

**VOLUNTEERING**

# TEEN CROONER BRINGS JOY TO SENIORS

By Courtney Diener-Stokes  
For MediaNews Group

When Vincent Romano was growing up, there was always music by Frank Sinatra, Dean Martin and Elvis Presley playing when he would visit his grandfather in Havertown, Delaware County.

Little did he know, these legendary crooners would stick with him and form the basis of his musical preferences as a college student.

Drawn to music and singing, Romano, 19, sang in the choir when he was in elementary school and performed in a musical theater show.

"I also sang in middle and high school choir and I sang the National Anthem to open up a Little League game," he said.

During high school, he was required to do a project that centered on volunteerism.

"My dad thought it would be a good idea for me to sing at retirement homes," he said.

So he tracked down a suit, tie and fedora to complete his look and started volunteering his time to perform in front of senior residents.

"I get to sing my type of music, like Sinatra, Dean Martin and Michael Bublé, and I like performing in front of people a lot," Romano said. "When I get to sing 'New York, New York' and 'My Way,' I get to express myself."

A sophomore at East Stroudsburg University, Romano still performs at retirement homes during the summer and spring break when he's off from school.

"I'm up to 40 retirement homes," he said, adding that he has performed at some of them five times. "A lot of the retirement homes end up having me back, and now I'm making a little money off of it."



COURTESY OF MICHAEL ROMANO

Vincent Romano performs shows at retirement communities during his time off from college.

**TO BOOK A PERFORMANCE**

Vincent Romano performs at retirement communities, where he sings music by Frank Sinatra, Elvis Presley and more.

Romano, who lives in Exton, Chester County, is willing to travel a bit to perform. He has performed at Southampton Estates in Bucks County, Country Meadows of Wyomissing in Berks County and Tel Hai in Honey Brook, Chester County.

Romano enjoys seeing the direct impact he makes on his audiences, including a resident he recalled who was able to go



COURTESY OF MICHAEL ROMANO

Vincent Romano has performed at over 40 retirement homes.

ROMANO » PAGE 2



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# Romano

FROM PAGE 1

back to a special moment in her life.

"The last time I went to Tel Hai, 'My Way' was a song her and her husband danced to at her wedding," he said.

Romano, who is a triplet and the only singer among his siblings, said when he arrives at retirement homes to perform his one-hour sets for the first time, expectations are typically low.

"At first they see a kid, and by the end they are clapping and on their feet," he said.

Romano's favorite songs to perform are "Can't Help Falling in Love" by Elvis Presley and "My Way" by Frank Sinatra.

"Not that many people are into that kind of music," he said. "Getting to keep that type of stuff alive and doing it for an audience that appreciates it, that is what I really like about performing."

To get into character when singing, Romano drinks water out of a martini glass.

"We go all out in the theming department," he said.

Romano's father, Michael, accompanies him to his shows.

"My dad tags along with me and he serves as the sound check," Vincent said.

Michael has an ulterior motive to help his son, aside from being in charge of the sound quality of the shows.

"It lets me spend more time with him when he's home for the summer," Michael said.

He also enjoys talking to the residents at the facilities.

"They come up after and say what a good job he did," Michael said. "It makes you proud about that, and he's making the old people feel good."

One of the more memorable performances for Michael took place at Ca-



COURTESY OF MICHAEL ROMANO

Vincent Romano, left, and his father, Michael.



COURTESY OF MICHAEL ROMANO

Vincent Romano, performing at a retirement community, was introduced to the music of legendary crooners by his grandfather.

milla Hall Convent Home & Healthcare Center in Malvern, Chester County. "Some of the nuns were dancing and they were

having fun and really enjoying it," he said. "They pre-booked him for a New Years' party."

## PROMOTING SENIOR WELLNESS

# Volunteering and seniors: so much to give, so much to gain

By Jennifer Singley

While retirement is often a much-anticipated life milestone associated with relaxation, freedom to travel and more time spent with loved ones, many older adults who have bid their final farewell to the workplace find themselves unsure of what to do with all the newfound time on their hands.

