



# The Hamaspik Gazette

News of Hamaspik  
Agencies and  
General Health

JULY '23 • ISSUE NO. 213



## GAZETTE SURVEY

The GAZETTE asks YOU:

**DO YOU HAVE TINNITUS (RINGING EARS)?**

**A: YES; A: NO**

Respond to: [survey@nyshainc.org](mailto:survey@nyshainc.org) • 845-655-0667



## HEALTH STAT

### TALLYING THE TOLL OF TINNITUS

Cases with underlying hearing loss	90%
No. Americans experiencing tinnitus for 5+ minutes in last year	25 million
No. people seeking medical attention for tinnitus annually	16 million

Source: Hearing Health Foundation



## HEALTH TIP

### TACKLING TINNITUS

While tinnitus often can't be treated, these tips may help make symptoms less bothersome: 1. Use hearing protection to keep any tinnitus from worsening; 2. Lower music volume; 3. Use white noise; 4. Limit alcohol, caffeine and nicotine.

Source: Hearing Health Foundation

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LAWRENCE FARMS ORCHARDS, ALSO VISITED BY HAMASPIK, SAW THE GENTLEMEN OF HAMASPIK ROCKLAND'S DAY HAB PROGRAM HAVING A FIELD DAY HAND-PICKING THEIR FILL OF FRUITS AND VEGETABLES

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# Services Provided by NYSHA AGENCIES

## OPWDD SERVICES

### INDIVIDUALIZED RESIDENTIAL ALTERNATIVE (IRA)

A supervised residence for individuals who need out-of-home placement.

### INDIVIDUALIZED SUPPORT SERVICES (ISS)

Paid housing expenses and support for individuals who can live independently.

### HOME FAMILY CARE (HFC)

Places individuals with developmental disabilities into private homes to care and support the individual.

### DAY HABILITATION (DH)

A day program for adults with disabilities designed to develop skills, greater independence, community inclusion etc.

**Site Based:** Day Habilitation Service delivered in an OPWDD certified facility.

**Without Walls:** Day Habilitation Service delivered in a community-based setting.

### COMMUNITY HABILITATION (CH)

Working one-on-one with individuals in their home or in the community to achieve valued outcomes by helping them develop daily living skills and achieve long-term goals.

### COMMUNITY PRE VOCATIONAL

Working with individual to prepare them for paid community employment- Teaching individuals job skills and other related social skills to enhance their ability to obtain employment in the future.

### SUPPORTED EMPLOYMENT (SEMP)

Working with individual to support and provide them with necessary coaching so they can successfully engage in paid competitive employment.

### FAMILY SUPPORT SERVICES (FSS)

Support for the individual's family by reimbursing them for certain qualifying items or services, otherwise not available to them.

### INTENSIVE BEHAVIORAL SERVICES (IBS)

Short-term interventional services for people with behavioral issues and their family members.

### RESPITE:

Home and Community-based respite services to provide a relief for the individual's caregiver and family.

**At-Home:** Respite services delivered in the home of the individual.

**After School:** Respite program provided every day after school hours.

**Sundays:** Respite program provided every Sunday.

**Legal Holidays:** Respite program provided on all legal holidays when school is not in session.

**Summer Break:** Full day respite program during the summer break weeks.

**Respite Night Program:** Respite services delivered in the evening hours to high-functioning individuals by taking them out in the community and doing recreational and stimulating activities with them.

**Weekend Getaways:** A weekend retreat for individuals receiving respite services.

### SELF-DIRECTION

The Individual or their advocate takes direct responsibility to manage their services and self-direct their budget.

**Fiscal Intermediary (FI):** Assists individual or their advocate in implementing their Individual Support Agreement and to manage financial accountability and employer responsibilities.

**Brokerage:** Assisting individuals or their advocate in creating and managing their budget.

### ARTICLE 16 CLINIC

Provides medical, diagnostic, and therapeutic services for persons with developmental disabilities. Such as: Physical therapy · occupational therapy · speech therapy · psychology · social work · psychiatry · nutrition

### PARENTAL RETREATS

Providing: Getaways and retreats for parents of individuals with disabilities

### EMOD, VMOD AND ASSISTIVE TECHNOLOGY

Individuals who are eligible and approved for OPWDD services who reside in non-certified home and community-based settings may qualify for AT, E-Mod, and V-Mod services funded through the OPWDD HCBS Waiver.

**Assistive Technology :** Any device, item, equipment, product, or system that is used to increase, maintain, or to improve an individual's functional capabilities and/or independence in performing activities of daily living (ADL).

**E-Mods:** Physical adaptations to an individual's home, like ramps, lifts and grab bars, needed to ensure his or her health, welfare and safety and to maximize independence and reduce need for institutionalization and/or more restrictive, costly living arrangements.

**V-Mods:** Physical adaptations to the individual's vehicle that are necessary to ensure the health, welfare, and safety of the individual or that enable the individual to function with greater independence.

## DOH

### EARLY INTERVENTION (EI)

Provides a range of services to help young children (ages birth-3) who have a specific delay in their development.

**Group Development Model (GDM):** Provides Early Intervention services in a group-setting

**Therapy:** Provides OT, PT, SLP, Vision, Nutrition, Play, Special Education, Family Training etc. to help the child develop appropriately.

**Evaluations:** Provides full evaluations to assess child's skills and development.

**Ongoing Service Coordination (OSC):** Provides ongoing support for families of children enrolled in the Early Intervention Program.

### NURSING HOME TRANSITION AND DIVERSION (NHTD)

Waiver services to help individuals who need nursing-home level of care safely remain home and avoid nursing home placement.

**Service Coordination (SC):** Provides coordination to the individual in gaining access to needed waiver and Medicaid State Plan services, as well as other local, state, and federally funded educational, vocational, social, and medical services.

**Community Transitional Services (CTS) / Moving Assistance (MA):** Provides moving assistance with packing and transporting individual's possessions and furnishings when he/she must be moved from an inadequate or unsafe housing situation to a viable environment.

**Environmental Modifications (EMODS):** Provides Internal and external physical adaptations to the individual's home, that are necessary to assure the health, welfare and safety of the individual and avoid institutionalization.

**Vehicle Modification (VMODS):** Modifications to a vehicle that is used to improve the individual's independence and access to services and supports in the community.

**Assistive Technology :** Provides durable medical equipment and supplies for the individual to increase their level of independence, safety, and functional limitations.

### TRAUMATIC BRAIN INJURY (TBI)

Waiver services to help individuals who had a traumatic brain injury.

**Service Coordination (SC):** Provides coordination to the individual in gaining access to needed waiver and Medicaid State Plan services, as well as other local, state, and federally funded educational, vocational, social, and medical services.

**Community Transitional Services (CTS) / Moving Assistance (MA):** Provides moving assistance with packing and transporting individual's possessions and furnishings when he/she must be moved from an inadequate or unsafe housing situation to a viable environment.

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### SOCIAL DAY PROGRAM

A comprehensive structured program providing functionally-impaired adults an array of services in a protective daytime setting. Each individual participant receives services in accordance with an Individualized Service Plan (ISP) based on a personalized assessment.

