HOLLY ROBINSON PEETE
THE TV STAR GETS CANDID ABOUT MOTHERHOOD

The Caregiver Issue
Simple Tips to Beat Burnout and Stay Positive

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We Love This
Taking Care
After Lindsay Jurist-Rosner’s mother was diagnosed with multiple sclerosis (MS), the then-9-year-old was thrust into the role of caregiver. “It was, for me, the single most stressful and difficult and loneliest experience that I have had in my life,” says Jurist-Rosner, now 38. After meeting more people who were in the same boat, she helped create Wellthy, a tech company that handles caregiving’s logistical and administrative tasks, like scheduling appointments, arranging transportation and negotiating insurance bills. A bonus? Wellthy may be available through your employee benefits. Visit Parade.com/Wellthy to find out how you can sign up.

Crunching Numbers
75%
That’s the percentage of Americans who would rather be seen as strong than thin, according to a joint survey from Spry Living’s sister publication Parade and Cleveland Clinic. Two-thirds of the 1,000-plus respondents also believe it’s possible to be healthy and have a chronic illness, and 68 percent think mental health is just as important as physical health. For more details on the study—including the exercise myth a majority of us still believe—visit Parade.com/HealthyNow.

Fast Fact
Leftover Lies
That generous pile of Thanksgiving leftovers is fooling you, according to a study in the Journal of Experimental Social Psychology. Researchers found that having a large portion of leftovers tricks people into thinking they have under-eaten, leading them to eat more and exercise less later. Make a plan for a family walk around the block after dinner or compete to see who can track the most steps on Black Friday before tucking into those turkey leftovers.

Quick Tip
Seat Check
Boarding a plane this holiday season? Book a window seat—that’s where you’re least likely to catch a cold, according to a study in Proceedings of the National Academy of Sciences. Researchers looked at 228 samples taken from 10 flights and found that travelers sitting in aisle seats were more likely to pick up a bug, possibly because they come into contact with more passengers and crew members.

News Flash
Rest Is Best
Just one sleepless night could increase your risk for Type 2 diabetes, according to a study in the American Journal of Physiology—Endocrinology and Metabolism. Researchers found that sleep-deprived mice had higher blood glucose levels and fat content in the liver—both of which are linked to insulin resistance and diabetes. Make sure you’re snoozing smart with the tips on page 4.

November is American Diabetes Month

Contact us: Send mail to Spry Living, 2451 Atrium Way, Suite 320, Nashville, TN 37214, call 800-284-5668 or email sprylivingeditor@amgparade.com • spryliving.com

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Say Good Night to Insomnia with These Healthy Habits You Can Practice Throughout the Day. By Karyn Repinski

7 a.m. • Keep a consistent wake time seven days a week.
“The most important piece of advice is to pick a wake-up time and stick with it,” says Chris Winter, MD, medical director of the Sleep Medicine Center at Sentara Martha Jefferson Hospital in Charlottesville, Va., and author of The Sleep Solution. This helps stabilize your circadian rhythm, your body’s internal clock for regulating feelings of sleepiness and wakefulness over a 24-hour period. As tempting as it may be to sleep later on the weekend, that can throw off your body clock during the week.

8:30 a.m. • Make your bed.
According to a National Sleep Foundation (NSF) survey, bed-makers were nearly 20 percent more likely to report getting a good night’s sleep on most days than people who said they didn’t bother. “Keeping your bedroom neat helps your sleep quality,” Winter says.

9 a.m. • Noon • Eat a hearty lunch.
Big dinners prolong digestion, which interferes with a good night’s sleep, so it’s better to eat your biggest meal before midafternoon and have a light evening meal of 500 calories or less. Pack every meal with foods like salmon, tuna, spinach, walnuts or tofu that are high in omega-3 fatty acids, which affect levels of melatonin, a hormone that signals the body to prepare for slumber.

10 a.m. • 2 p.m. • Cut off caffeine consumption.
“Caffeine has a long half-life, between six to eight hours,” reports Michael Breus, PhD, a clinical psychologist and sleep expert, “which means it can take up to eight hours for half of the caffeine to be metabolized by your body.”

11 a.m. • 5 p.m. • Hit the gym.
People who worked out four times a week for at least 30 minutes fell asleep 12 minutes earlier and slept 42 minutes longer than those who didn’t exercise, according to a study published in JAMA. There’s no magic time to work out, but if it tends to keep you up, aim to finish four hours before bed.