Whether young or old, volunteerism presents a host of benefits to well-being and offers a balanced approach to aging in a meaningful and satisfying way.

### Improved health

Seniors who volunteer have been found to have decreased stress and lower blood pressure than their non-volunteer peers. Additionally, staying active through volunteering has been shown to improve cognitive health. In one study, researchers found that individuals aged 51 and older who were involved in formal volunteering showed improved working memory and processing over time.

The positive physical and mental health benefits that result from serving others are important contributors to well-being in older age.

### Social connections

Volunteering is an excellent way to forge and maintain ties to others in the community. With over a quarter of seniors living alone and at risk of social isolation, volunteering is a way to fulfill the human need for social contact while simultaneously lowering the risk of depression,



PIX4FREE

topic you know little about.

Volunteering in an area that requires you to learn new skills is a simple and fun way to build cognitive reserves while at the same time reaping the health and social benefits that come with serving alongside others.

### Giving back

At the heart of all volunteering is the simple yet profound feeling of giving back. Service to others is linked to greater life satisfaction and happiness, as those who volunteer are helping others who rely on them.

No matter how many hours spent volunteering or how few, giving one's time inevitably enhances one's sense of purpose in life.

anxiety and a host of other ailments.

Additionally, one study revealed that time spent with friends and time spent in social activities were associated with longevity among seniors age 70 and over. Serving others through volunteering gives context to our lives through connections to others.

### Learning new things

Aside from simply being interesting and fun, learning new things has been shown to improve neuroplasticity in the brain — a phenomenon that can help prevent the onset of Alzheimer's disease symptoms even when as many as all other risk factors are otherwise present.

In a 2009 study of nuns, researchers discovered that even in a brain that shows all the physical signs of Alzheimer's disease, the presence of symptoms can be prevented by growing new synapse connections in the brain, which increases one's cognitive reserve.

The best way to increase cognitive reserve is not by engaging in activities that only require you to retrieve information you already know, but by challenging the brain to learn new material — such as taking up a foreign language, reading a book, meeting new people or by taking a class on a

*Promoting Senior Wellness is provided by The Hickman, a Quaker-affiliated licensed personal care home in West Chester. Call 484-760-6300 for a tour. Visit [www.thehickman.org](http://www.thehickman.org) for more information. Our volunteers are a valued part of life here at The Hickman. Not only do we welcome many compassionate volunteers from the community, we also offer numerous opportunities for our own residents to engage in acts of service — such as creating pins to raise money for Ukraine relief efforts, assembling centerpieces and decor for holiday events, collecting donations for food drives and spending intergenerational time with children from neighboring West Chester Friends School.*

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SPOT OF T

# MY SWEET EMBRACEABLE YOU

By Terry Alburger

Consider the hug. Simple enough, right? A hug is a hug... or is it? I definitely beg to differ!

As a huge proponent of the benefits of hugs, I can sense immediately a person's personality type just by a hug.

I'm a hugger. Always have been, likely always will be. I have to say, the pandemic was tough on us huggers. It's hard to hug and maintain social distance!

There are many kinds of hugs in this world. Of course, there is the one we encounter most, the polite hug. This is a socially acceptable form of greeting, used in those in-between circumstances ... you know, when you are not exceedingly familiar with the person, but you can tell right away that they are warm and compassionate. It is brief and loose, but it is sincere.

I've used this many times when one of my daughters introduces me to a close friend of hers.

The adage, "Any friend of yours is a friend of mine" applies here. If my daughter loves you, you must be a good human being. I want them to "feel the love" but not feel creeped out! The hug is short in duration, and very loose — there is usually some space maintained.

