Candle With Care

by Berkeley Wellness

Because of their growing popularity in home decor, candles have been causing an increasing number of home fires, especially during the holidays. Here are facts from the National Fire Protection Association and tips for preventing candle fires:

**Candle facts**
Between 2009 and 2013, U.S. fire departments responded to at least 9,300 home fires started by candles, killing 86 people.

- About 3 percent of all house fires are started by candles.
- More than one-third of candle fires in homes start in bedrooms.
- Candle fires occur most frequently in December, when 11 percent of fires involve holiday decorations. The top three days for candle fires are Christmas, New Year’s Eve, and New Year’s Day.

**Candle tips**

- Extinguish all candles when leaving the room or going to sleep.
- Keep candles at least 12 inches from curtains, dried-out Christmas trees, decorations, papers, and other inflammables.
- Place candles on stable furniture in sturdy holders.
- Place candles where they won’t be knocked over by children or pets.
- Don’t let children have candles in their bedrooms.
- Use battery-operated flameless candles for decorating.
- Use flashlights, not candles, if there’s a power outage.

For more advice on how to use candles safely, consult the National Candle Association’s fact sheet.

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The estimated one billion people living with disabilities worldwide face many barriers to inclusion in many key aspects of society. As a result, people with disabilities do not enjoy access to society on an equal basis with others, which includes areas of transportation, employment, and education as well as social and political participation.

The right to participate in public life is essential to create stable democracies, active citizenship and reduce inequalities in society.

International Day of Persons with Disabilities falls on the 3rd of December each year, with the aim of promoting empowerment, and helping to create real opportunities for people with disabilities. This enhances their own capacities and supports them in setting their own priorities. Empowerment involves investing in people – in jobs, health, nutrition, education, and social protection. When people are empowered they are better prepared to take advantage of opportunities, they become agents of change and...
Heading off Headaches

by Berkeley Wellness

Headaches are one of the most common human ailments. For most people a headache is merely an infrequent annoyance, a passing discomfort. But for millions of others, headaches are a recurrent—and sometimes disabling—problem, resulting in more than 12 million visits to doctors in the U.S. each year. It’s estimated that 4 percent of adults have a headache on 15 or more days each month. Headaches cost Americans tens of billions of dollars each year—not only for medication and other medical care, but also for sick days and lost productivity.

Headaches are not completely understood by medical science, but researchers have advanced numerous theories to explain them, especially migraines. Brain tissue itself lacks pain-sensitive nerves and does not feel pain. Rather, headaches occur when pain-sensitive nerve endings in the skull, scalp, and other tissues in the head and neck send pain messages to the thalamus, the brain’s relay station for pain sensation from all over the body.

Headaches are classified as either primary or secondary. Most headaches are primary, meaning that they have no identifiable cause; secondary headaches are actually symptom of an underlying disorder, such as an infection, trauma, or neurological problem.

The greatest majority of primary headaches fall into four main categories: tension, migraine, cluster, and exertion. But any strict classification is open to debate, in part because the types often overlap.

If you have recurrent headaches or even a single severe headache for the first time, you should consult your doctor or other health care provider to get a proper diagnosis and then work together to treat or, if possible, prevent future occurrences.

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Did You Know... Over 1 billion people have some form of disability.
Wholistic Practices

COMMUNITY BODYWORK CLINICS!

As we further explore ways of helping everyone be more confident, healthful, and independent in their own life we are excited to continue to offer our popular Community Bodywork Clinics each month! Our specialty is offering helpful, calming, and educational treatments to people with disabilities; those in chronic pain, trauma, grief, or with ongoing illness; seniors; and caregivers.

During these Clinics, various body and energy work treatments will be available such as reiki, reflexology, massage, breathing exercises, meditation assistance, and more. 15 – 20 minute individual sessions as well as small group instruction are yours…. we just ask you consider making a donation to help our services be available to others. Our network of wholistic practitioners will assist you while you’re giving back to others! Call to make an appointment!

Keystone Human Services
1155 N. 4th Street
Sunbury, PA 17801

Tuesdays from 5 – 7 pm

7/18/17 1/16/18
8/15/17 2/20/18
9/19/17 3/20/18
10/17/17 4/17/18
11/21/17 5/15/18
12/19/17 6/19/18

(Services are also available as private appointments. Gift certificates are available for a specified person or as a donation for someone in need. Contact us for more info!)

For more information & to schedule an appointment time at our Clinics, please contact:
Networks for Training and Development, Inc.
570-286-7894
1-888-883-3881
registrar@networksfortraining.org
www.networksfortraining.org

Observe it helps most.
Health comes from within.
The Arc, Susquehanna Valley held a fall fashion show focusing on diversity on October 21, 2017, at 1:00 pm in the social hall of Zion Lutheran Church, Sunbury. Clothing was provided by Christopher & Banks, Monroe Marketplace, 330 Marketplace Boulevard, Selinsgrove. The fashion philosophy of Christopher and Banks aligned perfectly with the mission of this show: beauty comes in all sizes, shapes, and colors. This is the message The Arc wanted to get across to the public.