### SENIOR DINING PROGRAM

Serves balanced nutritious meals to older New Yorkers up to five days a week in a variety of settings. Eligible to seniors age 60 and up, as well as to spouses younger than 60 and individuals with disabilities residing in eligible seniors' homes..

## HAMASPIK CHOICE

### MLTCP:

Providing: A managed long-term care plan (MLTCP) approved by New York State.

## HMO/INSURANCE

### ABA

Behavior modification services for children with autism.

**Social Group:** ABA service delivered in a group setting.

**One on One:** ABA service delivered on a one-on-one basis in the child's home or community.

## HAMASPIK HOMECARE

### LHCSA

Licensed HomeCare Services Agency.

**Home Health and Personal Care Services (HHA/PCA):** Our PCA/HHA assist individuals with personal care needs, activities of daily living, and light housekeeping. They are extensively trained, screened and supervised by a RN.

**NHTD/TBI Home & Community Support Services (HCSS):** Our HCSS Certified Aides assist those enrolled in the NHTD or TBI Medicaid Waiver Programs with oversight and supervision, in addition to personal care services.

**Nursing Services (RN):** Providing skilled observation and assessment - care planning - paraprofessional supervision - clinical monitoring and coordination - medication management - physician - ordered nursing interventions and skilled treatments.

**HHA/PCA Training:** Free PCA/HHA training and competency testing offered for those interested in a home care career.

### CDPAS/CDPAP: CONSUMER DIRECTED PERSONAL AIDE SERVICES/PROGRAM

As an alternative to traditional homecare, this program empowers the client to hire, train, and set the schedule of their personal assistants (PA). The PA's may be family members and can even live in the same home.

## NYS HCR

### ACCESS TO HOME

Providing home modifications for people with physical disability.

### RESTORE

Providing emergency repairs for low incomes homeowners over the age of 60.

## US AND NYS AGRICULTURE

### CHILD AND ADULT CARE FOOD PROGRAM (CACFP)

Provides federal reimbursements for the costs of nutritious meals and snacks which are served to eligible children and adults at participating daycare centers, after-school programs, or shelters.

## NYSED SERVICES

### ACCESS VR

Assist individuals to achieve and maintain employment and to support independent living through training, education, rehabilitation, and career development.

### PATHWAY TO EMPLOYMENT

Employment planning and support services that provide assistance for individuals to obtain, maintain or advance in competitive employment or self-employment.

## NYSHA

### THE HAMASPIK GAZETTE

Providing: A bilingual monthly newspaper keeping the community up-to-date on all major news in medicine, public health, disability, hospitals, senior care, and general Hamaspiik news.

### MAMTAKIM

A summer camp for individuals approved for OPWDD services.

## BOE

### THE HAMASPIK SCHOOL

Private chartered school for kids age 5 - 10 with developmental disabilities, taking education to heart and teaching them in a way they can learn thru an individualized plan, Including ABA, OT, PT, SPL and Multi-sensory hands-on learning.

### KINDERVILLE

A summer camp for individuals approved for OPWDD services.

## OMH

### SIPUK, ARTICLE 31 CLINIC

Mental Health-licensed behavioral health, Article 31 Clinic, servicing all ages.

## OMH/DOH

### ADULT HEALTH HOME CARE MANAGEMENT SERVICES

Intensive, comprehensive care management for Adults with chronic condition(s) and/or mental health issues at greater risk for relapse and/or lack of care.

### CHILDREN HEALTH HOME CARE MANAGEMENT SERVICES

Intensive, comprehensive care management for children ages 0-21 with chronic condition(s) and/or mental health issues at greater risk for relapse and/or lack of care

### ADULT HCBS SERVICES

Behavioral Health Home and Community-Based Services for eligible adults over the age of twenty one.

**Community Psychiatric Support and Treatment:** Support and treatment to achieve functional improvement and stability, while working to attain the personal goals in a community setting.

**Family Support and Training:** Family training and support to engage the family in the treatment planning process and provide them with emotional and informational support to enhance their skills to assist in the recovery.

**Psychosocial Rehabilitation:** Assists with rehabilitating functional deficits and interpersonal or environmental hardships associated with the behavioral health condition.

**Empowerment Services-Peer Support:** Peer-delivered services designed to promote skills for coping with and managing behavioral health symptoms, while utilizing recovery-oriented principles.

**Habilitation:** Assist to acquire and improve skills such as: communication, self-care, socialization, mobility, etc. to successfully reside in home and community-based setting.

**Intensive Supported Employment:** Assists to obtain and keep competitive employment.

**Prevocational Services:** Prepares for employment, developing strengths and soft skills that contribute to employability.

**Transitional Employment:** Strengthens the work record and skills toward the goal of achieving assisted or unassisted competitive employment.

**Ongoing Supported Employment:** Ongoing follow-along support when holding down a job.

### CHILDREN HCBS SERVICES

Behavioral Health Home and Community-Based Services for eligible children from birth to twenty one.

**Prevocational Services:** Designed to prepare a youth (age 14 or older) to engage in paid work, volunteer work, or career exploration. Prevocational Services are not job-specific, but rather are geared toward facilitating success in any work environment.

**Caregiver Family Support and Services :** Teaches skills to caregiver/family's that will enhance their ability to care for the child/youth in the home and/or community.

**Community Self Advocacy Training and Support:** Provides family and caregivers with techniques and information not generally available so that they can better respond to the needs of the Individual related to their disabilities.

**Community Habilitation:** Provides assistance with learning social skills, daily living and health related duties by working with the individual on goal-oriented tasks.

**Supported Employment:** Designed to prepare youth with disabilities (age 14 or older) to engage in paid work.

**Planned Respite:** Provides short-term relief for the individual's family/caregiver while supporting the individual's mental health, substance use and/or health care goals.

**Day Habilitation:** Provides assistance with learning social and daily living skills in a certified agency setting.



● ► TRI-COUNTY CARE NEWS

# Tri-County Care Resumes Face-to-Face Meeting With Clients

*Long-Awaited Removal of Pandemic-Related Public Health Emergency Means Restored and Reinvigorated Personal Touch, In-Person Care for Individuals Supported by Agency*

Care Managers at TCC are “very happy to go back to in-person face-to-face visits,” excitedly reports Care Manager Supervisor Yechiel Teichman.

That’s because, with the coronavirus public health emergency (PHE) over as of May 2023, “normal” is back!

For Tri-County Care and its dozens of Care Managers (CM) across a dozen-plus New York counties, that means being able to go back to visiting clients in person at their homes, as was the regular case before anyone knew what “Covid-19” was.

It’s been a long three years.

Face-to-face visits with individuals receiving services from Tri-County Care were—and now, again are—one of the core services of Care Management.

But with the COVID-19 pandemic and the ensuing public health emergency, the in-person face-to-face visit requirement was restricted to strictly phone and video conversations. That said, Care Managers had to get to know their new enrollees, as well as stay in contact with existing



clients, through virtual face-to-face visits.