Then there is the bridge hug. Shoulders are in close proximity, but your feet maintain a good 10 inches or so in distance. Usually this is cheek-to-cheek and is a more casual hug. Perhaps you are at a family reunion and there she is ... Aunt Bertha, who you have not seen in decades. Other than the blood relation, you have no real connection. But it is Aunt Bertha, so she does



WIKIMEDIA COMMONS

There are lots of types of hugs, and all of them are good for you soul.

deserve a hug. This one is perfect.

Of course, coming from a Hispanic family, I'm very familiar with the hug and double-cheek kiss. Any friend or family member of a Latin family can tell you this is the norm when you meet someone for the first time. A heartfelt hug always accompanied by a kiss on each cheek. It is the equivalent of a handshake in other countries.

You've probably been the recipient of the patting hug, right? Where someone hugs you and pats your back si-

multaneously. This, in my mind, is more of a comfort hug. It conveys concern and compassion. I also call it the bro hug, where two guys meet and, in a masculine way, mind you, share a hearty pat and cursory hug.

Then of course, there is the ragdoll hug, where one or both parties are devoid of commitment to the hug itself, rather just going through the motions because they think it is somehow an obligatory greeting. It's aloof, no real emotion is conveyed. This reminds me of teenagers greeting each

other, just going through the pubescent motions of salutation.

The message is genuine, it's a way of saying, "Hey. Nice to see you."

Though it may lack substance, it still conveys a nice message.

Yes, there are many types of hugs, but by far, my favorite is the bear hug. This one is real, its message is clear. There is emotion conveyed. As the recipient of this hug, you walk away feeling the love, as it were.

Your kids and grandkids are a great example of this

one. This kind of hug requires no words to accompany it. You just know. I experienced this one just a week ago, when a close friend and coworker retired. A friend for nearly two decades, she was moving hundreds of miles away. That final hug — there were volumes spoken with nary a word. The hug said it all. I love you too, lady.

Whatever kind of hug you encounter or give to others on any given day, enjoy it. A hug is great therapy, a great way to express your feelings and a great way to

make someone's day. Hugs are known to reduce stress, boost your immune system, reduce fear and help combat depression.

And it is a great way to make someone's day. There are so many great side effects of a good hug. So don't keep it to yourself — share generously!

In a study at a retirement community in New York, residents who shared three or more hugs a day were generally happier, slept better and shared better health. So, what do you have to lose? Hug someone today!



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FRIENDSHIP

# Friends for life

**Berks County women's longtime friendship is "pure gold."**

By Susan Shelly  
For MediaNews Group

They've shared their lives for more than 70 years, celebrating each other's accomplishments, watching their children grow up and raise families of their own, laughing at each other's jokes and consoling one another during times of disappointment and loss.

The four dear friends met for lunch recently, during which they caught up on what's been happening in each other's lives, recalled some fond memories and contemplated the future.

Nancy Bechtel of Reading, Sylvia Krallis of Flying Hills, Elaine Laws of Wyoming and Shirley Templin of Shillington have been friends since they were seventh-graders, with Laws and Krallis' friendship extending back to the third grade.

Now at 85 or 86 years old, their bond remains strong.

"There was never any doubt that we were there for other, and that's still true," Krallis said. "We've been through everything together."

Krallis and Laws became friends when they were students at Reading School District's Charles S. Foos Elementary School, which closed in 1979. They met Bechtel and Templin when they all started attending Northwest Junior High School.

They became a tight group, helping one another through their classes, attending dances at Calvary United Church of Christ on Centre Avenue, sleeping over at each other's houses and forging together through Rainbow for Girls, a youth service organiza-



COURTESY OF SUSAN SHELLY

These best friends for more than 70 years are, from left, Elaine Laws, Shirley Templin, Sylvia Krallis and Nancy Bechtel.

tion associated with the Masonic Lodge.

The friends separated for a time following their graduation from Reading High School in 1954. Laws and Krallis got married and accompanied their husbands, both of whom were serving in the military, to various locations in the United States and Europe. Bechtel and Templin remained in Reading, got married and started families.

