THE ASSISTIVE TECHNOLOGY PROGRAM

The Assistive Technology Center (ATC) at Magee Rehabilitation Hospital is a unique hospital-based program provided by occupational and physical therapists to help people with disabilities manage barriers that impede mobility, or communication function.

The ATC at Magee provides evaluations to identify solutions using various equipment and technology to maximize the individual’s ability to perform daily tasks with the highest level of independence and to improve overall quality of life. Evaluations focus on identifying strengths and impairments of the patients so they may be introduced to a wide range of AT equipment. Once the most effective AT equipment for the patient is identified, therapists will assist the patient and their families in the process of obtaining this specialized equipment. Inpatients may trial this specialized equipment in their rooms and outpatients may trial the equipment in our ATC on the fifth floor.

Assistive technology equipment can range from low-tech switches to high-tech communication and wheelchair systems. This specialized technology enables people to function independently in areas where they would otherwise have difficulty, need assistance or be unable to participate.

Assistive technology equipment may be used at home, school, work and community settings and can benefit people with disabilities.

Dina Mastrogiovanni is one of four of Magee’s OTR/L ATP practitioners. Dina’s certification was awarded through the Rehabilitation Engineering & Assistive Technology Society of North America (RESNA), an organization working to advance the use of biotechnology in the world of rehabilitation. Dina stated, “Magee’s Assistive Technology program and Equipment Clinic provide the opportunity for clients to trial equipment that may improve their level of independence and quality of life. There are very few places in this area to go to assess and order this type of sophisticated equipment. Magee is one of the only hospitals in the area with so many ATP practitioners. These practitioners serve as a foundation of care that is essential to providing expert services to patients requiring technology to maximize their ability to function. The therapists working in the Equipment Clinic are credentialed as Assistive Technology Practitioners (ATPs) with 20 years of experience. Our goal is to help our clients maximize their level of independence by using technology to assist them as much as possible.”

Dina is shown here with patient Dale Kerchner working with the infrared voice controller, one of the ATC’s high-tech equipment pieces. The infrared voice controller is a piece of equipment that allows the disabled to control their entertainment, communication, and security devices with just the sound of their voice. It is a completely hands free and button free device. It supports any language and even individuals with slurred or difficult to understand speech, provided they speak consistently. Most importantly, it gives people the feel of independence while in their home or work environment.

For more information or to schedule an evaluation, please contact the Assistive Technology Coordinator, Donna Brown at (215) 587-3032.
RESEARCH & EDUCATION

RESEARCH PARTICIPANTS NEEDED!
The Spinal Cord Injury Center at Jefferson and Magee is looking for individuals with SCI to participate in a research study to examine the reliability of a spasticity and joint position test.

The participant will be asked to:
- Have 2 separate physical therapists perform a spasticity and joint position test on your legs.
- Come back into Magee a week later to have the same 2 physical therapists test spasticity.

To participate in the research you must:
- Have a traumatic spinal cord injury
- Level of Injury T12 or higher
- Willing to come to Magee Rehab Hospital for 2 outpatient visits, for less than one hour each visit
- 3 or more months post injury

If interested, please contact Mary Schmidt-Read at (215) 587-3151.

EFFECTS OF TWO DIFFERENT FES CYCLING PROGRAMS

The Spinal Cord Center at Jefferson and Magee, along with researchers from the University of Sciences, are conducting a study to learn how different cycling programs may help adults with spinal cord injury. We are looking at the effects that may decrease your risk of cardiovascular (heart) disease and other health problems including: the strength and make-up of the bones in your legs; the size and strength of your leg muscles; the amount of fat-free tissue in your body; and your cholesterol levels and nutritional status. The study will require you to cycle with FES for 1 hour, 3 times a week at Magee’s Outpatient center for 6 months. You will also have testing completed at 3 different time points: 1. before starting the cycling, 2. after cycling for 3 months, and 3. after cycling for 6 months. Some testing will be completed at Jefferson.