The same became true for all meetings involving Life Plans, the foundational documents upon which each individual’s services and supports are based.

Now, that personal touch at Tri-County is rapidly getting back up to speed.

According to Mr. Teichman, one

visiting Care Manager saw that an individual lacked the skills required to maintain his apartment. He suggested adding housekeeping as a Community Habilitation goal, or exploring the option of home care. He also offered the individual a service that helps people with disabilities with providing minor home repairs and some more free of charge. That service, dubbed CHORE

and provided by the Bridges agency, unites Rockland County volunteers with county residents with disabilities and seniors over age 60 to provide minor home repairs at no cost.

On a different occasion, a Care Manager now resumed meeting with an individual at his school—but, thanks to doing so, noticed that the boy was not socially integrating with his classmates. The Care Manager shortly offered his mother assistance with accessing and joining a social skills group.

“Tri-County Care Managers are not here for the sole purpose of maintaining documentation, staying in compliance and fulfilling requests by individuals and advocates,” notes Mr. Teichman. “Care Managers are always looking to voluntarily offer services for their individuals. Resuming in-person face-to-face visits is a huge game-changer, allowing our individuals and advocates to easily open up and share their struggles so that our Care Managers can more easily identify solutions.” ★

● ► HEALTH NEWS

## Early Pandemic Reversed Historic Gains on Hospital-Based Drug-Resistant Infections

*First Wave of Spring 2020 Coronavirus Patients Put Reduction of Bacterial Infections on Back Burner*

The good news, according to a report by the U.S. Centers for Disease Control and Prevention (CDC), is that in 2019, there was a 30-percent drop in hospital-associated infections (HAIs) by drug-resistant bugs. That means that 30-percent less hospital patients were getting sick and dying of infections that antibiotics could not treat.

But the bad news, says the same report, is that by 2020, just one year later, those gains were erased. In fact, they increased by 15 percent, and that increase is directly linked to the spring-2020 onset of the COVID-19 pandemic, the CDC reports.

According to the federal agency, one specific reason for the increase is that hospitals first used antibiotics to respond to a disease that they didn’t know how to treat at the time. The

report says that nearly 80 percent of patients hospitalized with COVID-19 between March and October of 2020 were given an antibiotic.

Along with that, the chaos of a previously-unknown virus caused “difficulty in following infection prevention and control guidance” during the early days of the pandemic, says the report.

That chaos consisted of: a surge of patients; most of whom also required longer stays; their increased need for devices like ventilators and catheters

that commonly harbor bugs; shortages of personal protective equipment; and shortage of staff.

What’s more, “in some instances,” the report says, monitoring of antimicrobial resistance incidents shifted to monitoring COVID-19 instead in the pandemic’s earlier days—which would indicate that cases of HAIs not only increased during the early pandemic but also were underreported, too.

The report resurrects the question of whether pandemic first-wave deaths



**SIGN OF THE TIMES:** REDUCTIONS IN BUGS IN HOSPITALS REVERSED BY PANDEMIC

reported as due to COVID-19 infections were actually due to hospital-acquired bacterial infections. ★

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**EDITOR:** Meyer Wertheimer

**WRITER:** Mendy Hecht

**TEL:** 845-655-0613

**FAX:** 845-655-5613

**MAIL:** Hamaspik Gazette, 58 Rt. 59, Suite 1,  
Monsey, NY 10952

# Happening in Health Today

## RESEARCH TEAM TO DEVELOP TINY INJECTABLE ROBOTS TO STOP BRAIN SEIZURE ACTIVITY

**Rome, Italy** — The concept of biological robotics has been around for several years now. The idea is to insert or inject a tiny device into the body for diagnostic or procedural purposes. The concept remains largely experimental.

But now, a team of researchers from across Europe are planning to manufacture and ultimately mainstream “microbots”—to help protect patients against epileptic seizures.

The planned tiny devices, each to be about a tenth of a millimeter in size, will be implanted in human brains and controlled via small wearable units. They will be capable of monitoring brain electrical activity to detect oncoming seizures—and then work to dampen it with targeted *neurostimulation*, or tiny shocks to specific brain areas.

The project, dubbed CROSSBRAIN, is being led by Rome’s Tor Vergata University and is slated to produce the robots over the next four years.

## ANOTHER GOOD REASON FOR A GOOD DAILY WALK: LESS NONALCOHOLIC FATTY LIVER DISEASE

**Hershey, Pennsylvania** — A brisk daily walk—in fact, brisk daily exercise of any form—has long been known to be good for your health.

But now here’s another reason to get that rough 22 minutes a day of sustained body movement and elevated heart rate: greater protection against nonalcoholic fatty liver disease (NAFLD).

Unlike liver disease resulting from drinking too much alcohol, NAFLD is often the result of obesity, Type 2 diabetes, or having high blood pressure, high cholesterol, or high triglyceride levels—and a new study by Penn State College of Medicine finds that rates of NAFLD were reduced by up to 30 percent by hitting that daily exercise quota.

The research reviewed data from

## ULTRA-PROCESSED FOODS MAY BE LINKED TO INCREASED RISK OF CANCER



### RECIPE FOR GRIM DIAGNOSIS: ULTRA-PROCESSED FOODS CARRY INCREASED RISKS

**London, England** — Higher consumption of ultra-processed foods may be linked to an increased risk of developing and dying from cancer, an observational study by Imperial College London suggests.

Imperial researchers have produced a comprehensive assessment to date of the association between ultra-processed foods and the risk of developing cancers. *Ultra-processed* foods are defined as any food product undergoing heavy

processing during production: fizzy drinks, mass-produced packaged breads, ready-to-eat meals and most breakfast cereals.

The study used public records to collect diet information on 200,000 middle-aged adults. Reviewing their records over a ten-year period, researchers found that higher consumption of ultra-processed foods was associated with a greater risk of developing cancer overall, specifically ovarian and brain cancers. ★

14 existing studies on over 550 NAFLD patients to arrive at its conclusions, which were published in the *American Journal of Gastroenterology*.

## INJECTABLE GEL MAY TREAT HEART-ATTACK, TRAUMATIC BRAIN INJURY TISSUE DAMAGE

**San Diego, California** — If experiments on lab rats and even hogs are any indicator here, a liquid biomaterial that can be injected directly into the human bloodstream to treat hearts damaged by heart attacks

may be a reality in the next few years.

The *biogel* was developed by the University of California at San Diego (UCSD). It was tested and proven effective in treating tissue damage caused by heart attacks in both rodent and large animal models. Researchers also provided proof of concept for traumatic brain injury (TBI) and pulmonary arterial hypertension cases.

The material works by flowing through the bloodstream to damaged tissue, where it binds to damaged blood-vessel cells known as *endothelial*

cells.

A study on the safety and efficacy of the biomaterial in human subjects could start within one to two years.

## RESEARCHERS DISCOVER NEW PATHWAYS TO PRODUCE STRONG ANTI-TUMOR IMMUNITY

**Tampa, Florida** — Researchers have now apparently won at least a small battle in harnessing the body’s natural immune system to fight various forms of cancer.