A friendship like theirs was destined to survive, however, and when Laws and Krallis and their husbands returned to Reading, they picked up where they had left off.

"Everybody came home, and we raised our families together," Templin said.

With their husbands and children, the friends had raking parties and picnics at each other's houses. Together, they celebrated holidays, birthdays and graduations.

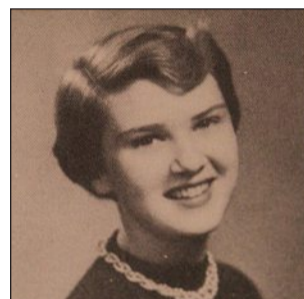
"We couldn't afford to do



Elaine Laws in her senior yearbook.



Shirley Templin in her senior yearbook.



Sylvia Krallis in her senior yearbook.



Nancy Bechtel in her senior yearbook.

much when our kids were little, but we always had a lot of fun," Laws said. "Everything we did together was good."

Once their children were grown, the women and their husbands would meet once a month for dinner at one another's homes. They welcomed grandchildren together, supported each other through tough times and simply enjoyed each other's company.

"Our husbands all got along, and we'd just be together and have a good

time," Bechtel recalled.

Eventually, the friends coped with illness and loss together. Bechtel lost her husband, Bruce; Templin's husband, Kenneth died; and Krallis' husband, Peter, also passed away. Laws and her husband, Ronald, have been married for 67 years.

They supported each other through those losses and serious illnesses of their own. Bechtel recently moved from her home in Flying Hills, where she and Krallis were neighbors, to an assisted living facility.

"We've been through it all — through it all," Templin said.

Reflecting upon their lives, the women agreed that a friendship like theirs is invaluable.

Krallis said her children, who do not live in this area, often ask her to move closer to them or into their homes.

"But I tell them I won't move," she said, looking at her friends. "I wouldn't want to leave these three."

All churchgoers, the women share a strong faith. Although they are wary

about the future for their grandchildren and great-grandchildren, they continue to hope for the best.

"It scares me a little to think about the future, but we can't lose faith," Laws said. "It's in God's hands."

Meanwhile, she remains grateful.

"This friendship has fed us through some very tough times. It's been absolutely a blessing to have each other," Laws said.

Templin agreed. "It's pure gold," she said. "Pure gold."



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WHITE HORSE VILLAGE

# White Horse Village establishes a new charitable foundation

For MediaNews Group

White Horse Village, a nonprofit active senior living community in Edgmont Township, Delaware County, announced the establishment and approval of the White Horse Village Foundation Inc., a nonprofit 501(c)(3) organization.

The foundation will replace the White Horse Village Endowment Fund, which has served as a nonprofit entity to receive and administer donations to support White Horse Village.

In 1991, White Horse Village residents created

a Resident's Reserve Fund to assist residents who might suffer financial reverses so they would not be forced to leave the community. In 1993, residents recognized other needs, and The White Horse Village Endowment Fund was established as a 501(c)(3) nonprofit entity.

For three decades, the fund successfully supported campus improvements, the Resident's Reserve Fund, special community activities and educational scholarships for team members.

White Horse Village is dedicated to implementing new strategies to meet

the evolving needs of current residents while responding to the changing environment of providing housing, healthcare and other services to older adults.

The new organizational structure of a public foundation allows the senior living community to expand external fundraising sources, such as private or family foundations, individual donors, donor-advised funds or government agencies, to support programmatic and physical improvements.

"I anticipate that transitioning from an endowment fund to a foundation

will open possibilities for attracting external funding to support innovative programs for senior living while continuing the traditional community-based programs of the former Endowment Fund," said resident Robert Bruce, president of the board of directors of the White Horse Village Foundation Inc.

Susan Abtouche, vice president of mission enhancement for White Horse Village, has been named as executive director of the White Horse Village Foundation Inc.