You are eligible to participate in the study if you:
- Are 18 to 65 years old (but women must be premenopausal)
- Have a spinal cord injury and are unable to move your legs
- Can attend 60 minute training sessions 3 times per week for 26 weeks at Magee’s Outpatient Center
- Can attend data collection sessions 3 times
- Have no major medical problems
- Have not broken a bone in your leg in the past 3 months
- Are not pregnant

For more information, please contact either Therese Johnston, PT, PhD, MBA (Principal Investigator) at (215) 596-8682, Marilyn Owens, R.N. (Study Coordinator) at (215) 955-6579 or Elizabeth Watson, PT, DPT (Senior Physical Therapist) at (215) 218-3900.

UPPER EXTREMITY STUDY

The Regional Spinal Cord Injury Center at Thomas Jefferson University Hospital and Magee Rehabilitation has developed a research tool to measure improvements in arm and hand function in persons with cervical spinal cord injury (neck region). We are seeking volunteers to help us make sure that the scale is valid (measures what it is supposed to measure). Research participants must have sustained a cervical spinal cord injury. Subjects will be required to come to Thomas Jefferson University Hospital or Magee Rehabilitation Hospital on either 1 or 2 occasions. Those who participate will be reimbursed for time and travel and provided with free parking.

The research tool is called the Capabilities of the Arm and Hand in Tetraplegia (CAHT). The validation and reliability of this scale is very important because it will be used in future clinical trials to measure improvements in upper extremity function. To date, there is no reliable measurement for clinicians to use. This is a very important study and we need your help.

If you are interested in participating, please contact Mary Patrick in the Spinal Cord Injury Research Office at Thomas Jefferson University Hospital at (215) 955-6579 and we will be willing to answer any of your questions.
STUDY OF ASSISTIVE TECHNOLOGY FOR MOBILITY IN SCI

The combined efforts of SCI Center staff from both Thomas Jefferson University and Magee Rehabilitation Hospital continue to support a new multicenter study entitled “Investigation of Assistive Technology for Mobility used by Individuals with a Spinal Cord Injury”. Working together with SCI Centers in Pittsburgh, Georgia, Chicago, Washington DC, Ohio and Northern New Jersey, we are investigating the impact of policy changes on customizability and features of wheelchairs, and the number of working wheelchairs an individual owns. To collect this information, we are looking at the specifics of an individual’s wheelchair usage, relative to the type of wheelchair they were provided, the amount of wheelchair breakdown, the skill of using the wheelchair and quality of life measures for the individual using a wheelchair for primary mobility. Since it has been shown that reintegration into society following a disability depends on access to appropriate and adequate assistive technology such as wheelchairs, we hope to investigate the effects of the types of presently supplied wheelchairs and how they may be contributing to person’s functional limitations, even more so than the person’s disability itself. The information (or data) collected over the four years may then be helpful in effecting policy change, relative to prescriptions and funding for wheelchair mobility equipment.

If you are interested in participating or would like more information, please call Mary Patrick, RN, RSCI CDCV Project Coordinator at (215) 955-6579.

Those who participate will be reimbursed for time, travel and parking.

NEW PUBLICATIONS/PRESENTATIONS BY RSCI CDCV STAFF


RESEARCH PARTICIPANTS WANTED

This study will be investigating the benefits and limitations of first time exposure to adaptive sports for young adults ages 18 – 30 who have sustained a traumatic lower level spinal cord injury. The goal is to better understand the perception of participants first introduction to adaptive sports, in an effort to improve the methods used to facilitate integration after injury. By volunteering to participate in this study, you will be asked to participate in one face-to-face or phone interview with the researcher, a physical therapist PhD candidate. Interview questions will seek to gather information related to the nature of your spinal cord injury, demographics, and your introduction to adaptive sports. Participants who complete the study will have the opportunity to choose a nominally priced gift card from one of two online shopping locations.

Volunteers must meet the following criteria: a) traumatic lower level spinal cord injury, b) currently between the ages of 18 – 30, and c) have completed inpatient rehab within the past 5 years. For additional questions regarding the study, or if you would like to participate, please contact Ariana Brutico at ArBrutico@hotmail.com or by phone at 570-510-7112.

