

# Rite Aid Giving Care for Parents Expert Event Transcript

DEC 4<sup>TH</sup>, 2008

**Moderator** - On behalf of Rite Aid, I'd like to welcome everyone to today's expert event chat featuring Caring Today magazine Editor-in-Chief Susan Strecker Richard and Rite Aid pharmacist Natalie Teaff.

**Moderator** - As a reminder, information within this site is intended for educational purposes only and conveys general information related to legal, financial, and health-related issues commonly encountered. The information within this site is not intended as legal, financial, or medical diagnoses and/or treatment advice. We recommend you consult a lawyer, financial advisor, licensed medical professional, or pharmacist. Rite Aid is not responsible or liable for comments or opinions posted or included in this site's forums, chats, expert events, videos, articles, or other media that may be added. Let's get started...

■ **Audience** - My dad has started to hallucinate. Could his medications be the probable cause? What do I do to find out?

**Natalie Teaff** - Hallucinations can result from a number of medical conditions, but they have also been reported as a possible side effect of some medications. Talk to your local Rite Aid pharmacist to determine if any of your father's medications could cause hallucinations. We also recommend that you report the problem to your father's physician for further evaluation.

■ **Audience** - If my mom is on a 60mg pill every day, can I get her the 120mg, split it in half, and make each one last twice as long to save money?

**Natalie Teaff** - While some medications can be cut in half, others are required to be taken whole, such as those with extended or time released formulations. Check with your local Rite Aid pharmacist to determine if your mother's medications can be split in half.

■ **Audience** - Susan, what is your opinion of the Nintendo Wii and how it's being used with regards to Seniors.

**Susan Richard** - Wii is a terrific boon to the lives of seniors. The various games, such as bowling, provide fun and exercise — Wii is being used in senior centers all over the country (and I hear there are competitions between some enters now) and offers so much fun. It's energizing and the competition is enjoyable. Also, Wii offers the opportunity for family members of all ages to engage in hours of fun. A great idea for a holiday gift for care giving families who do not already have Wii.

■ **Audience** - My mother has been diagnosed with Macular Degeneration. She has the wet version. She has received injections that have dried up the blood vessels. I am looking for magnifying glasses that are large enough or free hand standing type that she can use to continue her painting. Also, they need to be at least 4x magnifying. I have seen some, but the degree is not strong enough. Do you have this item or any suggestions? Also, any other suggestions where I can purchase books for her to read, etc.



## Giving Care

For Parents

from Fox Learning Systems



**Natalie Teaff** - I would recommend that you consult with your local Rite Aid pharmacist or your mother's ophthalmologist to determine the availability of the correct product for your mother so that she may enjoy her painting.

■ **Audience** - I fill the pill containers correctly for the day but what can I do to ensure that my dad takes his medicine at the right times of day.

**Natalie Teaff** - In addition to the pill container, you may want to create a corresponding grid that lists all of his medications and the times they should be taken. After each dose, your father can check off a box to indicate that he has taken the right kind of medication.

You can also set an alarm clock or digital watch alarm to go off each day as many times as needed to alert your father when it is time for him to take his medications. Be sure he keeps his medication in a place where he is sure to see it each day such as on a kitchen top or countertop.

■ **Audience** - My father is coming to the end of his life and for the first time ever, he has begun to talk about spirituality. As his caregiver, I'm not sure how to handle this. What would you do?

**Susan Richard** - This is not uncommon as someone nears life's end. If you are uncomfortable reinforcing his conversations, you should try to be the best listeners possible. Your dad is probably very aware of his situation and looking back at all he's done and accomplished — and probably some things he wishes he could change. He's looking at his life and his legacy. And he just may be more than a bit afraid. Your job is to hold his hand, listen and comfort him. This is what he needs now.

■ **Audience** - My parents refuse to discuss their finances. What are some ways to get them to talk? My siblings and I only want to help but my dad thinks I'm after his money.

**Susan Richard** - This is tough; no doubt about it, and your dilemma is a common one. Here are several approaches that have worked for other caregivers, keeping in mind that the finances you're talking about are tied to your parent's preparedness for several aspects of their future.

You might try to enlist your mother's help. Have her express her concern about their future and that their children don't know enough about their situation to help them should they need assistance. She may be able to get your father to open up, especially if she doesn't feel she has a good handle on their financial picture.