Abtouche is a certified professional fund-

raiser with over 18 years of experience in the senior living industry. She has been a member of the White Horse Village management team for nearly four years and has served as the executive liaison between White Horse Village and the former endowment fund.

"I'm excited to work with Susan and the foundation board of directors," said Len Weiser, president and CEO of White Horse Village. "I want to thank the former Endowment Fund trustees and the current foundation board of directors for their leadership in building a

strong endowment fund and their vision for creating our new foundation."

"I look forward to leading the White Horse Village Foundation and expanding opportunities for funding and continued growth while preserving the spirit and intent of the original residents who established the Endowment Fund," said Abtouche, vice president of mission enhancement. "Donations have made, and continue to make, a positive difference to the quality of life in our community."



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ASK RUSTY

# I'm getting spouse benefits, what happens to my own?

By Russell Gloor

**DEAR RUSTY»** I was born in late 1951. When I retired five years ago, I was made



Russell Gloor

aware that my own Social Security benefit was less than half of my husband's SS benefit. So, I chose to take half of his.

What happens to my undispensed SS dollars? On the off chance the balance increases beyond the amount I am now col-

lecting, can I eventually switch to my own full SS amount?

*Signed: Curious Senior*

**DEAR CURIOUS SENIOR»** Much depends on exactly how you claimed your SS benefits five years ago and your age when you claimed. Because you were born in 1951, if you had reached your full retirement age (FRA) of 66 when you claimed SS five years ago and your husband was already collecting his benefits, you had the option to file a "restricted application for spousal benefits only," which would have enabled

you to collect only your spouse benefit while letting your own benefit continue to grow.

But if you were not yet 66 when you claimed, the restricted application wasn't available to you, so you are now receiving your own benefit plus an additional amount to bring your payment to your spousal amount.

I expect that the latter is the case (that you didn't file a restricted application), which would mean that your current payment amount consists of two parts — your personal benefit (from your own lifetime work record) plus a spousal boost to bring

your payment to your spousal entitlement.

Except for the restricted application, Social Security always pays your own benefit amount first and then supplements your own benefit with an additional amount to give you what you're entitled to as a spouse. Thus, your personal benefits aren't undispensed — you're already getting them, plus a spousal supplement.

Just to complete the picture, if you did file a "restricted application" at age 66, then your own benefit continued to grow until you were 70 (at which point it reached maximum). The growth

amount would have been 8% per year additional benefit, so at age 70 your own benefit would have been 32% more than your FRA amount. If you know what your own FRA benefit amount was, then increase that by 32% to see if your own amount is now higher and, if so, contact Social Security to apply for your own higher benefit.

If you don't know what your personal FRA amount was and/or are uncertain if you filed a restricted application, you'll need to contact Social Security directly to see if you're entitled to any additional amount based on your own lifetime work record.

You can contact Social Security at either the national center (800-772-1213) or at your local office (find the number at [www.ssa.gov/locator](http://www.ssa.gov/locator)). If you are currently getting spouse benefits only under a restricted application and your personal benefit is now higher, since you'll soon be 71 you should request six months of retroactive benefits when you switch from the restricted application to your own benefit.

*Russell Gloor is a certified Social Security adviser by the Association of Mature American Citizens: <https://amac.us/social-security-advisor>.*

TECHNOLOGY

# More seniors using computers for entertainment

By John Grimaldi

Statistics show that a growing number of senior citizens are becoming tech savvy. Perhaps the isolation protocols of the pandemic have helped encourage the elderly set to accept computers as a means of keeping in touch with friends and relations and as a way to shop online.

The FandomSpot website, focused on internet content, recently conducted a survey of 1,000 computer users aged 65-plus and found that most of them, 76%, go online because it helps to stimulate their brains.

The poll also found that nearly half of those who took part in the survey had spent \$500 or more on computer paraphernalia.