DIAPHRAGM PACING SYSTEM

The Regional Spinal Cord Injury Center of the Delaware Valley (RSCICDV) at Thomas Jefferson University Hospital and Magee Rehabilitation Hospital is excited to announce a program available for those with ventilator dependent spinal cord injury or ALS, the NeuRx Diaphragm Pacing System™ RA/4. The NeuRx RA/4 System is designed to help patients breathe by stimulation of their diaphragm muscles. Intramuscular diaphragm electrodes are implanted using standard laparoscopic surgical techniques. The implanted electrodes are connected to an external stimulator that delivers repetitive electrical stimulation to the patient’s diaphragm causing it to contract. As a result the patient will inhale in a manner similar to natural breathing. A physician will program the Stimulator so that it produces the right stimulation patterns. The user simply connects the device to the implanted electrodes and turns it on for use; no other controls are necessary for operation.

If you feel you may benefit from this procedure and may be interested or you would like further information on this new device, please call the RSCICDV office at (215) 955-6579.

NEW STEM CELL RESEARCH – Geron Study

The Regional Spinal Cord Injury Center of the Delaware Valley (RSCICDV) at Jefferson/Magee is participating in the world’s first FDA approved clinical trial using a human embryonic stem cell (hESC)-based therapy in humans. The Phase I multi-center trial is designed to establish the safety of the treatment in patients with “complete” thoracic spinal cord injuries. The study is sponsored by Geron.

Patients eligible for the Phase I trial must have a complete spinal cord injury with a neurological level of injury of T3 to T10 and agree to have an injection into the spinal cord injury site between 7 and 14 days immediately after injury. Although the primary purpose of this trial is to assess safety, sensory and motor neurological improvement will also be examined. Once safety in this patient population has been established, Geron plans to seek FDA approval to extend the study to increase the dose of the injection, enroll subjects with complete cervical injuries and expand the trial to include patients with severe incomplete injuries to enable access to the therapy for as broad a population of severe spinal cord-injured patients as is medically appropriate.

The RSCICDV is proud to be participating with just a few other centers in the US on this ground breaking technology and possible advancement in the treatment of new spinal cord injuries.
ONGOING RESEARCH OF THE RSCICDV

Current

1. Investigation of assistive technology for mobility used by individuals with spinal cord injury. Sponsor: NIDRR supported through SCI Model System of Care
2. UAB Index of Motor Recovery – Validation of an outcome measure for motor recovery in incomplete spinal cord injury. Sponsor: NIDRR supported through SCI Model System of Care
3. Development and validation of the thoracic-lumbar control scale to measure strength and coordination of trunk muscles. Sponsor: NIDRR supported through SCI Model System of Care
4. Development and validation of the Capabilities of Arm and Hand in Tetraplegia (CAHT) measurement for upper extremity function. Sponsor: NIDRR supported through SCI Model System of Care
5. Spasticity and Joint Position Testing in Individuals with SCI. Sponsor: Regional Spinal Cord Injury Center of the Delaware Valley
7. The Value of MRI and DTI as biomarkers for classifying acute spinal cord injury. Sponsor: Department of Defense
8. A Phase 1 Safety Study of GRNOPC1 in Patients with Neurologically complete, subacute, spinal cord injury. Sponsor: Geron Corporation