Some family members try a written-list approach. They list all the paperwork and documents (wills, healthcare proxies, etc.) that their parents should have in proper order and present it as a checklist. They then ask their parents to look it over and let them know what actually is in good order or what needs to be updated. That list might help move the discussion along, especially if you can also honestly say that you have been conducting the same review of necessary documents in your own household. Just one document in need of updating may open a door to further discussion.



Another approach: When something happens to a friend or family member (say, an accident or a hospitalization), you could use the incident to broach the question of what would you do? Or what would you want us to do? How would you want us to help you if mom couldn't handle everything? This should let your parents know that you're concerned and want to be able not only to help, but to know and follow their wishes to the best of your ability. Knowing your dad's thinking about how he looks at their future, their home, and what they would do if one of them were ill should open up some financial discussions, as all of these issues are interconnected. No matter how frustrated you become, remain respectful and calm and keep insisting you only want to be able to help them both, if and when needed.

- **Audience** - Are generic brands always exactly like brand-name drugs? Are there ever instances when the brand-name medication definitely should be used?

**Natalie Teaff** - When a new product is introduced to the market, the manufacturer assigns it a brand or trade name different from its "chemical" name. Once the patent rights to the product expire, [patent life varies depending on the time interval from initial discovery to approval by the Food and Drug Administration (FDA)], other companies are free to manufacture generic versions of the product provided they meet all of the requirements the FDA requires of the brand name drug.

Generic drugs are regulated by the FDA just like the brand name drug and must meet the same stringent standards to ensure safety and efficacy for their intended uses. There may be situations where a patient needs to take the brand-name medication instead of the generic. This is a decision to be made by the patient and their physician.

- **Audience** - My mom takes a variety of meds that I want to check for interactions etc. Where should I look for this type of information? I know that some of the meds can have differing side effects when combined and I worry.

**Natalie Teaff** - Your best source to determine if there are drug interactions with your mother's medications is your local Rite Aid pharmacist.

- **Audience** - What is one common practice among all successful caregivers?

**Susan Richard** - An understanding that they can't do everything for their loved one and that they can't do it alone. This leads to the important practice of asking for help and finding relief, without guilt.

- **Audience** - My wife and I are both in our late 70's. She is in a wheel chair and I am barely getting along. But am able to take care of her needs, feeding, bathing, laundry and helping her do the things she needs. Thank GOD she laughs all the time and hardly ever cries. We have six children with two daughters that temporarily live with us they keep changing things around and it is really confusing both my wife and I. What can we do to stop them from changing things to their liking?



**Susan Richard** - First of all, it sounds as though you and your wife both have a good sense of humor, something important to keep in high gear when life starts getting tougher.

In terms of your daughters changing things to their liking; are you sure they aren't changing things around because they think they are helping you? They may be making changes for your own safety. If they are removing throw rugs and moving furniture to make a safer and open path for your wife's wheel chair, for example, they are thinking about your safety. If they are moving furniture and decorations because they feel your home needs a makeover, you are right to object. So, you need to discuss the changes they want to make or are making. You have your rights and you need to explain that keeping your home the way it has been, unless something is posing a danger, helps you feel comfortable and secure. Explain that you and your wife like knowing where your things are. You all should be able to come to an understanding, while still honoring your needs and everyone's safety.

- **Audience** - My husband is in the early stages of dementia/Alzheimer's disease. Lately he has been more nauseous (I suspect his med combinations, which are monitored by his primary care MD at the VA). Sometimes he is very finicky about eating dinner. He also really prefers carbs, especially sweets, and sometimes won't eat much protein, and sometimes not much dinner. Then when his insulin "kicks in" he is up about 2:00am searching for quick carbs, can't control his eating, and in general messes up his blood sugar. Any good strategies? What about sweetening his food to entice him to eat it?

**Natalie Teaff** - This is the type of situation where I would recommend that, as a caregiver, you consult with your husband's physician for a proper diagnosis and treatment options for this particular situation.

- **Audience** - We're care giving long distance. Things are smooth now, but I'm worried about the future. What should we put in place now to be organized for when there is an emergency or conditions warrant more help than we give now?

**Susan Richard** - Most important, keep lines of communication open so you know if the situation is changing. Listen well during phone conversations. Avoid asking questions that will get just a yes or no answer. Try to elicit what your loved one ate today that tasted really good, for example, or what he did that day that was especially enjoyable. Were you out in the garden today? Did any friends drop over or call? Did you call anyone? These kinds of questions can help you gauge activity level as well as cue you into any befuddlement or memory loss, for example.