As FandomSpot's Alyssa Celatti told the New York Post: "Old people don't just want to sit on the porch and watch leaves fall, they want

to have fun. This study might even encourage more senior citizens to give gaming a go for some of the benefits cited by their peers."

That's all well and good, but there is a sinister side of online gaming when gaming is a synonym for gambling.

Rethinking65.com, an online resource for financial advisors, warned that "As (online) gambling platforms multiply, some people in or near retirement might be tempted to roll the dice on their wealth accumulated over a lifetime. And financial advisors may find themselves on the front line of helping clients for whom casual gambling becomes a compulsion that could drain their savings."

For some seniors, gambling might be a stimulant, but for others it could be all about the appeal of so-called easy money, especially for those on fixed incomes.

"But gambling also can numb the pain of chronic

health problems and provide an escape from lifestyle issues. It can distract from anxiety," said Felicia Grondin, executive director of the Council on Compulsive Gambling of New Jersey.

And she told Rethinking65, "The proliferation of new casino locales and of heavily advertised online gaming sites can be a siren call to those filling emotional needs."

The Centre for Addiction and Mental Health, Canada's largest mental health teaching hospital, says that gambling is not a problem for most people, including seniors. CAMH provides a list of things to look for that might signal that it has become or is becoming a problem:

- Spending more on gambling than intended
- Feeling bad, sad or guilty about gambling
- Placing larger, more frequent bets
- Not having enough



DEPOSITPHOTOS

More older Americans are using computers for entertainment purposes.

money for food, rent or bills after gambling

- Loss of interest and participation in normal activities with friends and family
- Placing a high priority on gambling
- Being secretive about

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HEALTH

# Long COVID symptoms are often overlooked in seniors

By Judith Graham  
Kaiser Health News

Nearly 18 months after getting COVID-19 and spending weeks in the hospital, Terry Bell struggles with hanging up his shirts and pants after doing the laundry.

Lifting his clothes, raising his arms, arranging items in his closet leave Bell short of breath and often trigger severe fatigue. He walks with a cane, only short distances. He's 50 pounds lighter than when the virus struck.

Bell, 70, is among millions of older adults who have grappled with long COVID — a population that has received little attention even though research suggests seniors are more likely to develop the poorly understood condition than younger or middle-aged adults.

Long COVID refers to ongoing or new health problems that occur at least four weeks after a COVID infection, according to the Centers for Disease Control and Prevention. Much about the condition is baffling: There is no diagnostic test to confirm it, no standard definition of the ailment, and no way to predict who will be affected.

Common symptoms, which can last months or years, include fatigue, shortness of breath, an elevated heart rate, muscle and joint pain, sleep disruptions and problems with attention, concentration, language and memory — a set of difficulties known as brain fog.

Ongoing inflammation or a dysfunctional immune response may be responsible, along with reservoirs of the virus that remain in the body, small blood clots or residual damage to the heart, lungs, vascular system, brain, kidneys or other organs.

Only now is the impact on older adults beginning to be documented. In the



COURTESY OF KAISER HEALTH NEWS

Terry Bell, who spent two weeks in intensive care and has been diagnosed with long COVID, says he now walks with a cane for only short distances and is 50 pounds lighter than before getting sick.

largest study of its kind, published recently in the journal BMJ, researchers estimated that 32% of older adults in the U.S. who survived COVID infections had symptoms of long COVID up to four months after infection — more than double the 14% rate an earlier study found in adults ages 18 to 64. (Other studies suggest symptoms can last much longer, for a year or more.)

The BMJ study examined more than 87,000 adults 65 and older who had COVID infections in 2020, drawing on claims data from UnitedHealth Group's Medicare Advantage plans. It included symptoms that lasted 21 days or more after an infection, a shorter period than the CDC uses in its long COVID definition. The data encompasses both older adults who were hospitalized because of COVID (27%) and those who were not (73%).