Completed Clinical Trials

1. A 15-Week, Randomized, Double-Blind, Placebo-Controlled, Parallel-Group, Multi-Center Trial of Pregabalin for the Treatment of Chronic Central Neuropathic Pain After Spinal Cord Injury. Sponsor: Pfizer Pharmaceuticals
3. Restoration of walking after spinal cord injury – Reliability of the maximal WISCI level. Sponsor: National Institute on Disability and Rehabilitation Research (NIDRR)
4. A phase II, double blind, placebo-controlled, multicentered study to access the efficacy and safety of HPt84 at 100, 200, and 400 mg doses administered orally once daily for twenty-four weeks in adult subjects with chronic spinal cord injury. Sponsor: Aventis Pharmaceuticals
5. Peripheral denervation following spinal cord injury (Using MRI to study nerve function following spinal cord injury). Sponsor: American Paraplegia Society
7. Restoration of walking after spinal cord injury - validation of the Walking Index for Spinal Cord Injury (WISCI) scale for hierarchical ranking. Sponsor: National Institute on Disability and Rehabilitation Research (NIDRR)
8. Study the effects of Body Weight Supported Treadmill Training in acute incomplete spinal cord injury. Sponsor: National Institute of Health (NIH)
9. A phase I/IIa dose-ranging study to evaluate the safety, tolerability, and pharmacokinetics of BA-210 and the neurological status of patients following administration of a single extradural application of Cethrin® during surgery for acute and cervical spinal cord injury. Sponsor: BioAxone Therapeutics, Inc.
10. A four-week, prospective, randomized, double-blind, placebo-controlled trial to assess safety, tolerability, Pharmacokinetics and preliminary efficacy of AV 650 in patients with spasticity due to spinal cord injury. Sponsor: Avigen

GADGETS FOR INDIVIDUALS WITH SCI

http://www.apple.com/ipodtouch/features/voice-control.html - has information about the voice commands for the iPod touch, the iPhone also has voice commands for various things.

http://www.rollingrazor.com/home/1-bp - this is a great razor for the C5, C6, C7 population to utilize.

Do you have any tips or gadgets that make doing things with your disability more manageable? Please share them at sdibeler@mageerehab.org.
SPINAL CORD INJURY PATIENT EDUCATION MANUAL NOW AVAILABLE IN SPANISH!!

The Regional Spinal Cord Injury Center of the Delaware Valley (RSCICDV), a NIDRR designated Model System of SCI Care and a partnership between Magee Rehabilitation and Thomas Jefferson University Hospital, has maintained a comprehensive spinal cord injury educational manual for more than 20 years. Periodically, this educational tool has been updated and revised to remain current and available to assist the learning of information about a newly acquired spinal cord injury for both our patients and family/caregivers. Over the past few years, the English version has once again been totally revised, including new graphics, etc. And now, thanks to the generosity of the Craig Neilsen Foundation, we are able to offer the same manual in a full Spanish version. This translation, as the English version, is available for FREE and can easily be accessed online at www.spinalcordcenter.org, the official website of the RSCICDV, or through the Magee website under the Spinal Cord Injury Program. This method of dissemination offers the material for use by anyone around the world. Specific chapters can be downloaded or printed, or the entire manual. Feel free to browse!

SPINAL CORD INJURY SUPPORT GROUPS

SCI PEERS, sharing experiences

The SCI-Peers Consultant Group provides individuals who have suffered a SCI the chance to learn from those who have rehabilitated following such an injury. Magee can match peers based on injury level, social situations, age, gender, marital status, recreational interests and vocational experience.

To request a peer consultation, or to volunteer as a mentor, contact Marie Protesto or Sonya Dibeler at peers@mageerehab.org or (215) 587-3174.

SCI RESOURCE GROUP

This group provides education, recreation and support opportunities to individuals with spinal cord injuries. Traditionally, meetings are held at Magee on the second Thursday of every month at 6 p.m. in the Second Floor Conference Room. However, social outings are scheduled based on availability and pricing.

We are always looking for new topics. If you have an idea for a topic or would like more information, please call Marie Protesto or Sonya Dibeler at (215) 587-3174, or e-mail peers@mageerehab.org.

SCI FAMILY PEERS

Family Peer Mentors are family members and/or loved ones of individuals who have sustained a SCI and have successfully transitioned to living life with a disability. They are volunteers who are specially trained to guide and provide SCI related information and experiences to families and loved ones of newly injured individuals.

Mentoring can be done in the form of participating in the family group which is held twice monthly at Magee or contacting a new family by telephone or face to face if possible. Given the geographic area Magee serves, we attempt to be creative and flexible with mentoring requests.

The SCI Family PEER Group meets two

Wednesdays a month at 6 p.m. in the 5th floor lounge on the Spinal Cord Injury Unit at Magee Rehabilitation Hospital. This group is open to inpatients and outpatients.