It's very helpful if there is a nearby relative or neighbor who can keep a watchful eye and alert you to any worries or changes that might warrant your stepping in.

Also, you want to create some file folders to organize information about your loved one's health, personal, legal and financial affairs and keep this information up to date. Also, it's a good idea to have a phone directory of your loved one's area in case you quickly need to find necessary services.



You might also discuss potential roles and skills of different family members who may be able to step up to the plate, depending on what kind of help is needed. This kind of discussion and mental preparedness may serve you all well down the line.

And be prepared to make good use of your visits to your loved one. Be ready to assess changes from previous visits that may require action or some additional assistance. Notice if there is out-of-date food in the refrigerator, if clothing is generally clean, if kitchens and bathrooms are clean, if the person is walking steadily and can easily get in and out of a chair, or bed. Should you rearrange furniture to make better pathways from room to room and get rid of scatter rugs that may cause a person to trip and fall? And don't be afraid to show your concern.

During a visit it never hurts to make contact with a home health care agency, for example, to understand their services and what's involved in hiring from afar.

■ **Audience** - I have had heavy Sinusitis for more than 10 years, and I often feel I have a stuffy nose, I tried many kinds of medicine, but got little effect. Can you help me and introduce some drugs which can really work.

**Natalie Teaff** - Chronic sinusitis is an infection of the sinus passages, being that you have been suffering with this condition long term and have been treated with a multitude of medications, I would recommend that you possibly consult with an ENT (eye nose and throat) specialist to determine if there is any type of procedure or new medications that you have not yet tried.

■ **Audience** - How is the best way for caregivers to take care of themselves, both physically and mentally?

**Susan Richard** - The best way is to try to have a life outside of care giving. That said, it's not always easy to work in me-time, family time, friends, hobbies and exercise, let alone long vacations or mini-getaways.

Recognizing your needs and asking for help in meeting them goes a long way. Taking care of your health is paramount, so no matter what, you should try to walk 15 minutes to 1/2 hour a day or do some other exercise of your liking.

But you need mental breaks also, to do something you like or to do nothing at all. In some care giving situations, these downtimes are more easily imagined than accomplished. Still, it's important to ask for help and relief and to feel as though your needs are being met, if not all the time. Or else, you will lose yourself as a person and end up angry and frustrated, and quite possibly ill and depressed.

Build in the idea of "time out" and getting help from others from the minute care giving starts and don't ever forget its importance.



■ **Audience** - My dad is 90 years old and has medications for various health problems. He is finding himself constantly constipated. We have tried to get him to eat more fibrous fruits and vegetables but he does not always cooperate. We have provided him with prunes, prune juice, V-8, canned fruit, etc. He has tried Miralax, Metamucel and a prescription constipation medication from the doctor and recently Benefiber powder and tablets, all of which may briefly work but he claims do not work over the long term (maybe he is just impatient). Until recently, Milk of Magnesia seemed to relieve him. When he really becomes concerned, he takes magnesium citrate but we have tried to dissuade him from taking that on a regular basis. His doctor, at this point, just shrugs his shoulders and says he's old. Anything else we can do or try?

**Natalie Teaff** - Sounds like you have already attempted all the tricks to treat the constipation. As a reminder, the over use of constipation medications may lead to a worsening of your father's constipation. Bulk fiber laxatives, while they take time to work, are the best treatment plan for long term use because they work naturally to help bulk the stool and aid in relieving the constipation.

■ **Audience** - I always feel so stressed. I have little time during the day for anything but work, family and caregiving. I need some help to find some "me time" before I explode. Any suggestions?

**Susan Richard** - First of all, you definitely need to de-stress! And sooner, rather than later.

One question I always ask caregivers is how good they are at asking for help. Many of us find this hard to do and that can make stress worse. Look around you, who can help do something on your list (even if the person doesn't do it in exactly the way you'd like or within the time frame you would wish)? Many people will help when asked but if they view you as efficient, and therefore self-sufficient, they may not ask you if you need something, at least not very often. You have to speak up.

Also, you should think about what would help you most in terms of tasks taken off your plate, of course, but also the kind of time you need to really help you put yourself back together again.. then seek it out.