The higher rate of post-COVID symptoms in older adults is likely due to a higher incidence of chronic disease and physical vulnerability in this population — traits that have led to a greater burden of serious illness, hospitalization, and death among seniors throughout the pandemic.

"On average, older adults are less resilient," said Dr.



COURTESY OF RICHARD GARD

Richard Gard described himself as a "very healthy and fit" sailor, scuba diver and music teacher at Yale University before he was hospitalized in intensive care after contracting COVID in March 2020. He has since spent more than two months in the hospital, often for symptoms that resemble a heart attack.

Ken Cohen, a co-author of the study and executive director of translational research for Optum Care. "They don't have the same ability to bounce back from serious illness."

Optum Care is a network of physician practices owned by UnitedHealth Group.

Applying the study's findings to the latest data from the CDC suggests that up to 2.5 million older adults may have been affected by long COVID. For those individuals, the consequences can be devastating: the onset of disability, the inability to work, reduced ability to carry out activities of daily life, and a lower quality of life.

But in many seniors, long COVID is difficult to recognize.

"The challenge is that nonspecific symptoms such as fatigue, weakness, pain, confusion and increased frailty are things we often see in seriously ill older adults," said Dr. Charles Thomas Alexander Semelka, a postdoctoral fellow in geriatric medicine at Wake Forest University. "Or people may think, 'That's just part of aging,'"

Ann Morse, 72, of Nashville, Tenn., was diagnosed with COVID in November 2020 and recovered at home after a trip to the emergency room and follow-up home visits from nurses every few

days. She soon began having trouble with her memory, attention and speech, as well as sleep problems and severe fatigue. Though she's improved somewhat, several cognitive issues and fatigue persist.

"What was frustrating was I would tell people my symptoms and they'd say, 'Oh, we're like that too,' as if this was about getting older," she told me. "And I'm like, but this happened to me suddenly, almost overnight."

Bell, a singer-songwriter in Nashville, had a hard time getting adequate follow-up attention after spending two weeks in intensive care and an additional five weeks in a nursing home receiving rehabilitation therapy.

"I wasn't getting answers from my regular doctors about my breathing and other issues," he said. "They said take some over-the-counter medications for your sinus and things like that."

Bell said his real recovery began after he was recommended to specialists at Vanderbilt University Medical Center.

James Jackson, director of long-term outcomes at Vanderbilt's Critical Illness, Brain Dysfunction and Survivorship Center, runs several long COVID support

groups that Morse and Bell attend and has worked with hundreds of similar patients. He estimates that about a third of those who are older have some degree of cognitive impairment.

"We know there are significant differences between younger and older brains," Jackson said. "Younger brains are more plastic and effective at reconstituting, and our younger patients seem able to regain their cognitive functioning more quickly."

In extreme cases, COVID infections can lead to dementia. That may be because older adults who are severely ill with COVID are at high risk of developing delirium — an acute and sudden change in mental status — which is associated with the subsequent development of dementia, said Dr. Liron Sinvani, a geriatrician and an assistant professor at Northwell Health's Feinstein Institutes for Medical Research in Manhasset, N.Y.

Older patients' brains also may have been injured from oxygen deprivation or inflammation. Or disease processes that underlie dementia may already have been underway, and a COVID infection may serve as a tipping point, hastening the emergence of symptoms.

Research conducted by Sinvani and colleagues, published in March, found that 13% of COVID patients who were 65 and older and hospitalized at Northwell Health in March 2020 or April 2020 had evidence of dementia a year later.

Dr. Thomas Gut, associate chair of medicine at Staten Island University Hospital, which opened one of the first long COVID clinics in the U.S., observed that becoming ill with COVID can push older adults with preexisting conditions such as heart failure or lung disease "over the edge" to a more severe impairment.

In older adults especially, he said, "It's hard to attri-

bute what's directly related to COVID and what's a progression of conditions they already have."