Doctors and medical scientists at Tampa, Florida’s H. Lee Moffitt Cancer Center & Research Institute recently found that stimulating certain *dendritic cells* produces strong T-cell activity against tumors. Dendritic cells are a special type of immune cell that boosts immune responses by activating other immune-system cells called T cells.

The team used an inert virus called an *oncolytic adenovirus* to trigger dendritic cells.

In their recent study, published in *Cancer Immunology Research*, researchers showed how stimulating dendritic cells through the CD40 and interferon-β pathways produces strong T cell activity against tumors.

The researchers are now planning a further trial on people with non-small cell lung cancer patients.

## INGESTIBLE SENSOR COULD HELP DOCTORS PINPOINT GI DIFFICULTIES IN REAL TIME

**Cambridge, Mass.** — Engineers at the legendary Massachusetts Institute of Technology (MIT) have developed an ingestible sensor whose location can be monitored as it moves through the digestive tract.

The advance could help doctors more easily diagnose gastrointestinal motility disorders such as gastroesophageal reflux disease (GERD) and gastroparesis.

The tiny sensor works by detecting a magnetic field produced by an electromagnetic coil located outside the body. The strength of the field varies with distance from the coil, so the sensor’s position can be calculated based on its measurement of the magnetic field.

Researchers showed they could use the technology to track the sensor as it moved through the digestive tract of large animals. Such a device could offer an alternative to more invasive procedures, such as endoscopy, that are currently used to diagnose motility disorders. ★



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● ► HAMASPIK NEWS

# Where Flowering Growth Underscores Flourishing Love

*Floral-Themed Event at Hamaspiik Orange Women's Day Hab Boosts Parents With First-Hand, and Hands-On, Partnership*

Mothers most want to know that their beloved daughters are growing. What better way to say so than an event themed around those most lovely of growing things: flowers.

Hamaspiik of Orange County's Women's Day Hab program recently hosted an open house for mothers and caregivers—centered on a floral workshop that drove the aforementioned point home. Guests left with fresh floral arrangements in vases hand-decorated by their beloved daughters.

The event was held at the Hamaspiik main building at 1 Hamaspiik Way in Kiryas Joel, New York. It consisted of an opening meet-and-greet, a facility tour, speeches by staff, and gifts to parents from individuals, all crowned by a flower-crafting workshop. The entire event unfolded under the leadership of Mrs. M. Kleinman, Hamaspiik of Orange County's Women's Day Hab Manager.

The event started at 8:00 p.m. in the Hamaspiik Terrace central ballroom, which was partitioned in two. One side had a convention-style meet-and-greet and the other a buffet-style dinner and vase-decorating workshop.

At the meet-and-greet, tables were decorated with neatly-printed name/title placards, informative packets, Hamaspiik phone-number magnets, pens and notepads, and lovely introductory letters from Day Hab Manager Kleinman, including personal contact info. Behind those tables sat Mrs. Kleinman and energetic staff, as well as capable Assistant Manager Mrs. Josephovits, the driving force quietly behind much of the Day Hab's daily successes, and therapists who service the Day Hab throughout.

Arrivals and staff—including Hamaspiik of Orange County's Community Liaison Mrs. R. Indig—exchanged friendly introductions. Hamaspiik employees cheerily welcomed guests and chatted about their loved ones. Not unlike PTA school night, personalities and strengths of each individual were heartily shared.

A large chart depicting the Day Hab's regular weekly schedule, hour-by-hour and day-by-day, was posted in one corner. "Guests were in awe to see what amazing activities are done daily," reported one staff member.



**PUTTING IT ALL ON THE TABLE:** WARM SETTINGS AWAIT GUESTS AND STAFF FOR AN EVENING OF DISCUSSION AND SHARED MISSION OF CARING



**GROWTH:** FRESH FLORA SYMBOLIZE THE CONSTANT IMPROVEMENT MARKING LIFE AT DAY HAB

Separate tables were also manned by Hamaspiik's special instructors of practicable and important subjects like Parshah, middos, creative baking skills and food prep, music and dancing, physical fitness, hairstyling and more. Also present were the Director, staff and therapists of Hamaspiik's Theragen clinic, which provides a range of therapeutic services for individuals with disabilities. Theragen is run by Manager Mrs. S. Levy and Director Mr. Joel Greenfeld.

Guests came away from those tables informed and empowered.

Earlier, the "Day Habbers" had enjoyed a vase-painting workshop; now, just as guests headed over to the other side for a buffet dinner, each was handed a vase hand-painted by their beloved daughter—not just a heartwarming gift but a theme-setting visual prop, too. Furthering that theme was each vase's card holder, into which

was later inserted an artsy "Thank You, Mommy!" card that the young women made with special instructor Mrs. P. Landau.

At 9:00 p.m., the evening was formally opened by Hamaspiik's very Mrs. Brenda Katina.

Mrs. Katina praised Day Hab staff and assured guests that the young ladies are in the best of hands. She then called upon Manager Kleinman.

Mrs. Kleinman reintroduced herself, broke down the Day Hab program's details, and introduced upcoming projects. She expressed the connection each trained Hamaspiik Direct Support Professional (DSP) has with each individual: how they identify and tend to every need, how much they care, and what difference they make. Mrs. Kleinman also welcomed feedback, distributing suggestion cards to be submitted later.

Mrs. H. Ausch of Harmony



**NEW ROOTS:** A TAKE-HOME GIFT FOR MOMS

Productions was next introduced.

Mrs. Ausch had been the driving force of Kishroinois, the smashingly successful play put on last year by the Women's Day Hab for the community at large. The creative director now appeared in person to announce Winter 2024's upcoming planned performance—generating robust applause by a crowd still wowed by the last performance's professionalism.

The evening's highlight followed: a bouquet-making workshop, led by the talented Mrs. Kleinman, where each guest arranged a lovely take-home floral arrangement decorated by a "blossoming flower"—a framed photo of their daughter.

"The mothers and caregivers had the opportunity," concludes Mrs. C.M. Landau, herself the understated pillar of the event, "to see firsthand what an amazing place the women's Day Hab is."





# Driven by You



When we saw you needed a hand, we arranged the services you needed to get through it. When you had a question, we found answers. And when you're going through challenging times, we're right there with you.

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# The Autism Update

*News and developments from the world of research and advocacy*

## STUDY FINDS MOST BRAIN-FUNCTION MRI SCANS RUINED BY PATIENT HEAD MOVEMENT

**St. Louis, Mo.** — Your standard *magnetic resonance imaging* (MRI) scan produces images of the body's *anatomy*, like the brain. Your standard *functional MRI* (fMRI) scan produces images of the body's *function*, like the electrical activity within the brain.

But now, research at Missouri's Washington University finds that most fMRI scan images are flawed—simply because patients move their heads while they're inside the scanning machines.

What's more, the research found that most fMRI scan images *remain* flawed even *after* computer software weeds out and/or corrects the majority of images distorted by patient head movement.

The research is significant because it would mean that medical diagnoses based on fMRI scans can be called into question. It's especially significant for diagnosis and treatment of autism, because fMRI brain scans are commonly used to help diagnose and treat autism.