Do you need a Saturday afternoon to have lunch with a good friend, followed by a long walk by yourself? Do you need a Friday night date with your spouse? More than anything, would you like a few hours to read uninterrupted or write in a journal? Do you need time on a treadmill? An afternoon at a museum? Time for your hobby? A mental health day off of work devoted to spending time on you instead of care giving? And how often is this time needed? One afternoon will help but it won't solve the problem and just looking forward to that designated time out on your calendar may get you through some tough days.

Discuss your needs with your family. Ask for help. Your health, mental and physical, is at stake and you can't do it all. You might be pleasantly surprised by the response you get. Some of us just go along thinking everything is fine because a family member or friend never admits things are getting to them. But most of us rally to a need that is expressed. Speak up for what you need.

One more thought: In this season of gift-giving, why not ask for the gift of time instead of a new sweater or the equivalent of the cost of that sweater to put toward some paid respite care? I bet there is some friend or family member who would warm to that idea.

■ **Audience** - The person that I take care of has diabetes, how do I know if their blood sugar levels are too low and how can low blood sugar be treated?

**Natalie Teaff** - When blood glucose levels drop below 70 mg/dL this condition is called hypoglycemia. Hypoglycemia may be caused by exercising, skipping meals, too much medication or insulin, drinking alcohol on an empty stomach, or changes in one's schedule.

Symptoms of hypoglycemia may include shakiness, dizziness, inability to concentrate, headache, sweating, hunger, fast or pounding heart, fatigue, paleness, weakness, fainting, sudden moodiness or behavior changes, tingling sensations around the mouth, clumsy or jerky movements, and poor or blurred vision. If your blood glucose drops very low you may develop slurred speech, confusion, seizures, combativeness, or pass out.

To help prevent hypoglycemia, make sure the patient eats meals and snacks on a regular schedule and test their blood glucose levels frequently. Ask their doctor how often you should check their glucose levels. It is important to know the symptoms of hypoglycemia and treatment options in order to prevent worsening hypoglycemia.

If your patient experiences symptoms of hypoglycemia, have them eat a quick source of sugar equal to 15 grams of carbohydrates. Possible sugar sources would include 3-4 glucose tablets, 5 chewed lifesavers, 6 jelly beans, 1 box or 2 tablespoons of raisins, 1 cup of low-fat milk, 1/2 cup of regular non-diet soda, 1 1/2 tubes of glucose paste, 3 packets or 1 tablespoon of sugar, or 1/2 cup of orange or apple juice. If they are taking the diabetes medications miglitol (Glyset) or acarbose (Precose) only glucose tablets or milk will work to treat hypoglycemia, do not use candy, soda or sugar. Check their blood glucose level 15 minutes after eating a quick source of sugar. If their level is still less than 70 mg/dL they should have another serving of sugar. If their next meal is not within 2 hours, eat a snack such as 1/2 sandwich or crackers with peanut butter or cheese. If their blood glucose levels are low, consult their physician for evaluation. For additional information on diabetes, please visit Rite Aid's diabetes webpage at [www.riteaiddiabetes.com](http://www.riteaiddiabetes.com).

■ **Audience** - My mother-in-law lives with us. I like her, but her needs take up so much of our time that my wife and I rarely have time just to ourselves. Should I feel guilty that part of me resents her and will be relieved when she passes away?

**Susan Richard** - You probably needn't feel guilty but those feelings that you express are never nice ones to harbor. Instead of feeling guilty, try to concentrate on getting some "couple time", in fact, you should insist on it. Elicit some help from neighbors or friends, or find volunteers from a local religious or service organization to stay with your mother-in-law while you go to dinner or the movies, or make a trip to the mall, including a nice lunch and some people watching. If your mother-in-law balks, just insist that you need to get out...you'll be surprised at how just a few hours away from her care needs might help you put a new perspective on things. But don't stop with one getaway...do it as often as you can, with volunteer or paid help.



■ **Audience** - My mother is a widow on a fixed income, do you know of any prescription savings programs available to help her?

**Natalie Teaff** - Rite Aid Pharmacy offers the Rite Aid Rx Savings Card and prescription savings program which provides Rite Aid customers the ability to save money on their prescription drugs immediately at the time of service with no enrollment fee.

