



Primary Immunodeficiency Awareness Month

“This is a US national event held throughout April. This event is supported by The Immune Deficiency Foundation (IDF) (www.primaryimmune.org)”

The primary immunodeficiency (PI) community often identifies with zebras. This is based on an old saying. In medical school, many doctors learn the saying, “when you hear hoof beats, think horses, not zebras” and are taught to focus on the likeliest possibilities when making a diagnosis, not the unusual ones. However, sometimes physicians need to look for a zebra. People with PI are the zebras of the medical world. So IDF says THINK ZEBRA!”



<https://www.mayoclinic.org/>

Overview

“Primary immunodeficiency disorders — also called primary immune disorders or primary immunodeficiency — weaken the immune system, allowing infections and other health problems to occur more easily.

Many people with primary immunodeficiency are born missing some of the body's immune defenses, which leaves them more susceptible to germs that can cause infections.

Some forms of primary immunodeficiency are so mild they may go unnoticed for years. Other types are severe enough that they're discovered almost as soon as an affected baby is born.

Treatments can boost the immune system for many types of primary immunodeficiency disorders. Most people with the condition lead relatively normal, productive lives.

Symptoms

One of the most common signs of primary immunodeficiency is an increased susceptibility to infections. You may have infections that are more frequent, longer lasting or harder to treat than are the infections of someone with a normal immune system. You may also get infections that a person with a healthy immune system likely wouldn't get (opportunistic infections).

Signs and symptoms of primary immunodeficiency can include: Frequent and recurrent pneumonia, bronchitis, sinus infections, ear infections, and meningitis or skin infections; Inflammation and infection of internal organs.

Signs and symptoms differ depending on the type of primary immunodeficiency disorder, and they vary from person to person. — weaken the immune system, allowing infections and other health problems to occur more easily.

This disorder can also cause: blood disorders, such as low platelet counts or anemia; Digestive problems, such as cramping, loss of appetite, nausea and diarrhea; Delayed growth and development; autoimmune disorders, such as lupus, rheumatoid arthritis or type 1 diabetes

When to see a doctor

If your child or you have frequent, recurrent or severe infections or infections that don't respond to treatments, talk to your doctor. Early diagnosis and treatment of primary immune deficiencies may prevent infections that can cause long-term problems.

Causes

Many primary immunodeficiency disorders are inherited — passed down from one or both parents. Problems in the DNA — the genetic code that acts as a blueprint for producing the cells that make up the human body — cause many of the immune system defects in primary immunodeficiency.

There are numerous types of primary immunodeficiency disorders. In fact, research has led to a dramatic increase in the number of recognized primary immunodeficiency disorders in recent years, so they're not as rare as once thought. They can be broadly classified into six groups based on the part of the immune system that's affected:

- B cell (antibody) deficiencies
- T cell deficiencies
- Combination B and T cell deficiencies
- Defective phagocytes
- Complement deficiencies
- Unknown (idiopathic)

Risk factors

The only known risk factor is having a family history of a primary immune deficiency disorder, which increases your risk of having the condition.

Complications

Complications caused by a primary immunodeficiency disorder vary, depending on what type you have. They can include: Recurrent infections; autoimmune disorders; Damage to heart, lungs, nervous system or digestive tract; Slowed growth; increased risk of cancer; Death from serious infection.

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Prevention

Because primary immune disorders are caused by genetic defects, there's no way to prevent them. But when you or your child has a weakened immune system, you can take steps to prevent infections:

- Practice good hygiene. Wash your hands with mild soap after using the toilet and before eating.
- Take care of your teeth. Brush your teeth at least twice a day.
- Eat right. A healthy, balanced diet can help prevent infections.
- Be physically active. Staying fit is important to your overall health. Ask your doctor what activities are appropriate for you.
- Get enough sleep. Try to go to sleep and get up at the same time daily and get the same number of hours of sleep every night.
- Manage stress. Some studies suggest that stress can hamper your immune system. Keep stress in check with massage, meditation, yoga, biofeedback or hobbies. Find what works for you.
- Avoid exposure. Stay away from people with colds or other infections and avoid crowds.
- Ask your doctor about vaccinations. Find out which ones you should have.”