9:30 p.m. • Write down your worries.
Doing a pre-sleep brain dump of what’s making you anxious, including what you have to do the next day, frees your mind so it can settle down. In one study, people who wrote to-do lists fell asleep nine minutes sooner than people who wrote about the previous day’s accomplishments.

10 p.m. • Turn out the lights.
Melatonin is dramatically affected by light, and while light of any kind can suppress its secretion, research shows exposure to blue light, the kind emitted by tablets, smartphones and TVs, is particularly powerful at doing so. Melatonin kicks in at about 9 or 10 p.m., but if you’re reading on your Kindle or watching TV, you may be countering its sleep-inducing effects. If you can’t put down your tech at least an hour before bed, consider a pair of blue-blocker glasses. (Try Peepers’ Focus reading glasses, also available without magnification, $24, peepers.com)

11 p.m. • 7:05 a.m. • Listen to a lullaby.
Talk about sound advice! Listening to soft, slow (60 to 80 beats per minute) music before bedtime boosted sleep quality by 35 percent in a Case Western Reserve University study. Music affects the body’s natural stress relievers and quells the anxiety that keeps you tossing and turning. Songs that hit the mark include Bach’s “Air on the G String,” Adele’s “Make You Feel My Love,” Carole King’s “Tapestry” and Ed Sheeran’s “Kiss Me.”
Holly Robinson Peete became a caregiver at a very young age. When she was just a freshman in college, her father—actor Matt Robinson, who originated the role of Gordon on Sesame Street—was diagnosed with Parkinson’s disease.

“I wanted to quit school to help him, but he wouldn’t let me,” Robinson Peete, now 54, remembers. “I did eventually become his main caregiver for the next 20 years. I wish I’d had more help and information, which is one of the reasons why I love talking about caregiving openly.”

The 21 Jump Street actress is also candid about raising a son with autism—Rodney Jr. “R.J.,” 21—even going so far as to bring millions into her home via a reality-TV series starring her family. Originally called For Peete’s Sake on OWN, the show moved to the Hallmark Channel earlier this year with a new title, Meet the Peetes. “If I had turned on the TV back when R.J. was first diagnosed and seen a teenage boy with autism defying the odds, that would have given me hope,” she says. The show also stars her husband, former NFL quarterback Rodney Peete; R.J.’s twin sister, Ryan; and sons Robinson, 16, and Roman, 13.

We chatted with Robinson Peete about caregiving’s biggest challenges and rewards, her favorite Thanksgiving traditions and her secret stress busters.

Everywhere we go, people stop and thank us for doing the show. We recently were going through customs in Berlin and one of the agents said, “We have a son on the autism spectrum who is 5, and we pray that he will be able to do some of the things R.J. was able to do.” R.J. is the most oblivious cool kid. As a caregiver, you have to make sure you are together. It was hard for me to take care of R.J. and my father [who died in 2002] at the same time. That overlapped for about five years, and it was probably the hardest years of my life. It’s very hard to conscientiously step back and say, “I need to get a doctor’s appointment for me. I need to exercise and eat better and sleep.” But if your health or well-being are not good, then you’re not going to be able to care for someone else.
IS YOUR LOVED ONE CRYING OR LAUGHING UNCONTROLLABLY?

As a long-time caregiver of her husband, Jim, who has been living with Parkinson's disease for more than 15 years, Lori is well-equipped to help him manage the ups and downs of the disease. But when she noticed Jim repeatedly laughing or crying at unusual times, even when they weren't discussing or watching anything funny or sad, she knew she had to discuss it with his doctor.

“WHEN HE WOULD LAUGH, I THOUGHT HE WAS LAUGHING AT ME, and when he would cry, I didn’t know what he was crying about or why,” Lori says.

Jim’s doctors thought the laughing and crying could be related to his Parkinson’s disease, or to an anxiety disorder or depression, but they did not have a definitive diagnosis for him. For several months, Lori watched helplessly as Jim continued to uncontrollably laugh and cry at unusual times without knowing why or how to help. Then she heard about a medical condition called PseudoBulbar Affect (PBA). She discussed it with Jim’s doctors, and he was officially diagnosed the same year.

WHAT IS PBA?