Eligible customers include:

- Those without other insurance benefits for prescription drugs (i.e. non-benefit eligible employees such as part-time employees, those waiting to be eligible for benefits, etc.)
- Those that have insurance but have met their drug benefit limit
- Those who have insurance but the prescribed drug is not covered by their health plan's formulary
- Family members who do not have insurance benefits

Benefits of the Rite Aid Rx Savings Card include:

- ALL prescription medications are eligible for savings
- Select generic medications are \$8.99 for a 30-day supply or \$15.99 for a 90-day supply
- Select oral contraceptives are \$19.99 for a 30-day supply
- 20% savings on most other brand and generic medications
- 10% savings on Rite Aid Brand over-the-counter products (some restrictions apply, see store for details)
- The card can be used for everyone in the household including pets
- No enrollment fee

To enroll your mother in this program, simply visit your local Rite Aid pharmacy to fill out an enrollment form. A pharmacy associate may provide a printed copy of the over 400 select generic drugs offered under the Rx Savings Card upon request. In addition, there are many pharmaceutical companies that offer prescription assistance for patients without insurance coverage.

The Partnership for Prescription Assistance (PPA) is a new program created to help qualifying patients without prescription coverage obtain medications at a reduced price or free of charge through public or private programs. Their mission is to increase awareness of patient assistance programs and boost enrollment of those who are eligible. You may contact the PPA by phone at 1-888-4PPA-NOW (1-888-477-2669) or through the internet at [www.pparx.org](http://www.pparx.org).



Additionally, there is a card called Together RX Access which allows qualifying patients to save on certain prescription medications. This card is made possible through a coalition of pharmaceutical companies. To enroll, you may call 1-800-444-4106 or enroll online at [www.togetherrxaccess.com](http://www.togetherrxaccess.com). Finally, you may also contact the manufacturers of your medications directly in order to obtain information on assistance programs they may offer.

- **Audience** - My father is 87 years old and not a serious Parkinson's patient. For the past few years he has stopped desiring to attend church and has no interest in going out of town to see relatives even when capable medical relatives request and are willing to drive him and my step mother to and fro. This year we planned a nice trip to North Carolina for Thanksgiving....Dentist husband and I would drive and med students would also drive, separately.....to stay with our other family members. Mom and dad would be given the luxury suite at their home and not compelled to participate in anything they did not want to do. Mom, as usual, wanted to come but would not make the decision for them. Several grandchildren went over to encourage their participation...and I did separately. My mom left it up to dad....after two days she asked dad if he wanted to go. He said he could not make the choice. So mom declined the trip (As in the past) because she said she would not have a good time if dad was uncomfortable. I feel bad for the restricted social life of mom. Is this a normal situation for a couple in their mid-80's?

**Susan Richard** - It shouldn't necessarily "just be the way it is" for a couple in their 80s, although sometimes it just is.

Obviously I don't know the dynamics of the relationship between your father and stepmother. It seems she didn't feel she could say how much she wanted to go, if she really did. She may have used your father's hesitancy as an excuse for herself. And chances are your father was probably worried about potential discomfort, more than your stepmother's or others wishes.

You can't force someone to take a trip, and your mom may have decided to go with the line of least resistance. I'd give it another try when the opportunity arises, perhaps counteracting the downside your dad may envision (long drive, sleeping in a strange bed) with the upside of seeing grandchildren or a new puppy, having a favorite meal, etc. not to mention everyone's desire to be with him. No matter what, it seems important to help your stepmother maintain her friendships and get out of the house occasionally. And she shouldn't feel guilty about stepping out. Make plans with her and enlist some friends to do the same. If your father notices he's missing some fun, he may want to join in...If he doesn't, so be it.

- **Audience** - Are there any medications that might cause blood sugar to rise?

**Natalie Teaff** - There are many medications that may cause high blood sugar levels (hyperglycemia), check with your local Rite Aid pharmacist to determine if any of the medications that you or your loved one is on may be contributing to high blood sugar levels.



■ **Audience** - My parents are in relatively good health now, but I worry about what life will be like when they require care giving. Are there things I should/could do now to prepare for that day to make life easier?

**Susan Richard** - The best thing you can do is keep lines of communication open and know their wishes for the near and far future. Also, it might not hurt to read some books on seniors and aging to know the kinds of paperwork and documents that need to be in order — and also, what kinds of changes may be needed as time goes on to keep their home safe. Falls are a big reason people head to nursing homes, so it would be good to be watchful. Stay loving and close.

■ **Audience** - My father was recently put on medication for high blood pressure but is not feeling any different. How can we tell the medication is helping?