## PEOPLE WITH AUTISM ACTUALLY MAY FEEL MORE PAIN, SAYS STUDY

**Baltimore, Maryland** — Contrary to what stereotypes may indicate, especially those of people with non-verbal autism, new research suggests that people with autism feel as much pain as do people without the neurological condition.

What's more, the study indicates that people with autism may actually feel more pain than neurotypical people.

The study, in the medical journal *Pain*, set out to determine whether people with autism feel pain more than the general population.

More specifically, the study focused on *sensory hypersensitivity*, or trouble adapting to such common environmental stimuli like humming lights or fans. This hypersensitivity affects about ten percent of the general population—but up to 90 percent of the autism population. Studies have also linked sensory hypersensitivity with more pain.

The comparison study of over 100

adults with or without autism found that people with autism felt pain more.

## TODDLERS LEAST DRAWN TO "BABY TALK" VIDEOS LATER MOSTLY DIAGNOSED WITH AUTISM

**San Diego, California** — An experiment involving over 650 children ages one to four has found that those paying the least attention to videos of the faces of mothers speaking "baby talk" were later 94-percent diagnosed with autism. Baby talk, also known as "motherese," is the sing-song speech characterized by exaggerated intonation, high pitch and slow speed.

The experiment had its youthful participants look at one of two videos: One of mothers speaking "baby talk" and the other of a busy highway or abstract shapes.

Some 94 percent of the toddlers who focused on the baby talk under 30 percent of the time were later accurately diagnosed with autism.

"Autism can be accurately diagnosed in a subset of children using new

eye-tracking technology in just a few minutes," said lead researcher Prof. Karen Pierce of the UC San Diego Autism Center of Excellence.

## ELECTRONIC HEALTH RECORD (EHR) DATA MAY PREDICT AUTISM EARLY ON

**Durham, North Carolina** — According to a new study in *JAMA Network Open*, autism can be accurately detected using electronic health record (EHR) data when children are as young as 30 days old.

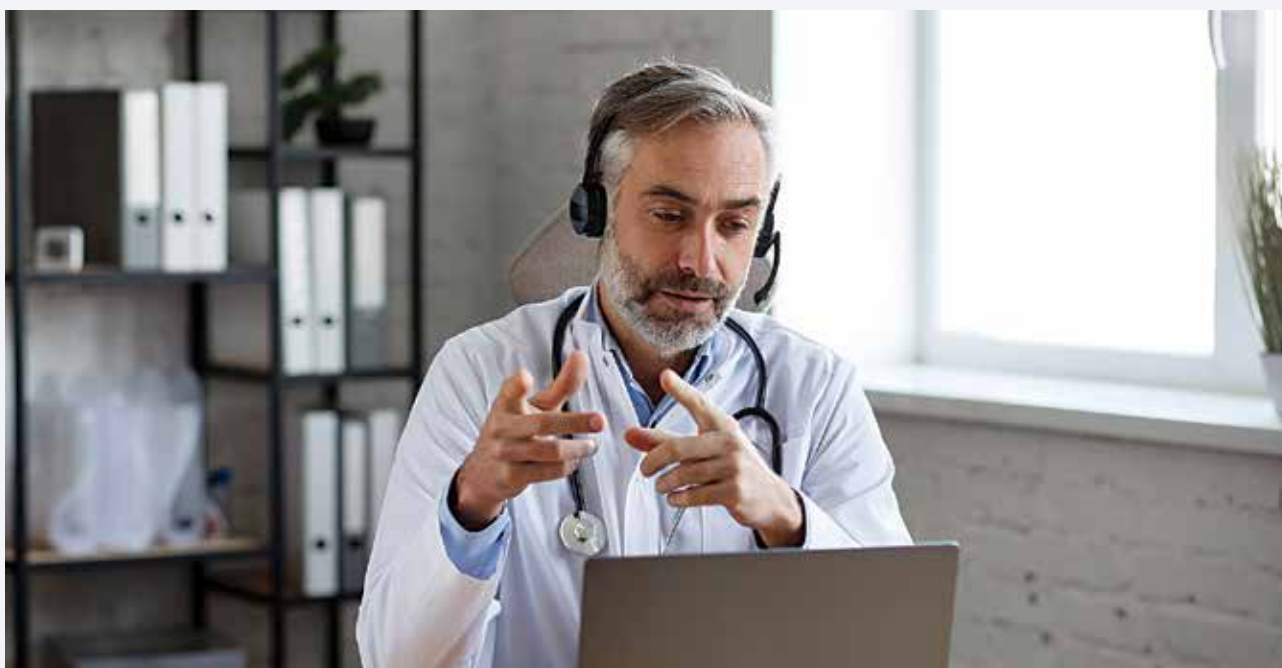
What's more, the autism detection accuracy rate when using EHRs increases with the age of the children in question.

"This automated approach could be integrated with caregiver surveys to improve the accuracy of early autism screening," wrote the authors.

The analysis was based on health data on over 45,000 children seen at the Duke University Health System before 30 days of age between the dates of January 2006 and December 2020.

The researchers found that autism detection by 30 days of age based on a child's EHRs achieved a 23-percent positive diagnosis rate, while detection by 360 days of age based on a child's EHRs achieved a 31-percent positive diagnosis rate.

## TELEHEALTH AUTISM TEST SHOWS PROMISE DURING AND BEFORE PANDEMIC



**GETTING IT RIGHT ONLINE:** THE TELE-ASD-PEDS TEST, GEARED SPECIFICALLY FOR TODAY'S ONLINE WORLD, MAY RELIEVE TESTING DELAYS

**Nashville, Tennessee** — The Autism Diagnostic Observation Schedule (ADOS) remains the gold standard of autism tests for children. Developed in 1989, the ADOS consists of 30 to 60 minutes of tasks; a professional trained examiner scores each and totals them at the end. The ADOS test is also conducted in person.

But with the pandemic shutdown, a preexisting national problem—a shortage of trained ADOS testers beyond metro areas and resulting waiting lists—worsened, with even fewer in-person ADOS tests available.

Enter Vanderbilt University's TELE-ASD-PEDS (TAP), an autism test conducted remotely via live

streaming audio/video. Developed and tested before the pandemic, the test uses eight assessment activities and seven scoring elements to screen for skills and behaviors most predictive of autism.

The pandemic greatly boosted TAP's usage nationwide; it is now increasingly available. ★

## FIRST FDA-APPROVED RETT SYNDROME DRUG NOW AVAILABLE

**Philadelphia, Pennsylvania** — The Phase 3 trial for Daybue, a drug originally developed in Australia, began in 2019. The drug, known medically as *trofinetide*, was designed to treat Rett syndrome, a rare neurodevelopmental disorder with some autism-like symptoms, including handwriting and reduced walking and speaking.

Most recently, with that clinical trial at Pennsylvania's Children's Hospital of Philadelphia (CHOP) completed, Daybue was approved by the FDA—making it the first treatment for Rett. The trial showed significant improvements as measured by the Rett Syndrome Behavior Questionnaire and the Clinical Global Impression Scale-Improvement. However, the drug does come with a significant side effect of diarrhea.