For more information or to become a Family Peer Mentor, please contact Ruth Black, LCSW at (215) 587-3030 or rblack@mageerehab.org.
MAGEE RECREATION RESOURCES

Physical activity is an integral part of physical and psychological well being. Everyone, regardless of ability or disability, should have access to recreation, so we plan to actively recruit new athletes to join our teams. If you already play a wheelchair sport and would like more information about our program, or if you are interested in a recreation activity that we do not yet offer, please contact us!

Magee Wheelchair Sports teams are always looking for volunteers who would like to learn more about wheelchair sports and help during fundraisers, at practices and tournaments. If you have any questions or would like more information on any of our teams, please email sports@mageerehab.org or call 215-587-3140.

MAGEE WHEELCHAIR SPORTS TEAMS

BASKETBALL: MAGEE SIXERS SPOKESMEN

Practices are held every Tuesday and Wednesday evening from 6:30 pm—9 pm (Sept.—May). Tuesday practices are geared for new and developing players while Wednesday practices are reserved for veterans.

Contact: Binh Scott at binhsocct@yahoo.com for more details.

Locations: Tuesday—Finley Playground Recreation Center (7701 Mansfield Ave., Phila., PA 19150)
Monday—Carousel House (corner of Belmont Ave. & Ave. of the Republic, Phila., PA 19131)

RUGBY: MAGEE EAGLES

Practices are held Tuesday evenings from 6:30 pm—9 pm (Sept.—May).

Contact: Andy Robinson at EaglesRugby@me.com for more details.

Location: Carousel House (corner of Belmont Ave. & Avenue of the Republic, Phila, PA 19131)

TENNIS: MAGEE FREEDOM

Practices are held each Sunday from 12 pm—2 pm (10 am—12 pm in the summer).

Contact: sports@mageerehab.org or 215-587-3140

Location: Cherry Hill Racquet Club (1820 Old Cuthbert Rd., Cherry Hill, NJ 08034)

RACING: The team meets at 10 am on Saturdays during the summer at the Philadelphia Rowing Program for the Disabled boathouse on Martin Luther King Jr. Drive in Philadelphia. Contact: sports@mageerehab.org or 215-587-3140.

Currently our Power Soccer and Softball teams are not practicing, but if you would like more information about either of those activities, please contact Meg Rider at sports@mageerehab.org or call 215-587-3140.

Our wheelchair athletes recognize how fortunate we are to have a rehab hospital such as Magee fund our sports program, and we give back to the community by performing outreach events in the Philadelphia area. This season our teams performed demonstrations at many universities and organizations including: University of Pennsylvania, Rowan University, West Chester University, YMCA West Chester Wells Fargo Center, Radnor High School, University of the Sciences Philadelphia, Richard Stockton College of New Jersey, and a Boy Scout Camp.

We encourage everyone to become involved in physical activity, whether it is in a competitive sport or at an intramural level. Please join us as we add more recreational opportunities in the coming months and years.

If you would like Magee to consider adding a specific activity to our program, please call (215) 587-3140.

UPCOMING ADAPTIVE SPORT EVENTS AND ORGANIZATIONS OF INTEREST:

- 32nd Annual Great Cape May Footrace on May 14, 2011 www.capemaychamber.com/footrace.html
- They Will Surf Again in Wildwood Crest Saturday, June 18, 2011 www.liferollson.org
- RecFest at Carousel House on September 17, 2011 www.globalabilities.org/rec/recfestwebp.html
- PA Center for Adaptive Sports: Promotes adapted recreation, and sport opportunities for persons with physical and neurological disabilities. www.centeronline.com
- West Chester YMCA Adaptive Sports Programs 2nd Sundays of each month. www.ymcabwv.org/adaptedsports.html
COMMUNITY PROGRAMS

LEGAL CLINIC FOR THE DISABLED

The Legal Clinic for the Disabled provides free legal services to low-income people with physical disabilities in Philadelphia, Bucks, Chester, Delaware and Montgomery Counties, Pennsylvania.