That wasn't true for Richard Gard, 67, who lives just outside New Haven, Conn., a self-described "very healthy and fit" sailor, scuba diver and music teacher at Yale University who contracted COVID in March 2020.

He was the first COVID patient treated at Yale New Haven Hospital, where he was critically ill for 2½ weeks, including five days in intensive care and three days on a ventilator.

In the two years since, Gard has spent more than two months in the hospital, usually for symptoms that resemble a heart attack.

"If I tried to walk up the stairs or 10 feet, I would almost pass out with exhaustion, and the symptoms would start — extreme chest pain radiating up my arm into my neck, trouble breathing, sweating," he said.

Dr. Erica Spatz, director of the preventive cardiovascular health program at Yale, is one of Gard's physicians.

"The more severe the COVID infection and the older you are, the more likely it is you'll have a cardiovascular complication after," she said.

Complications include weakening of the heart muscle, blood clots, abnormal heart rhythms, vascular system damage and high blood pressure.

Gard's life has changed in ways he never imagined. Unable to work, he takes 22 medications and can still walk only 10 minutes on level ground. Post-traumatic stress disorder is a frequent, unwanted companion.

"A lot of times it's been difficult to go on, but I tell myself I just have to get up and try one more time," he told me. "Every day that I get a little bit better, I tell myself I'm adding another day or week to my life."

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FITNESS

# Seven common fitness mistakes to avoid

Metro Creative

It is important to follow appropriate guidance when pursuing fitness goals. However, with so much information available online, it can be challenging to sift through the advice and determine what is safe and effective and what is not. Fitness enthusiasts may make certain mistakes along the way to achieving their goals. Recognizing which practices should be avoided can lower risk of injury and produce the desired results.

### 1. Skipping warm-up

Warm-ups are vital before a workout. They help muscles in the body become acclimated to exercise by gradually building up heart rate and muscle flexibility and endurance. A warm-up can include walking, biking or light repetitions of exercises.

### 2. Getting caught up in "low-fat" foods

It is important to eat a balanced diet that includes real, wholesome foods, according to Lucky 13 Fitness. Many people fill their carts with sugar-free desserts or fat-free items thinking this is healthy eating. When fat or sugar is removed, chemicals often replace these ingredients. Rather than embracing an extreme diet, focus on balance and moderation.

### 3. "Cheat days"

Some people operate under the assumption that the weekend or another less regimented day is an opportunity to let loose and stray from a diet and exercise regimen. This can be a mistake. A better approach is to find a routine that has enough balance so a person doesn't feel like he or she needs to go off the rails to indulge.



Injuries can occur when one pushes too far in a workout, particularly if he or she is lifting more weight than his or her body can handle.

### 4. Using the "I'm busy" excuse

There is no such thing as being too busy to exercise. Making exercise a necessary part of a daily routine requires finding time for fitness. Individuals may need to squeeze in exercise in the early morning before work or school. If exercise seems to be getting in the

way of family time, engage in a group workout with the kids or your spouse.

### 5. Pushing too hard

Many people exercise under the assumption that "more is more." Injuries can occur when one pushes too far in a workout, particularly if he or she is lifting more weight than his or her body can handle. It is essen-

tial to give the body some time off to recuperate. Rest helps to prevent injuries.

### 6. Making vague goals

Establishing fitness goals helps people reach markers that make it easy for them to gauge their success. Statements like "I want to lose weight" or "I want to get stronger" make it hard to measure prog-

ress, as they lack specificity. It is much better to make firm goals, such as being able to lift a certain amount of weight by a predetermined date.

### 7. Hopping from program to program

It's tempting to try everything the gym or the

fitness world has to offer. It is better to learn the basics and stick with a program for some time before moving on to another one; otherwise, you may never have enough time to master any routine.

These are just a few of the fitness mistakes to avoid as you begin a journey to improved health and wellness.

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