**Natalie Teaff** - The best way to determine if your father's blood pressure medication is working is to monitor it at home. There are several different types of automatic blood pressures devices available; however, a monitor with an arm cuff is preferred. Before your father measures his blood pressure he should take his monitor with him to his physician to check it for accuracy and technique. When measuring his blood pressure, your father should sit quietly for 3-4 minutes in a comfortable position with his legs and ankles uncrossed and his back supported against a chair. Your father should avoid caffeine 30 minutes prior to taking his blood pressure and refrain from talking while his blood pressure is being measured. It is best to measure his blood pressure at least twice a day, once in the morning before he takes his medication and once in the evening. He should discuss with his doctor what his goals should be and keep a log of his blood pressure readings to show his physician.

■ **Audience** - My parents are getting older and have become more prone to hurting themselves on things they normally would not (like sharp corners, or non-carpeted floors). How can I safety-proof my parent's house? Is there a company/organization that can do this for me?

**Susan Richard** - Older people are prone to more bruises and hurts. Those bruises and gashes often take a long time to heal. I'm sure your parents will appreciate any help you can give them.

There are many good sources to help you elder-proof your parents' home. For example, Dr. Marion Somer's book "Elder Care Made Easier" has a whole chapter called "Put Safety First" in which she reminds to toss away throw rugs, clear paths for walking so that obstacles don't cause falls, install grab bars near the toilet and in tub/shower area, etc.

On the web, you can go to [www.mayoclinic.com](http://www.mayoclinic.com) and enter "fall prevention" in the search area. You will be taken to a helpful slide show giving exercises to improve stability and also "Fall prevention: 6 ways to reduce your falling risk." The steps are written for the elder person who wishes to avoid falls and are full of good tips for you to read, share with your parents and act on.

Another source is the U.S. government. Go to [www.nih.gov/medlineplus/falls.html](http://www.nih.gov/medlineplus/falls.html) for a host of helpful information.

There are also many companies that sell gear and gadgets that make life easier and therefore safe for seniors. For starters, check [www.activeandable.com](http://www.activeandable.com).

**Moderator** - Thank you all for attending today's Expert Event. A full transcript will be posted on our website shortly. We will be scheduling additional events soon.

On behalf of Rite Aid and our Giving Care for Parents program, thanks again.

**Below are answers to questions that our experts were unable to cover during the online chat.**

■ **Audience** - Because my mother is older and seems to react to medicine easily, should food and drink always be taken with her medication?

**Natalie Teaff** - Some medications should be taken with food, while others are required to be taken on an empty stomach. Some medications can be taken with or without food. Check with your local Rite Aid pharmacist to determine how your mother's should be taken with respect to meals/food.

■ **Audience** - I care for a child who has a severe allergy to bee stings, how do I use the EpiPen his physician gave him in case he gets stung?

**Natalie Teaff** - Grasp the EpiPen unit with the black tip pointing downward and form a firm fist around the unit. With your other hand, pull off the gray activation cap. Hold the EpiPen unit near the outer thigh, swing the EpiPen unit out and firmly jab into the outer thigh (at a 90 degree angle), holding the EpiPen unit in place for several seconds to ensure all the medication is delivered. There will be medication left in the EpiPen unit after it is injected, this is normal; the pen is designed to deliver the correct amount of medication.

■ **Audience** - I take care of my mother who is on many different medications that have to be taken at different times of the day. What is the best way for me to keep all her medications straight and make sure they are taken at the correct times?

**Natalie Teaff** - Medication organizers are great for keeping medications in order. They come in a variety of sizes and help organize medications from days of the week to times in each day. Stop by your local Rite Aid pharmacy and talk with one of our pharmacists who can help you choose a medication organizer that is best suited to help you organize your mother's medications.



■ **Audience** - I take care of my parents and find it hard to remember to get their prescriptions filled. Any suggestions?

**Natalie Teaff** - The Rite Aid Automated Courtesy Refill Program is a free Rite Care pharmacy service. With it, your parents qualifying prescriptions will be automatically refilled a few days before they run out, and your Rite Aid pharmacy will even give you a reminder call to let you know they are ready to be picked up. When the last refill is coming up, we will work with your parent's physician to help get it renewed for them. Stop by your local Rite Aid pharmacy and sign up today for this time saving service.

■ **Audience** - My mother has high blood pressure and has a cold, what over the counter medications can she take?