Since 1990, the Legal Clinic for the Disabled, a 501(c)(3) non-profit corporation with offices at Magee Rehabilitation Hospital, has helped thousands of people. We help victims of domestic violence get legal protection from their abusers. We represent victims of identity theft and consumer fraud. We help parents and care givers access healthcare for their children. We write wills, powers of attorney and living wills. Most of our clients experience physical limitations in their daily activities, and many have suffered catastrophic injuries or illnesses like stroke, spinal cord or brain injury, multiple sclerosis, cancer, advanced diabetes, glaucoma, AIDS, amputation or epilepsy. Our services help them overcome legal problems and continue living comfortably and independently in the community.

For more information about our clinic, please visit our Web site at: www.legalclinicforthedisabled.org.

LEGAL CLINIC TOPICS from Brandon Kuykendall

We at the Legal Clinic do a lot of powers of attorney for Magee patients and non-Magee patients alike. One of the biggest and most important questions we are faced with when meeting a potential client for the first time is, do they have the requisite mental capacity to make a power of attorney? Mental capacity can be a tricky thing to determine in the context of medicine, let alone the practice of law. In order to try and clear up confusion concerning the subject, a brief explanation of mental capacity and how it applies is necessary.

In order to complete a power of attorney, the person seeking it, called the “principal,” must be “of sound mind.” Under the law, being of sound mind means having an understanding of one’s actions and a reasonable knowledge of one’s family and surroundings.

Translated into the context of a power of attorney, a principal can make a power of attorney if they understand what a power of attorney is, what effect it will have, and how it will affect themselves and their families. No one can decide to make a power of attorney except the principal themselves. No matter how dire a situation, or how much a family member may insist, only the principal can request and ultimately create a power of attorney. The legally binding power of the document is simply too great to allow otherwise.

If you have a question regarding a power of attorney, the staff at the Legal Clinic is always happy to help. Our intake hours are Monday, 9:30 to 1:30 and Thursday, 11:30 to 3:30. We can be reached at 215-587-3350.

SPINAL CORD SOCIETY

The Spinal Cord Society is a large grass roots organization with thousands of members throughout North America and other countries. Its goal is cure of chronic spinal cord injury paralysis. The Spinal Cord Society puts 100% of its funding into research for the cure of spinal cord dysfunction. The Spinal Cord Society meets at Magee Rehabilitation Hospital on the 6th floor at 1 pm on the first Saturday of every month. If you would like to support this research, consider attending one of these meetings.

For more information, please contact Chris Cellucci at cellucci@ursinus.edu or (610) 296-7429, or Dennis Ledger at dledger@csc.com or (856) 468-4401.
THINK FIRST

To help prevent disabling head and spinal cord injuries among children, teens and young adults, Magee’s Think First Program holds dynamic presentations at schools. Our program is part of the nationally coordinated Think First program. Presentations consist of a video, injury prevention lessons and testimonials from adults with disabilities.
If you have a spinal cord injury or brain injury and are interested in changing behaviors and saving lives, please consider joining Think First and speaking to students. Since Magee values your experience we will reimburse you for your time.
If you are interested or know of a school that would like to host one of our assemblies, please call Joe Davis, Think First Coordinator, at (215) 587-3400.

PATIENT RESOURCE CENTER

The Patient Resource Center is located on the 6th floor. Feel free to stop by. We have tons of interesting fiction, a number of best seller books including notable books that made Oprah Winfrey’s Book Club list. There are about 600 leisure/romance/mystery novels to choose from as well as a broad selection of relevant professional periodicals. You may have noticed that we have three computers spaced just right for patient, visitor and staff access and to supplement these resources, we also have an assortment of DVDs.

Please allow us the opportunity to provide you with extraordinary customer service and an enviable user friendly environment.

You may contact Venus Bradley at (215) 587-3146 with any questions, concerns or suggestions.

CONSUMER ARTICLES

LIVE LIFE—OUTSIDE THE HOUSE! —by Mark Chilutti

It’s still way too cold as I am writing this article, even though April is just a few days away. But, spring and warmer temperatures are on the way, so it is time to start thinking about getting out of the house and enjoying the beautiful days that are ahead.

