Los Angeles.

"Some people have never gotten eight hours of sleep," he said. "Most people don't realize the extreme results that can come from getting enough sleep."

Kerwin said sleep is especially important after visiting the gym or working out because the body needs time to rest in order to repair itself.

"When you get eight hours of sleep your body will come back stronger," he said. "What you eat is extremely important, too, because that is what your body will repair the damage with."

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Trainer Jay Kerwin

MYTRAK FROM PAGE A13

reached when your health circle on the M2 turns green.

Heart disease is nothing to be taking lightly, health experts said.

According to the Centers for Disease Control (CDC), about 785,000 Americans will suffer their first heart attack in 2011. In the United States, someone has a heart attack every 34 seconds. Each minute, someone in the U.S. dies from a heart disease-related event.

American Heart Association statistics reveal 81.1 million Americans have some form of cardiovascular disease, which can include (but is not limited to) cardiovascular disease, stroke, congestive heart failure, high blood pressure, and high blood cholesterol.

Although many people believe heart disease is primarily a male disease, that only holds true in the 20-39 age group.

Men and women have an equal prevalence (39.6%) in the 40-59 age group and are nearly equal in the 60-79 age group with the men's prevalence rate at 73.6%, and women at 73.1%.

In the 80-plus age group, the rate for women is 84.7% compared to men at 78.8%.

The American Heart Association warns that heart disease is the leading cause of death of women older than 60.

The top cause of heart disease is smoking. Smokers have a significantly higher incidence of heart disease than non-smokers. Smoking increases blood pressure, decreases a person's ability to exercise properly and increases the tendency for blood to clot, which can result in heart attacks and strokes.

High blood pressure is known as "the silent killer" because there are no obvious symptoms.

An optimal blood pressure reading is 120/80, with the systolic, or the top number, representing the pressure while the heart is beating, and the diastolic, or bottom number, signifying the pressure when the heart is at rest. High blood pressure is considered 140/90.

Another leading

cause of cardiovascular disease is high cholesterol. Desirable total cholesterol levels are those less than 200.

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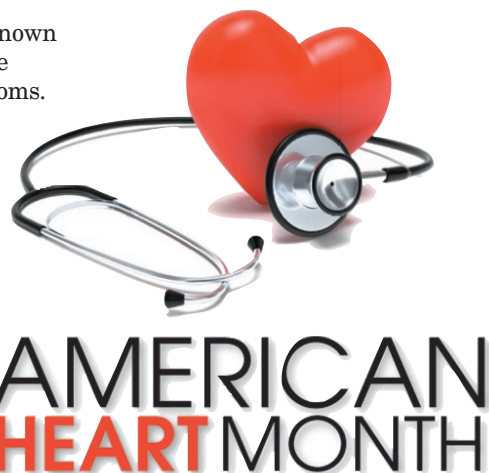
monitors, challenges, and guides them as they go about their day; challenging users to stay active and helping them achieve their goals, representatives said.

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