- Certain neurologic conditions or brain injury can affect the signals that tell a person’s body when or how much to cry or laugh. This can trigger episodes of crying or laughing that are sudden, frequent, uncontrollable, and exaggerated (more intense or lasting longer than expected) or mismatched (not fitting the situation).i

- PBA affects about 2 million people in the United States, including men and women who have experienced a traumatic brain injury (TBI) or are living with certain neurologic conditions like stroke; Alzheimer’s disease (AD) and dementia; multiple sclerosis (MS); Parkinson’s disease; and amyotrophic lateral sclerosis (ALS), or Lou Gehrig’s disease.ii

- Symptoms of PBA are often overlooked or mischaracterized as depression. While these conditions can often coexist — meaning some people can have both PBA and depression — both conditions are manageable and should be independently diagnosed.i

PBA IMPACTS DAILY LIFE FOR PATIENT AND CAREGIVER

Lori has been Jim’s caregiver for more than 20 years. Her primary caregiving responsibilities include driving him wherever he needs to go and attending appointments with him. She also ensures he takes his medications, eats properly and takes care of himself.

Lori feels it is her task to decipher whether Jim’s laughing and crying reflect how he is feeling, or if he is experiencing a PBA episode.

“I HAVE TO REALLY BE IN TUNE, or I can’t tell when his laughing or crying is in line with his emotions,” Lori says.

Jim and Lori openly discuss Jim’s PBA diagnosis with their kids, friends, and family to make sure they are aware of what is happening in case he has an episode in their presence. They both agree that Jim’s PBA symptoms still greatly impact their day-to-day lives, especially when it comes to being in public or socializing. Jim’s PBA episodes have also greatly affected her social life and their marriage in significant ways.

“Jim doesn’t like to go out and socialize, especially with people he doesn’t know,” Lori says. “I do a lot of things alone, unfortunately. I wish it could be the way it used to be, but we’ve just gotten used to it.”

FIND OUT MORE ABOUT PBA

For people with an underlying neurological condition and sudden, frequent, uncontrollable crying or laughing symptoms like Jim’s, it’s important to talk to a doctor. A short quiz is available online at pbainfo.org to help start a conversation with a doctor.

Lori believes that Jim isn’t the only one suffering and wants to help get the word out about PBA.

“WE WANT TO HELP RAISE AWARENESS ABOUT PBA FOR THE PEOPLE OUT THERE WHO ARE SUFFERING, but don’t know anything about this condition,” Lori says.

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Interview

Taking care of my dad was tough, but it was a chance to connect. We got to repair some issues that we had in our relationship. My mom and dad got divorced when I was very young, and there were things he regretted. To hear him tell me that was very important.

For families affected by autism, the holidays can be overwhelming. We used to struggle with Thanksgiving because R.J. didn’t want to be at the table. Now that he’s older, we celebrate with as much family energy as possible.

Before Thanksgiving dinner, everyone has to come up with a gratitude statement. Last year, we dropped them in a hat and had everybody try to guess who said what. It initiates conversation and makes people interact. And you get a good laugh too because oftentimes there are silly things in there!

The biggest blessing to come out of caregiving has been the HollyRod Foundation. We’re 20 years in and I am very hands-on. One of our big goals is helping young people with autism get jobs and training. When R.J. was 3, we were told he would never have a job. Now he’s working with the Los Angeles Dodgers, and we want that for so many other people like him.

Robinson Peete’s son R.J., 21, was diagnosed with autism at age 3.

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New York City-based jewelry designer Temple St. Clair, 58, found fitness inspiration in her father, who swam every day until he passed away at 101. Another thing she picked up from Pops? The power of breathing, whether it’s in the pool or on land doing St. Clair’s preferred workout, yoga.

“It wreaks havoc on your body if you don’t slow down to breathe,” she says. “Yoga brings back the consciousness of your breath.”

Learning a simple series of moves you can use over and over is a great way to reap all of yoga’s mind-body benefits. “You memorize these poses as you learn them, so you’re working your brain, body and breath,” says St. Clair. “Focusing on your breath stops your mind from wandering. When you do that, you feel less stress.”

St. Clair suggests this traditional “sun salutation”—the term for a sequence of yoga moves where you flow from one position to the next, warming and strengthening the body. There are several variations, but this one is good for beginners and easy to memorize.
Sun Salutation

Stand up tall and reach for the sky, inhale (A). Exhale and fold forward. Inhale and lift up halfway, keeping your hands close to the floor (B). Exhale and place your hands on the floor and step back into a high plank position, inhale. You can modify by dropping to your knees if you need to (C). Exhale and lower down to the ground, inhale and lift your chest to the ceiling (D). Exhale and push into downward dog and hold for five breaths (E). Exhale and step forward, inhale and return to standing. Repeat five times.