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“Parkinson's disease is a progressive disorder of the nervous system that affects movement. It develops gradually, sometimes starting with a barely noticeable tremor in just one hand. But while a tremor may be the most well-known sign of Parkinson's disease, the disorder also commonly causes stiffness or slowing of movement.

In the early stages of Parkinson's disease, your face may show little or no expression, or your arms may not swing when you walk. Your speech may become soft or slurred.

Parkinson's disease symptoms worsen as your condition progresses over time. Although Parkinson's disease can't be cured, medications may markedly improve your symptoms. In occasional cases, your doctor may suggest surgery to regulate certain regions of your brain and improve your symptoms.”



For more information:

www.mayoclinic.org/diseases



Seniors: Medication and Side Effects

HealthCentral has the article below...to see more go to www.healthcentral.com

“Eight out of 10 older adults take at least one medication and many take three or more daily. Older adults comprise 13 percent of the population but account for 34 percent of all prescription medicine use and 30 percent of all over-the-counter medicine use. Also, older adults often use multiple medicines (averaging 14 prescriptions each), increasing the risk of drug interactions, mix-ups, and the potential for harmful side effects. Source: [National Council on Patient Information and Education](#)

It’s vital to be aware of any type of side effect, especially when taking multiple medications. If a new medication is introduced, new side effects may occur. Seniors may be tempted to dismiss a feeling of sleepiness, stomach upsets, or other issues, as related to something else in their life but when medications are involved, especially changes to doses, they should alert the prescriber so they can help decide the cause. Be persistent, especially if the symptoms continue or worsen.”

Medicines & older adults: tips to avoid and prevent problems by NCPIE www.bemedwise.org/medication-safety

- Learn about your health conditions and the medicines you take. Talk with your healthcare providers, read trustworthy online sites, join health support groups. You are your own best advocate and champion when it comes to your health, and knowledge about your own self-care is key.
- Make and maintain a medication list. Be sure to update the list when you start taking something new or if a medicine is stopped or if your healthcare professional changes the dosage strength.
- Be sure to read the Drug Facts label (found on all OTC packages), package inserts or Patient Medicine Information leaflets (provided with your prescription medicine(s)) when starting a new medication. These can provide important information to help you get the best results and avoid problems.
- Use one pharmacy so that your prescription records are all in one place. This enables your pharmacist to regularly monitor the medications you take and let you know about potential drug interactions.
- Safely store medicines. Check expiration dates. Keep all medications in the bottle, box or tube that they came in so the dosage and directions are always close at hand. Never share your prescription medicines or take others’ medications.
- Contact your healthcare provider if you have any problems with your medicine. There are no “stupid questions” and no question is too trivial when it comes to your health and your medicines.
- Identify a “patient navigator” within your healthcare team to help navigate the healthcare system and take prescription medicines as prescribed. This is especially important for older adults suffering from multiple chronic conditions. Ask your primary care physician to act as your advocate, or “navigator” through the health system. That way, one person or practice will be responsible for ensuring that all of your chronic conditions and treatment regimens are being tracked and addressed.
- Aging + Alcohol + Prescription medications = Health risk
Aging bodies work more slowly to clear both medications and alcohol, which can make seniors more sensitive the effects of both. Many prescription medications may interact with alcohol and cause potentially dangerous adverse effects. Prescription medications also may not work as intended when combined with alcohol or may not work at all, or, they may become harmful--even toxic. Ask your health care professional for guidance.

Ten types of medications should be avoided by older adults, says the [American Geriatrics Society Foundation](#).

Drug safety takes on special importance for people 65 and up. Older adults are more likely to experience side effects from prescription drugs than young people are, partly because of physiological changes in the body that commonly accompany aging.

If you’re taking any of the following drugs, ask your doctor whether there are safer alternatives. **Never stop taking a medication without consulting your doctor; abruptly stopping a drug can be dangerous.**