Christopher and Banks’ fashions are for women full of life and wisdom, confident in their beliefs, and in search of styles that make them feel fabulous. The clothing provided by Christopher and Banks certainly seemed to instill confidence in our models and made them feel fabulous. The staff at C & B are fashion experts and took great care in helping the models select the perfect outfit, fulfilling their mission of “providing customers with style, value, and service that help them look fabulous and feel amazing for every day and for life’s special moments”.

Also joining us for this show were stylists from Holiday Hair, Selinsgrove. These wonderful stylists transformed our models into virtual Cinderellas! The models loved all the pampering and the self-confidence just emanated from them. They left many members of the audience wishing they had that level of confidence in themselves.

Twelve models participated in the fashion show. After the models showed off their clothing, they got to show off their personalities by dancing, signing, and posing to the song of their choice. The models’ performances brought down the house! After the show, the audience had a chance to mingle with the models while enjoying refreshments.

The Arc, Susquehanna Valley is a 501(c)(3) non-profit organization devoted to improving the lives of individuals with intellectual and developmental disabilities.

For more information on The Arc, visit our website at www.thearcsusquehanna.org/

Persons with Disabilities…

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their own capacities and supports them in setting their own priorities. Empowerment involves investing in people – in jobs, health, nutrition, education, and social protection. When people are empowered they are better prepared to take advantage of opportunities, they become agents of change and can more readily embrace their civic responsibilities.
Candle with Care…
(Continued from page 1)

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For more advice on how to use candles safely, consult the National Candle Association’s fact sheet at http://candles.org/safety-candles/.

Headdaches…
(Continued from page 2)

Tension headaches
The most common kind of headache, tension headaches are sometimes called muscle-contraction or stress headaches. The name comes from the belief that such headaches are caused by excessive stress or tension leading to muscle contraction. Almost everyone gets this type of headache at least occasionally. The steady (not throbbing) dull ache is usually milder than migraine or cluster headaches. A band-like feeling of tightness around both sides of the scalp is typical; muscles in the back of the upper neck may feel knotted and tender to the touch. This type of headache is typically not aggravated by routine physical activity and not associated with additional symptoms like nausea.

It’s not known what causes tension headaches, but they are probably multifactorial. They may be associated with fatigue, depression, anxiety, missed meals, eyestrain, and, as noted earlier, stress (often the pain comes after the stress has ended). Assuming a posture that tenses muscles in your neck and head for long periods can trigger these headaches; so can jaw clenching (bruxism) or excessive gum chewing.

Migraines
It’s estimated that 13 percent of American adults have migraines each year, with women outnumbering men by about three to one. The word migraine is derived from the Greek, meaning “half a skull”—an apt description since the pain typically occurs on only one side of the head. However, the pattern of migraines can be variable, and the pulsating, throbbing pain that starts on one side can spread to involve the entire head.

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About 30 percent of migraines are preceded by or start with an aura—neurological symptoms most commonly involving distorted vision, such as zigzag patterns of shooting lights, blind spots, or a temporary loss of vision. The aura usually lasts anywhere from 5 to 60 minutes. Occasionally, the aura involves other senses or causes speech or motor deficits.

The throbbing pain of a migraine can be incapacitating and can last from a few hours to several days. It may be accompanied by nausea, vomiting, light-headedness, fatigue, and severe sensitivity to light (photophobia) and noise (phonophobia). The pain is usually worsened by routine activities.

Genetic factors play a role, as seen by the fact that about two-thirds of migraine sufferers have a parent or sibling with the ailment. Most people have their first attacks while in their teens or twenties, with the prevalence of migraines peaking in people in their thirties. At older ages, attacks usually become less severe and less frequent and may eventually stop.

In premenopausal women, hormonal changes may play a role, since migraines tend to occur right before or during menstruation and often increase in the months or years leading up to menopause. “Menstrual migraines” tend to last longer, be more debilitating, and respond more poorly to treatment than standard migraine attacks. Susceptible women often have more attacks if they take oral contraceptives; they tend to have fewer attacks during pregnancy and after menopause.

While the exact cause of migraines isn’t known, they are believed to begin in the brain as a neurologic dysfunction, with subsequent involvement of the trigeminal nerve (running through the head and supplying sensation to much of the face) and cranial vessels. Imbalances in brain chemicals, most notably serotonin (which helps regulate the perception of pain), are another likely factor. It’s also thought that people with migraines process and perceive sensory stimuli differently than people without migraines. They are often hypersensitive to touch, sight, sound, and smells even when not experiencing a migraine.

Many migraine sufferers are able to identify specific triggers that usually cause an attack (though migraines can happen without a discernible trigger). Avoiding such triggers is a key approach to migraine prevention. A headache diary can help identify them.

