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THE UNIVERSITY OF MARYLAND SCHOOL OF MEDICINE—CLINICAL NUTRITION RESEARCH UNIT, &
THE MARYLAND EXERCISE AND ROBOTICS CENTER OF EXCELLENCE

TAPAS...A New Dish for Stroke Patients

By Jeffrey Beans, B.S.

If any of you are “foodies,” people who spend time and energy on all things food, then you may know that tapas is a food preparation style often associated with the Mediterranean and more specifically Spain. In this case, we are not dishing about food but about exciting new results from a physical activity study at the University of Maryland Baltimore and the Baltimore VA Medical Center.

TAPAS, Testing Adaptive Physical Activity in Stroke, is a study that found its origin in Italy as a public health initiative for stroke survivors. Kathleen Michael, PhD, principal investigator, has taken all the best ingredients from that initiative and created her own recipe. The program’s goal is to see marked improvement in balance and gait in stroke survivors after traditional therapies.

In addition, people in the TAPAS study exercise together in a group. This small group setting allows participants to encourage

and be encouraged by their fellow stroke survivors. The group meets for six months and the exercise sessions



are comprised of walking over ground, a number of balance activities performed with balance assistance, and an obstacle course designed to help people practice movements commonly used in everyday life.

Participants also complete homework exercises, similar to those done in class. The participants do these exercises on their own at home on the days when they are not meeting with the group. Recently,

the first group completed the six month exercise program with results that were very positive. The study results showed improvement in three distinct areas; balance, gait, and exercise tolerance.

Balance is measured using the Berg Balance Scale, which is a test that has been used to measure risk of fall. After six months, each participant improved so much that their fall risk became similar to that of a non-disabled older adult. The Dynamic Gait Index is

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RESEARCH PAGE: The studies listed below are actively looking for participants. For more information about our studies, please visit the UM-OAIC Web site at: <http://peppercenter.umaryland.edu>.

Supervised Exercise Program for Older Adults at the University of Maryland, Baltimore: Healthy, non-smoking men & women 50-75 years old needed to participate in an exercise research study at the University of Maryland / Baltimore VA Medical Center. Work with Doctors and Exercise Physiologists to safely get fit. Participation involves tests to measure your fitness and function. You will receive free medical and fitness evaluations, 6 months of supervised exercise sessions, free parking, and compensation for your time. Call 410-605-7179. Mention code: STX

Stroke Survivors Needed

Do you know someone who has had a stroke and has arm or leg weakness? A study is being conducted investigating the benefits of exercise after stroke. Please call 410-605-7179 for information.

COMING IN 2009 FALLS PREVENTION STUDY

This upcoming study will focus on balance, falls and muscle strength/weakness.

Medically Structured Weight Loss/Exercise Study: Overweight, non-smoking, men and women ages 45-80 needed to participate in a diet or exercise research study. Work with Doctors, Dieticians and Exercise Physiologists to safely change your diet and physical activity to help you lose weight or get fit. Free cardiac, diabetes, and blood pressure risk evaluation. No diet drugs. Call if you are ready to make a commitment to losing weight or exercising and improving your health. Contact, U. of MD-BVAMC 410-605-7179, mention CODE-Ryan

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a test that is used to measure walking patterns done in various conditions that are intended to mimic life activities. From baseline to six months, the participants saw a 31% increase in walking pattern. That equates to more efficient and stable walking patterns. Finally, improvements in exercise tolerance were seen through the six minute walk and graded treadmill exercise tests. On average, the TAPAS participant walked twice as far at the end of six

months than at the beginning and experienced a 15% increase in fitness shown in the treadmill tests.

All of these results were delightful treats for both the participants and the study staff. The TAPAS study is an exciting opportunity for stroke survivors to take a bite out of their disability. If you have questions or would like more information, please feel free to call 410-605-7000 extension 4151.

PEOPLE ENCOURAGING PEOPLE (PEP) GATHERING

The PEP Club meetings are reunions for our study participants and their family members. The club meetings also include a stroke education component and research updates. For details about the PEP Club, please call 410-605-7000 extension 4151. The next meeting will be held **April 23, 2009**.