**Natalie** - We have found many available over-the-counter (OTC) medications for the relief of cough and cold symptoms. However, some of these medications may interfere with high blood pressure and/or the medication your mother is currently taking. Decongestants containing pseudoephedrine or phenylephrine may increase the heart rate, and/or blood pressure and interfere with the beneficial effects of blood pressure lowering medications. As an alternative, saline nasal spray may be used to help break up and clear nasal congestion. Antihistamines may help in drying and relieving congestion. These products are available OTC and include diphenhydramine, chlorpheniramine, brompheniramine, loratadine, and cetirizine. Diphenhydramine, chlorpheniramine, brompheniramine, and cetirizine when taken by mouth may affect your blood pressure and should be avoided. Loratadine, when taken by mouth, should not affect the blood pressure and there are no known interactions between loratadine and blood pressure medications. Guaifenesin is an expectorant available OTC for facilitating the thinning and removal of bronchial secretions. Guaifenesin is not known to affect high blood pressure and is useful for productive coughs (a cough in which your mother brings up phlegm). Dextromethorphan is a cough suppressant available OTC for the relief of a dry, hacking cough. This product should not be given for a productive cough, unless it is keeping your mother awake at night. Analgesics may provide relief from aches, pains, and fever associated with the common cold. Acetaminophen is the preferred OTC analgesic in patients with high blood pressure. Ibuprofen, naproxen, and aspirin may cause fluid retention in some patients and interfere with the beneficial effects of blood pressure lowering medications. As always, please consult with your physician before adding any medication to your mother's current drug therapy.

■ **Audience** - What is the best treatment for diarrhea?

**Natalie Teaff** - A physician should be contacted if diarrhea is accompanied by a high fever (above 101 degrees F), severe dehydration, vomiting, abdominal pain, distension, and/or if stools contain blood or mucus. Additionally, diarrhea persisting beyond 72 hours should be evaluated by a doctor. Initial treatment for diarrhea should be aimed at correcting fluid and electrolyte loss. Over the counter oral solutions may be used or clear liquids may be consumed (i.e. ginger ale, chicken broth, tea, sports drinks, etc.). Lactose containing products and spicy, sugary, or fatty foods may make diarrhea worse. A liquid diet with salty crackers should be consumed for the first 24 hours.



Afterwards, the patient may advance to easily digestible foods (i.e. bananas, yogurt, crackers, etc.) as tolerated. (Note: Children should not be given sugary liquids (i.e. sports drinks); give them a commercially available electrolyte solution.) Loperamide is an over the counter antidiarrheal agent and may be taken by patients 6 years of age and older. Loperamide should not be used in patients with high fever or bloody diarrhea without a physician's consent. If you are taking antibiotics or have a history of liver disease, consult a physician before using this product. Adsorbents (i.e. attapulgite, kaolin, pectin) may also treat mild nonspecific acute diarrhea. This product can hamper the absorption of other medications the patient may be currently taking, therefore a change in dosage or dosage interval may be needed. Please contact your pharmacist or physician for instructions. Products containing polycarbophil bulk laxatives that are also effective in treating diarrhea. This product may also decrease the absorption of some drugs (i.e. warfarin, digoxin, tetracycline); therefore, consult with your physician before starting. Bismuth subsalicylate can also be taken for diarrhea. Products containing this ingredient should not be used in children and teenagers without a doctor's consent due to the risk of Reye's syndrome in those recovering from chicken pox or flu. Your local Rite Aid pharmacist can assist you with product selection. Be sure to read the instructions carefully regarding dosing and length of treatment with an over the counter (OTC) product. If diarrhea worsens at any point during treatment with an OTC product, contact your physician for further evaluation.

■ **Audience** - Is it OK to take the following together? One hctz 25 mg. tablet a day, one baby aspirin a day, one 1000 mg. Fish oil capsule a day, 1/2 25mg. atenolol tablet a day, one 1 mg. lorazepam tablet twice a day as needed and one 20 mg. prilosec tablet a day

**Natalie Teaff** - The Prilosec should be taken on an empty stomach one half hour before breakfast. The other medications can then be taken together, after you have breakfast. We did find that fish oil capsules may decrease blood pressure and we recommend that you check with your physician to make sure your blood pressure is okay with the combination of fish oil, atenolol and hctz.

■ **Audience** - I am a veteran, 100 percent service connected with disability benefits and SSD Medicare Part A, but not Part B. I live 80 miles from the closest VA hospital. Should I get Part B? I have MS, secondary progressive and some other health issues with which my son helps me.

**Susan Strecker Richard** - You would do best to ask your question of the Social Security Administration by calling (800) 772-1213 and explaining your situation.