Triggers vary from person to person and sometimes even from one migraine attack to another in the same individual. Among the most common triggers are changes in sleep patterns, alcohol (especially red wine), certain foods, skipping meals, and changes in caffeine intake, as well as environmental factors such as changes in weather or altitude, glaring light, strong odors, noise, rocking motion, or air travel. As with many types of chronic pain, it’s difficult to know if depression causes migraines or vice versa. Many people experience a “migraine hangover”—that is, they feel exhausted or weak for hours or days following an attack.

Cluster headaches

Less common than other types of headaches, cluster headaches come in a group (hence the name) and are extremely painful. They
Did you know... Children with disabilities are nearly four times as likely to experience violence than children who are not disabled.

Headaches...
(Continued from page 6)

usually last anywhere from 15 minutes to three hours and can recur daily for several weeks. Months may pass between attacks. Usually unilateral and often around or behind one eye, these headaches may produce tearing and redness in the affected eye, along with a congested, runny nose. They often occur during sleep and wake the person up. The pain can be so excruciating that cluster headaches have been called “suicide headaches.”

Cluster headaches are about six to nine times more likely to strike men than women and are more common in smokers; the first attack usually comes in early adulthood. They are sometimes misdiagnosed as a sinus disorder or even an abscessed tooth. Since these headaches often occur in the spring and fall, they may also be mistaken for allergies. Some studies suggest a connection between cluster headaches and a previous head injury. Alcohol is often a trigger.

Exertion headaches

Strenuous physical activities can cause exertion-related headaches. Football players, joggers, weightlifters, and other athletes can experience these headaches, which may be caused by abrupt dilation or constriction of blood vessels, but researchers have not been able to pinpoint the exact cause of the pain. The headaches often come during or right after exercise, are abrupt or even explosive in onset, and are very painful. Sexual activity can also cause exertion headaches.

All exertion-related headaches should be evaluated by a physician because they can be a sign of a serious underlying condition, such as a brain hemorrhage. In addition, pending such evaluation, the activity that brought on the headache should be halted and avoided.

Headaches: When to Seek Immediate Medical Attention

People who suffer from migraines or cluster headaches should consult a health care provider about treatment. In addition, in a small number of cases, severe headaches may be a warning sign of a serious disorder, such as a dangerous infection, a stroke, or even a brain tumor or aneurysm.

Get immediate medical attention for the following:

- The sudden onset of an unusually severe headache, especially if it’s the “worst one ever,” you never had a severe one before, or you are over 50.
- A severe headache with a fever or stiff neck.
- A headache following a head injury. (Even if the injury occurred weeks or months earlier, you should consult a doctor.)
- A headache accompanied by altered mental status (such as confusion), loss of consciousness, numbness or weakness on one side of your body or face, difficulty speaking, or vision disturbance (other than an aura).
- A severe headache during or immediately after physical exertion, including sexual intercourse, if you never had one before.
- If you are immunosuppressed and have a new onset of headaches.

A headache diary

Migraines and other headaches can vary from person to person. Keeping a diary can help you identify your headache triggers (smartphone apps make this easy). After each headache, note the time of day when it occurred; its intensity and duration; activity immediately prior to its onset; any sensitivity to light, odors, or sound; use of medications; hours of sleep; any stressful events or emotional disturbances; foods and fluids consumed; if you have your menstrual period; and any other health conditions.
Cranberry Bread with Orange Glaze

Yield: Makes 1 whole loaf or 2 mini loaves

Nonstick cooking spray, or 1 tsp. butter
1/3 cup vegetable oil
3/4 cup granulated sugar
1/4 cup milk
2 large eggs
1 teaspoon vanilla extract
1 teaspoon orange zest, from 1 orange
1 cup fresh or frozen cranberries, chopped
1 1/2 cups all-purpose flour
2 teaspoons baking powder
1/2 teaspoon salt
1/4 cup pecans or walnuts, chopped

For Orange Glaze:
1 cup powdered confectioners’ sugar
2 Tbsp. fresh orange juice, from 1 orange

DIRECTIONS:
Heat oven to 350°F.
Using nonstick cooking spray or butter, grease a loaf pan or 2 mini loaf pans. Put a thin strip of parchment paper in the bottom of the pan and lightly grease over the parchment paper. In a large bowl, combine oil, sugar, milk, eggs, vanilla, orange zest and cranberries. Mix well. Stir in flour, baking powder, and salt. Fold in chopped nuts. Pour into prepared pan(s). Bake 1 whole loaf for 50-60 minutes, or 2 mini loaves for 30-40 minutes or until toothpick-tested done. Meanwhile, whisk together ingredients for orange glaze and set aside. Remove loaf from oven; let cool 10 minutes. Then, with a blunt knife, loosen sides of loaf from pan(s) and remove by lifting strip of parchment paper. Immediately brush glaze over each loaf. Cool completely on wire rack before slicing. Store tightly wrapped in refrigerator up to 1 week.