According to Acadia, the company handling Daybue's U.S. debut, there are about 4,500 people with Rett in the U.S. The drug became commercially available this past April. ★



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# Farming out Recreation and Rejuvenation

*Hamaspik of Rockland County Gets Down to Earth When it Comes to Back-to-Basics*

In the aftermath of the pandemic, there's never been a better time to get out and about than now.

That's certainly been the case at Hamaspik of Rockland County's Men's Day Hab Program, where longtime and legendary Manager Mr. Pinchos Knopfler has always made extracurricular activities in the great outdoors a staple of the daily curriculum—especially come the warm spring and summer months.

And now that Covid-19 is a routine concern, thankfully, getting out and about—whether that be pounding the pavement or hitting the ground—is all the more a priority.

But for Mr. Knopfler and crew, the preference has generally been to take the natural, rustic route.

That's why, in recent weeks, the gentlemen with disabilities who populate the popular Hamaspik program visited not one but two properties encapsulating the great outdoors in rural upstate New York.

The first was the sprawling Lawrence Farms Orchards in the Orange County city of Newburgh—which, for Hamaspik of Rockland

County's Men's Day Hab, was actually not a first. The gentlemen have been visiting its grounds for years now, reports Manager Knopfler.

"Lawrence Farms Orchards is a family owned and operated working fruit and vegetable farm in the beautiful Hudson Valley," the regional attraction describes itself on its website. "Our family has been involved in agriculture since our great-grandfather came to this area from England in 1892."

And a small but not-insignificant portion of that history has been marked with Hamaspik visits—where the gentlemen have enjoyed making their own personal choices when it comes to plucking the Orchards' every-replenishing bounties of apples, strawberries, peaches and plums—not to mention, depending on the season, lettuce, cherries, peas, gooseberries and currants. (Let's not forget the raspberries, tomatoes, peppers, broccoli, eggplant and cabbage!)

"They've known us over many years," recounts Mr. Knopfler, a fact that can be affirmed by this writer of



THE "RIDE" STUFF: THE GENTLEMEN GEAR UP FOR A WHEELED WHIRL AROUND THE GROUNDS

the *Gazette*, which has covered visits to Lawrence Farms on quite a few occasions in the past 13 years. "They are extremely nice to us."

While Lawrence Farms also boasts "three generations involved in working various aspects of the family farm," that history also includes several "generations" of visits by Hamaspik.

"We have been doing 'Pick Your Own' fruits and vegetables for over 30 years," the venue's official promotional literature reads—of which Hamaspik has been participating for a good decade or more.

What's more, the grounds are "well-known for ... our 'show chickens,' playful goats, and the friendly family atmosphere at our farm"—a fact that readily confirmed by one Pinchos Knopfler.

In fact, one of the highlights the visit was an extended session of informal interaction with the impressive, and impressively free-roaming Percheron, a breed of draft horse that originated in the Huisne river valley in western France. Usually gray or black in color, Percherons are well muscled, and known for their intelligence and willingness to work—not to mention being significantly larger, taller and stronger than the average horse. In this case, the Percheron horse on the



NATURAL CONNECTION: OUT AND ABOUT

Lawrence Farms Orchards premises was clearly and non-irritatedly willing to put up with repeated petting, stroking and contact by the inquisitive visitors, reacting calmly and with notable poise to their fascination.

Making that nice experience even nicer is the fact that Lawrence Farms, perhaps obviously, consists of plenty of flat grounds—a simple fact of critical importance when it comes

CONTINUED ON PAGE 13 >>

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● ► HAMASPIK NEWS

## Men's Day Hab Bounces to New Heights

### *Hamaspiik Orange Visits Urban Air Trampoline Park*

At Hamaspiik Orange's Men's Day Habilitation (Day Hab) program, things are always bouncing.

But at a day trip of late to the Urban Air Adventure Park in South Hackensack, New Jersey, things—make that, individuals with disabilities and their support staff—were literally bouncing.

Urban Air is an indoor trampoline park featuring several different

trampoline areas, a ball pit obstacle course, and several other attractions. And for 90 minutes during an exclusive facility rental, the gentlemen tossed balls around on the trampoline-enhanced dodgeball field, enjoyed several onsite video games—and bounced to their hearts' content on the center's "Free-Style Open Jump" arena.

They also enjoyed the ball pits

underlying the obstacle course. That course is a path made of rope nets, platforms, gym rings and other physical challenges that, if challengers fail and fall from, end up landing in the soft embrace of a ball-filled pit a good two or three feet deep. But, perhaps amusingly, many of the gentlemen didn't bother attempting to navigate the overhead obstacle course in the first place—instead opting to simply

jump straight into the ball pits as if they were relaxing hot tubs.

In fact, a bemused staffer recalls that one individual—a young man with low-function disability—loved the ball pit that he was “soaking” in so much that he didn't want to get out! “He was really enjoying it,” the staff member tells the *Gazette*.

The 90 minutes of physical activity, informal and unstructured as they were, had the overarching benefit of simply being physical activity—after which anyone would feel good, the Hamaspiik staff member rhetorically replies with a wry smile. “How do you feel after you exercise?” ★



I HAVE “SNOW” IDEA! A BLIZZARD OF FUN IN THE BALL PIT WAS ANYTHING BUT THE PITS



TRIPLE GAINS: DIRECT SUPPORT PROFESSIONAL (DSP) MOSHE H. BERKOWITZ WITH INDIVIDUALS

● ► HEALTH NEWS

## Nerve Implant Restores Major Movement, Control of Paralyzed Arm in Stroke Patient

### *Implant Removed after 29 Days; Despite Promise, Researchers Caution that Technology Remains in Earliest Stages*

**Pittsburgh, Pennsylvania** — If you can't repair it, just bypass it.

That's essentially the concept that a team of neurosurgical researchers went with in temporarily restoring significant movement and control of an arm paralyzed by a stroke.

A team of neurosurgeons at the University of Pittsburgh Medical Center (UMPC) and Carnegie Mellon University's Neuroscience Institute implanted a pair of thin metal electrodes in a patient.

That patient is a young woman who had suffered several strokes in her 20s due to a *cerebral cavernous malformation*, or cluster of thin-walled blood vessels in the brain.

Surgeons first implanted a pair of thin metal electrodes resembling strands of spaghetti along her neck.

Those wires then transmitted low levels of electricity to stimulate specific regions of her spinal cord.

With those specific spinal-cord regions getting that harmless electricity flow, the patient was able—for the first time in years—to fully open and close her fist, grab and move a can, lift her arm over her head, and use a fork and knife to cut a piece of steak.

The development was based on years of prior research involving computer modeling, as well as on testing in macaque monkeys with partial arm paralysis.

Being in early development, the implanted electrodes were removed after just under a month. But of equal significance, the patient was still able to move and use her arm and hand for some time after electrode removal—

indicating the procedure's lingering benefit.