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Q: How often should I wash my hair?

A: If you wash your hair too much, it becomes dry, brittle and eventually, it breaks. Dry shampoos can help between washings to soak up oils, but they are no replacement for traditional shampoos. How often you should wash your lovely locks depends on a number of factors:

• Age. Younger people typically have more active oil glands because their hormone levels are higher. Women after menopause have a decrease in hormones, which leads to less oil production. With time, men have less active glands, too.

• Ethnicity. In particular, African-Americans have extremely dry hair, and if they wash too often, their hair can become dry and brittle, which can lead to breakage. For these cases, limit hair washing to one or two times every month.

• Length and texture. Oil glands are present in your scalp, and this oil needs to make it all the way down each hair strand to the ends in order to moisturize it. This is why longer hair often gets dry—it's more challenging to keep the ends moisturized. For similar reasons, curly, coarse hair tends to be drier because oil needs to travel along corkscrew-shaped strands. It's best to focus conditioning treatments on the ends, rather than the roots.

• Activity level. Even if you exercise and sweat heavily, you don’t need...
to wash your hair daily. It’s more important to consider your hair type, texture and amount of oil production you typically experience. I typically advise patients to keep to a consistent hair washing schedule, whether it is three times per week, weekly or once per month, regardless of activity level.

— SHILPI KHETARPAL, MD, dermatologist

Q: Should I put ice on a burn?

A: No, you should not use ice or even ice-cold water on a burn. Extreme cold applied to a burn can further damage the tissue.

The best thing to do for a minor burn is to cool it off by running the burned area under cool—not cold—water for about five minutes or by applying a clean, cool, wet cloth. Then clean the area using mild soap, and apply triple antibiotic ointment to protect the area from infection.

If your skin blisters, don’t rupture the blister—that increases the risk of infection. Cover the area with a sterile, nonstick dressing and take over-the-counter acetaminophen or ibuprofen to ease inflammation and pain.

— AMBER TULLY, MD, family medicine physician

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**Turkey**

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**Not that.** Turkey with skin on, dark meat (Dark meat contains 140 calories and 4.5g fat in each 3-oz serving.)

**Mashed Potatoes**

**Serve this!** > Potatoes with skins, mashed with skim milk and light butter (Or try mashed potatoes with fat-free plain yogurt or fat-free sour cream and add crushed garlic and Italian seasoning blend.)

**Not that.** Peeled potatoes mashed with butter and milk, served with gravy

**Green Beans**

**Serve this!** > Green beans steamed with sautéed mushrooms and onions, topped with sliced almonds

**Not that.** Green bean casserole made with cream of mushroom soup and french fried onions

**Sweet Potatoes**

**Serve this!** > Sweet potatoes with cinnamon and nutmeg and a splash of 100 percent apple or orange juice, topped with chopped pecans or walnuts

**Not that.** Sweet potatoes prepared with butter and brown sugar

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Add some green to your Thanksgiving table with country singer Martina McBride’s delicious twist on Brussels sprouts. “Frankly, I like to eat this by the bowlful, but it also makes a great side salad or starter,” she says. There’s enough sweetness to please picky palates, but one serving also delivers your recommended daily dose of vitamin K, which helps strengthen bones.

**Shredded Brussels Sprouts Salad with Maple-Balsamic Vinaigrette**

Whisk together 2 Tbsp extra-virgin olive oil, 2 Tbsp balsamic vinegar, 1 Tbsp pure maple syrup and 1 tsp Dijon mustard in a medium bowl. Season to taste with salt and pepper. Thinly slice 12 oz Brussels sprouts (about 3 cups), tough outer leaves pulled away and discarding core. Stir together Brussels sprouts, 1 medium thinly sliced shallot (about ¼ cup), ¼ cup sweetened dried cranberries, ¼ cup coarsely chopped pecans, ¼ cup crumbled Gorgonzola cheese and 1 chopped ripe pear (about ¾ cup). Pour dressing over salad, and gently toss to combine. Serve immediately. Serves 6.

**Per Serving:** 170 calories, 10g fat, 4g protein, 19g carbs, 11g sugar, 4g fiber, 7mg cholesterol, 164mg sodium

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