1. **Long-acting nonsteroidal anti-inflammatory drugs (NSAIDs)** like indomethacin (Indocin) and piroxicam (Feldene)
2. **Digoxin (Lanoxin)** in doses greater than 0.125 milligrams
3. **Glyburide (Diabeta, Micronase) and chlorpropamide (Diabinese)** for diabetes
4. **Muscle relaxants**, such as cyclobenzaprine (Flexeril), methocarbamol (Robaxin) and carisoprodol (Soma)
5. **Benzodiazepines**, such as diazepam (Valium), alprazolam (Xanax) and chlordiazepoxide (Librium), and sleeping pills, such as (Sonata) and zolpidem (Ambien)
6. **Certain anticholinergic drugs:** antidepressants amitriptyline (Elavil) and imipramine (Tofranil), antiparkinsonian drug trihexyphenidyl (Artane), irritable bowel syndrome drug dicyclomine (Bentyl), overactive bladder drug oxybutynin (Ditropan)
7. **Meperidine (Demerol)** for pain relief
8. **Certain over-the-counter drugs:** Products that contain the antihistamines diphenhydramine (Benadryl) and chlorpheniramine (Aller-Chlor, Chlor-Trimeton) and over-the-counter sleep products that contain diphenhydramine (e.g., Tylenol PM)
9. **Antipsychotics**, such as haloperidol (Haldol), risperidone (Risperdal) and quetiapine (Seroquel), only if you are not being treated for psychosis
10. **Estrogen** pills and patches

The Alzheimer's-Employment Conundrum

"Longer life expectancies, combined with a projected rise of Alzheimer's diagnoses, and the fact that many workers are either retiring later or not at all, suggest that the future occupational landscape may be altered by this public health issue.

"Workers are increasingly staying on the job after age 65, and that's when dementia tends to rear its head," Dr. Raymond explains. "Perhaps they transition to a new career later in life, or maybe they simply stay in their current job. Either way, to be an employer of choice, you need to make this issue your concern."

That doesn't mean employers have free rein to pry into their workers' personal health. If employers issue cognitive screenings or medical exams, for example, they must apply them consistently to all employees, not just those above a certain age. And as with any potential health problem, Dr. Raymond stresses the concern should always be the worker's performance, not the specifics surrounding a possible illness.

"If it's a performance issue—if the worker's language fluency or memory seems affected—take action on the performance," he explains. "It's not your right to know their diagnosis."

If a worker begins to exhibit cognitive impairment consistent with dementia symptoms, employers may refer workers to the employee assistance program (EAP) or a physician. Employers should also make reasonable accommodations, such as narrowing the scope of responsibility, in an effort to keep the worker on the job and professionally engaged. And because those suffering from the early stages of dementia may be more likely to get injured on the job, it's vital that employers pay attention and make appropriate accommodations.

Dementia also impacts the workplace indirectly. While an employee might not suffer from Alzheimer's herself, she may be a caretaker to a parent, spouse or other loved one suffering from the disease. Caring for Alzheimer's patients is physically and emotionally taxing, and proactive employers will recognize that these workers may require support. The Family and Medical Leave Act (FMLA) is one option, but employers can go beyond that by creating a support group for these employees or otherwise recognizing the demands of caretaking.

The implications of Alzheimer's disease are complex and far-reaching. While individuals can take preventive steps to safeguard their own health, employers should pledge to remain aware and prepared to handle the issue.

"A good employer should have a vested interest in a workforce's brain health," Dr. Raymond says. "Anything you do to make these workers feel supported can help."

To learn more about workplace health, visit [Carolinashalthcare.org/EmployerSolutions](https://www.carolinashalthcare.org/employer-solutions)

[i]"RAND Corp. study by Hurd MD et al. in New Engl J Med 2013;368:1326



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Garden City Chapel

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843-651-2223

Sunrise Service – 6:45am, Easter Worship Mass 10:00am

The Garden City Chapel will hold an

Easter sunrise service on the beach

(2 miles south of Garden City Pier - follow signs)

Myrtle Beach's Must See Show Of 2021 There's Simply Nothing Like It.

The Alabama Theatre celebrates its 28th Anniversary with the 2021 Season of ONE The Show. Year after year it continues to deliver. Consistently voted the #1 Live Entertainment Theatre by Myrtle Beach visitors and locals, the Alabama Theatre presents ONE The Show – combining extraordinary talent, iconic production numbers, sizzling visual elements and extravagant costuming with hit songs from many musical genres into a single production that critics are calling “A Mega Hit”.

The strength of ONE The Show is the power of its music that carries the audience through the enchanting evening. No audience member will be touched in the same way as ONE weaves a magical musical journey filled with song, dance and laughter. Rest assured that the night will be one of the most enjoyable nights of live entertainment you will ever experience – vigorous, uplifting and even spiritual. That's the Power of ONE

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