Researchers are hoping that, several years down the line, the development

can turn into much larger clinical trials on stroke patients and ultimately into a mainstream treatment of paralysis caused by strokes. ★



ON THE MOVE: REVERSING CASE OF STROKE-CAUSED ARM PARALYSIS IS CAUSE FOR OPTIMISM



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## On the Right Track



**GETTING IN GEAR:** YESHIVAH SHAAREI BINAH STUDENTS ACQUIRE BASIC COMPUTING SKILLS (L), PREPARE TO TAKE A SLIDE (R); AND AWAIT YET ANOTHER EXCITING FRESH START

## Scaling New “Heights” at Hamaspiik of Kings County

*New Location Brings Services, Support, and Hope to Crown Heights Community*

Hamaspiik of Kings County recently opened its newest office at 930 Eastern Parkway in Crown Heights, a significant addition aimed at enhancing its services for clients and families within the community. Spearheaded by Mr. Joel Lefkovits, Hamaspiik of Kings County’s OPWDD HCBS director, this initiative marks the fourth region in the county to establish its own office, following the footsteps of Boro Park, Williamsburg, and Five Towns. While currently housing the Crown Heights OPWDD HCBS department, the office will eventually incorporate all departments in this location.

“You can only truly help someone when you understand life as he sees it,” says Mr. Hershel Wertheimer, Executive Director of Hamaspiik of Kings County. “By opening a location in their own community, we ‘put on the glasses’ of the local population and are able to serve them better, working together from within to help each family in the best way possible.”

Adaptability, the ability to match services to the needs of the local

community, is one of Hamaspiik of Kings County’s core values. To this end, the staff employed at the Crown Heights location are drawn from the Crown Heights community itself, enabling them to cater to families with an insider’s understanding of the community’s needs and culture. The proximity of the office also allows families to access the support more easily, and fosters a stronger sense of connection and collaboration between Hamaspiik and the local community.

Miss Sari Gottlieb, OPWDD HCBS regional manager for the Crown Heights location, says that parents of individuals with special needs are very excited with this new development. “They feel cared for by Hamaspiik, and appreciate how the agency is working to accommodate them in their own neighborhood,” she says.

By prioritizing local staffing and community engagement, Hamaspiik demonstrates its continued commitment to providing exceptional care and support while adapting to the unique requirements of each neighborhood it serves. ★

## Printing, Passing and Playing

*A Snapshot of Hamaspiik Rockland’s Shaarei Binah Yeshivah for Boys*

Yeshivah Shaarei Binah, Hamaspiik of Rockland County’s yeshivah day program for young men, has been a success since its inception. Under the leadership of Chezky Szabovits and Boruch Leifer, the young adults who call Shaarei Binah their daily home have flourished and grown.

Being that one of Yeshivah Shaarei Binah’s goals is to provide as mainstream an experience as possible, and being that mainstream yeshivahs send students home each weekend with Torah-study materials—not to mention tests successfully passed, Shaarei Binah does the same.

The booklet, prepared painstakingly over each week by Mr. Leifer, gives parents a comprehensive look at the entire week gone by.

The front cover features the questions of the most recent test that the students received. This allows proud fathers to query their sons on what they learned in the days just passed—and to

kvel as their proud boys joyfully answer each question correctly, reflecting tests passed.

At the same time, getting out and about is part and parcel of daily life at Shaarei Binah. Recently, the gentlemen enjoyed a trip to Holiday Mountain Ski & Fun Park in the Catskills village of Monticello, New York.

The trip from Rockland County upstate to Monticello served two purposes: One, collecting a go-karting prize for keeping the Yeshivah’s schedule and two, collecting a fellow student who lives in the area.

Given that it was the gentlemen’s first time there, and staff of Holiday Mountain may not have had a good sense of their go-kart driving ability, said staff was still remarkably nice to the individuals, Mr. Szabovits reports, in allowing them to get behind those vehicles’ wheels.

Metaphorically, Yeshivah Shaarei Binah does the same. ★



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# Farming out Recreation and Rejuvenation

## *Hamaspik of Rockland County Gets Down to Earth When it Comes to Back-to-Basics*

<< CONTINUED FROM PAGE 10

to accommodation and inclusion of people with physical disabilities who use wheelchairs for mainstream mobility. That fact continues to allow all of Hamaspik's beneficiaries unfettered access to the Orchards' rows of trees and bushes, with the individuals able to reach over or up to pick fruits and vegetables just about as easily as their peers, typical or otherwise.

For two fruitful (pun intended) hours, the gentlemen of the Day Hab took their time out in the orchards and gardens, gathering the fruits and vegetables that were in season at the time—going home with sacks full of fresh natural comestibles to share with their families and friends.

Maximizing the personal choice that is paramount and central to their daily lives as individuals supported by Hamaspik, the gentlemen also were given the fullest range of choices in terms of which area or sub-field of the great field that is Lawrence Farms to visit. Each was asked which in-season fruit or vegetable they wanted to pick and, accompanied by helpful Direct Support Professionals (DSPs), they shortly made their way there, where they retrieved their desired items to their hearts' content.

But Lawrence Farms Orchards, perhaps in keeping with the “farm” stereotype, also boasts a good few live animals. The gentlemen especially liked watching and interacting with the live chickens and roosters as they scurried, flapped and pecked about their well-stocked enclosures.

At Lawrence Farms, the gentlemen also got in some faith-based choices, too—as they recited the traditional “Blessing of the Trees” over freshly-flowering fruit trees, in this case, a Lawrence Farms apple tree. In fact, that was the most exciting part of the trip, reports Mr. Knopfler—who hopes that the “Blessing,” really a thankful acknowledgement of God for creating bountiful and fruitful trees that benefit Man, will spiritually last until the post-summer Rosh Hashanah season, at which point “Our blessing will bear the right fruits (pun intended).”

Furthering the themes of down-

to-earth excursions that connect one with natural reality was another visit by Day Hab to yet another farm—this one, the self-dubbed Yiddish Farm, where—surprise, the farmers and crew all also speak Yiddish.

Geared as it is to acquaint New York's sizable Yiddish-speaking community with nature, the Yiddish Farm—located in New Hampton, New York, made the individuals from Hamaspik. That despite the fact that the Day Hab's visit was their very first.

Given the folksy, down-home atmosphere of the venue, run by Mr. and Mrs. Yisroel Bass, the Day Hab contingent was treated “nicely,” Mr. Knopfler reports.

Here, however, in contrast to a certain property in Newburgh, the venue was far more farm and far less orchard.

As such, the “boys” found themselves engaging in farm field work for the duration of their visit—“hands-on,” proudly declares Mr. Knopfler, adding, “real old-fashioned farm life!”

That work, which consisted of planting, pruning or otherwise working the good earth and its products with one's very hands, was rewarded afterward with one of the highlights of the Yiddish Farm—a classic tractor ride.

The gentlemen first piled into a wagon strewn with surprisingly comfortable hay-bale seats and cushion, and for the next 15 minutes, enjoyed a personal tour of the Farm as Mr. Bass pulled the wagon about from the farm tractor affixed to the wagon's front.