Pasta e Fagioli

Recipe Summary:

Preparation Time: 30 minutes

Number of Servings: 8

Ingredients:

2 Tbsp olive oil

1 cup chopped onion

2 cloves garlic, minced

2 14-1/2 oz can no salt added stewed tomatoes, undrained

1 15 oz can low sodium vegetable broth

3 cups water

1 15 oz can cannellini beans, drained

1 15 oz can red kidney beans, drained
1 cup diced green pepper
1/4 cup chopped fresh parsley
1 tsp basil leaves
1/4 tsp black pepper
1/2 tsp oregano
1 tsp rosemary
4 oz uncooked small shell pasta

Directions:

Heat oil in large pot or Dutch oven over medium heat until hot; add onion and garlic. Cook until onion is translucent. Stir in tomatoes with liquid, broth, beans, parsley, basil,

pepper, oregano, and rosemary. Bring to a boil, stirring occasionally, and then reduce heat to low. Simmer, covered for 10 minutes. Add pasta and simmer for 10 to 12 minutes until pasta is tender. Serve immediately with whole wheat bread and side salad

Nutrition Facts

Serving Size: 1/8 recipe, Calories 230, Calories from Fat 40, Total Fat 5g, Saturated Fat 1g, Trans Fat 0g, Cholesterol 0mg, Sodium 140mg, Total Carbohydrate 38g, Dietary Fiber 9g, Sugars 7g, Protein 10g

Source: www.fruitsandveggiesmatter.gov, Produce for Better Health

The Keys to Unlocking the Doors to Diabetes

By Laura Mastella, N.P.

Even if you have never built a house almost everyone knows that the first thing you do is pour a foundation. Without a strong foundation, the house will not stand and will likely crumble to the ground. And so it is with disease management, you need to lay a strong foundation to optimize treatment strategies. This is especially true with diabetes.

Diabetes.org reports that diabetes is a chronic illness that affects over 23 million Americans. Many of these Americans are unaware that they have diabetes. Even more alarming is that diabetes is the 5th lead-

ing cause of death in the U.S. (www.diabetes.org).

To better understand diabetes, imagine a lock and key. Your pancreas produces a hormone called insulin (the key). Your body needs insulin to convert sugar (the lock) from the blood stream into fuel for the cells in your body. In the case of diabetes, the pancreas does not make enough keys to open all of the locks in the blood stream or the keys that are made do not fit in the lock. In either case, sugars build-up in the blood stream.

There are three main types of diabetes; Type I, Type II and gestational dia-

betes. Type I diabetes is typically seen in children to young adults. With Type I diabetes, the pancreas is not producing insulin because the bodies immune system has destroyed the cells responsible for producing insulin. Or in other words, there are no keys to open the locks. Gestational diabetes occurs during pregnancy. Diabetes.org reports that approximately 5-10% of those with gestational diabetes will develop Type II diabetes later in life.

Type II diabetes is the most common type of diabetes. It is seen in over 90% of the population that has diabetes

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(www.diabetes.org). Historically this type of diabetes occurred in adults over the age of 30. However with the obesity epidemic, this type of diabetes is now seen in children and adolescents.

So, what do you do if you have diabetes? Build a strong foundation! In the case of diabetes, the foundation is lifestyle modifications that include a healthy diet and physical activity. Without this strong foundation, the risk of complications such as a heart attack, stroke, blindness, kidney failure and loss of limbs can occur.

What you eat is the most important aspect of managing diabetes. Make healthy food choices and watch portion sizes. Eat a wide variety of foods including vegetables, whole grains, fruits, beans and lean meats including

chicken and fish.

Remember to combine healthier eating with physical activity. This does not mean you need to train like an Olympian, or join a gym, just start walking. Walking is a great way for people to improve their fitness levels. The benefits of walking include improvement in circulation and mobility and it promotes weight loss.

Even with the healthy lifestyle foundation laid, you may still need help with managing your diabetes. Your health care provider may prescribe a medication. Medications help improve glycemic control (sugar levels) when diet and physical activity are not enough. There are several different types of medications that health care providers use to treat Type II diabetes. They include

biguanides (Metformin), sulfonylurea's (Glyburide), thiazolidinediones (TZD) (Actos), Dipeptidyl peptidase 4-inhibitors (DP4) (Januvia), Incretin (Byetta), and insulin. Talk to your health care provider about which medication you need and how much you should take. It is important to know that you may need to change medications and doses periodically.

Remember, diabetes can occur at any age. The best way to prevent complications from diabetes is to establish the healthy lifestyle modifications of healthy eating and physical activity. You will be amazed that by following these tips you will feel better and possibly lose weight while helping to control diabetes all at the same time. For more information about managing your diabetes please visit www.diabetes.org.