Nobody said it is easy to live with a spinal cord injury, but, despite everything that I have learned since my injury, I still can’t figure out a way to rewind the clock. What I have done though, is find a way to dig deep and work hard to master the challenges that I face every day. I do this because one of the very first things that I learned after my injury, over 14 years ago, was that my actions and attitude set the tone for others.

What does that mean, you might ask? It’s pretty simple. If I could let others know that I was going to be OK, and that I was still going to enjoy every day that life has to offer me, people would really see that I am OK. They would also realize that I am the same guy as I was before my injury; the only difference is that I do everything sitting down.

Too many people do the opposite though, and it sends them in to a place that is tough to escape. People that are angry and miserable tend to live isolated lives, and are often unengaged from the community. Why? It’s really simple. If your attitude and outlook on life are poor, it’s hard for others to want to be around you. Think about that for just a minute....Do you like to hang out with negative people?

The warm weather gives us all a reason to get outside. Go to the park, push around the block, take a drive, just do something!

Another great thing to think about doing is volunteering for an organization that you care about. Be a Peer Mentor at Magee, or volunteer in some other capacity. Help at a school, a church, a playground, or somewhere else. You will find out that helping others is a very rewarding thing, and, will help you realize, if you haven’t figured it out yet, that we all can live productive and meaningful lives!

I promise you that there is no greater feeling than making a difference in the world! Try it!

Mark Chilutti is the Assistant Vice President of Development at Magee Rehabilitation Hospital. He is a T-5 para who works full time, travels frequently, and is very active in the community.
NUTRITION AND YOU - “KNOW YOUR NUMBERS”

Part of being healthy is being aware of the numbers most important to your health. These include numbers for your blood pressure, cholesterol, blood sugar, and body weight. It is especially important to be aware of target numbers associated with any chronic diseases for which you are at greater risk due to family history, race/ethnicity, age, sex, etc.

It is not enough to know whether your health-related numbers are “good” or “normal” or “bad” or “at risk”, you need to know the actual numbers. Then, take it a step further by knowing the target numbers for these parameters. Why? A perfect example is a person who every year for the last 10 years has had good cholesterol. Then one day his doctor tells him his cholesterol is too high. Little did he know that his cholesterol had been slowly climbing. True, each year his cholesterol was in the “healthy range,” but had he known it was on the rise perhaps he would have been encouraged to make some lifestyle changes to stop the trend. A key to prevention is knowing your numbers!

The American Diabetes Association recommends the following targets.

- **Blood pressure**  a measure of how hard your heart is working to pump blood throughout your body.
  - A good target is <130/80.

- **Cholesterol** There are usually three numbers involved here. Aim for:
  - Total Cholesterol <200
  - LDL < 100 (“bad cholesterol” so keep it low)
  - HDL >40 for men, >50 for women (“good cholesterol” so keep it high)

- **Triglycerides** <150

- **Body Mass Index (BMI)** is a measure of your weight for height. Calculate your BMI at:
  - Normal range is 18.5-24.9

**Blood glucose** is an indicator for pancreas and liver function in regulating how much glucose stays in your bloodstream. The tests listed **should be repeated** if abnormal to verify a diagnosis of diabetes.

<table>
<thead>
<tr>
<th>Test</th>
<th>Normal</th>
<th>Pre-Diabetic</th>
<th>Indicates Diabetes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fasting Blood Glucose</td>
<td>&lt;100</td>
<td>100-125</td>
<td>≥ 126</td>
</tr>
<tr>
<td>2-hour post glucose load</td>
<td>&lt;140</td>
<td>140-199</td>
<td>≥ 200</td>
</tr>
<tr>
<td>Random Blood Glucose</td>
<td>&lt;200</td>
<td></td>
<td>&gt; 200 with symptoms of</td>
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<tr>
<td>A1C</td>
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<tr>
<td>A1C indicates your average blood sugar over a 2-3 month period</td>
<td>4.0-5.9%</td>
<td></td>
<td>If you have diabetes, try to keep this number under 7%.</td>
</tr>
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What to do if your numbers are out of range?

Ask your doctor for a referral to see a Registered Dietitian who can work with you to develop an individualized healthy meal plan.