Contrary to conventional wisdom, bigger, better, faster or wilder isn't necessarily better; less stimulation is in many cases more.

That truism is certainly true when it comes to getting out and about into the big wide world beyond your “four cubits” of personal and communal comfort and familiarity. Sometimes seeing the world requires little more than getting down to the literal foundation of the world, the good earth, as Hamaspik of Rockland County's Day Hab just again did. ★

## Out Standing in the Field



**GOT HIS GOAT:** A HAMASPIK VISITOR TAKES “HANDS ON” LITERALLY IN INTERACTING WITH A FRIENDLY FOUR-LEGGED BUT NON-YIDDISH-SPEAKING DENIZEN OF THE YIDDISH FARM



**GOING BACK, MOVING FORWARD:** A HAMASPIK GUEST OF LAWRENCE FARMS POSES AT AN EXHIBIT FROM TIMES LONG SINCE GONE (L); VISITORS PREPARE FOR A ROLLING TOUR (R)



**ACCESS:** A WHEELCHAIR-USING INDIVIDUAL ROLLS IN (L); GUESTS GREET A REAL OX (R)



**PET PROJECT:** INDIVIDUALS ACCOMPANIED BY STAFF HAVE THEIR HANDS FULL IN GETTING A GOOD FEEL FOR THE FARM AND ITS FRIENDLY DOMESTICATED KOSHER RESIDENTS



# Public Health and Policy News

## INFLUENTIAL U.S. SENATE COMMITTEE GRAPPLES WITH HEALTHCARE WORKER SHORTAGE

**Washington, D.C.** — A key issue facing the U.S. healthcare workforce—namely, the chronic shortage of nurses and other caregivers—was taken on by a key government body: the U.S. Senate's influential Health, Education, Labor, and Pensions (HELP) Committee.

Sen. Tim Kaine (D-Va.) noted that foreign-born workers comprise almost 18 percent of the U.S. healthcare industry, asking whether a more healthcare-focused immigration policy might help.

Other issues raised by Committee members and testifying witnesses included more funding for historically black college and universities (HBCUs), which decades ago produced more minority doctors; lowering healthcare workplace violence; easing nursing-school attendance; increasing industry competition; reducing caregiver burnout; improving workplace environments; and adding medication-assisted therapy (MAT) clinics.

## NATIONAL INSTITUTE FOR ALLERGY AND INFECTIOUS DISEASE (NIAID) GETS NEW DIRECTOR

**Washington, D.C.** — Boston's loss is America's gain, for the second time, as former Massachusetts General Hospital transplant surgeon and medical researcher Dr. Hugh Auchincloss, 73, has now become the Director of the National Institute for Allergy and Infectious Disease (NIAID).

Until recently, Dr. Auchincloss served as NIAID's deputy director, a post he kept for over 16 years.

Dr. Auchincloss is the latest doctor from Boston's biomedical community to serve the White House. He joins former CDC Director Dr. Rochelle Walensky and White House COVID-19 response coordinator Dr. Ashish Jha, both who worked in Boston medicine before their public-service jobs.

Dr. Auchincloss is also a 1976 Harvard Medical School graduate who spent 17 years running a laboratory at Massachusetts General Hospital focused on transplantation immunology before heading to NIAID in Bethesda, Md., in 2006.

## COST-OF-LIVING EXPENSES, INFLATION, AGAIN DELAYING MEDICAL CARE FOR SOME: SURVEY

**New York, New York** — Results of a recent survey by national pollster Gallup have been released—and the

results are somewhat unhealthy.

According to the poll, the inability to afford medical tests and treatment began emerging as a much more striking issue last year. Gallup reports that 38 percent of Americans, or nearly four of every ten, said they had put off care in 2022 because of cost.

That percentage was 12-point rise from 2021's 26 percent. The figure is the highest number Gallup found since it started asking people about delaying care over 20 years ago.

Rising out-of-pocket costs are pushing aside tests or procedures when troublesome symptoms emerge. And with the prices of prescription drugs, hospital stays and other treatments expected to increase significantly this year and next, medical care affordability may become even harder.

## STUDY FINDS INCREASING USAGE OF PRIMARY CARE VISITS FOR MENTAL HEALTH

**Washington, D.C.** — More people in the U.S. are seeing doctors when they really should be seeing psychiatrists—or at least any licensed mental-health professional.

According to a new study by leading public-health outlet *Health Affairs*, “the proportion of visits that addressed mental health concerns increased from 10.7 percent in 2006-07 to 15.9 percent by 2016 and 2018.”

“A high prevalence of mental health diagnoses in adults, alongside ongoing shortages of mental health specialists and expansion of the patient-centered medical home, have increased the involvement of primary care clinicians in treating mental health concerns,” the study read.

To arrive at its conclusions, the study scrutinized nationally-representative data from the National Ambulatory Medical Care Surveys over the years 2006 through 2018. The data covered close to 110,000 individual doctor visits.



**BUENO?** MEXICAN POLICY ON GENETICALLY-MODIFIED (GM) U.S. CORN STILL UNCERTAIN

## MEXICAN GOVERNMENT SENDS UNCLEAR MESSAGE ON GENETICALLY-MODIFIED CORN

**Mexico City, Mexico** — The question of whether or not genetically modified crops are healthy for the public to consume has been around for several years.

Food items subjected to genetic modification (GM) have likewise been around for several years. While GM is said to make crops like tomatoes hardier and more bug- and infection-resistant, questions remain.

The issue rose again after the government of Mexico first announced last year that it would ban GM corn imported from the U.S. after a certain date, officially due to public health concerns. At about \$3 billion annually, Mexico is America's largest buyer of GM corn.

But most recently, Mexico officially dropped the ban date.

Mexico's new policy still says the country will carry out “the gradual substitution” of GM feed and milled corn, but says potential health issues will be studied by its own experts.

## DR. ROCHELLE WALENSKY STEPS DOWN FROM CDC DIRECTORSHIP

**Atlanta, Georgia** — Dr. Rochelle Walensky, Director of the federal U.S. Centers for Disease Control and Prevention (CDC), departed the agency at the end of June.

Dr. Walensky led CDC through a restoration to greater normalcy across the country, after two years of COVID-19 related closures and waves of sensationalized public-health news reports.

Most importantly, Dr. Walensky helped partially rebuild morale to an agency that had earned significant public distrust due to the COVID-19 pandemic.

Also under her leadership, the CDC successfully addressed a multinational outbreak of monkeypox, contained the spread of Ebola in Uganda, and responded to countless infectious disease threats in countries around the globe. ★



**TESTING CARE COSTS:** A GALLUP SURVEY FINDS MORE AMERICANS FORGOING COSTLY CARE



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# In the Know

## ALL ABOUT... GLOMERULO- NEPHRITIS

Sources: National Cancer Institute (NCI), Johns Hopkins Medicine, National Kidney Foundation, Mayo Clinic, Merck Manuals, Encyclopedia Britannica

First, let's correctly pronounce it: glow-MEHR-you-low-neff-RIH-tiss.

The full medical term for the shorter “nephritis,” glomerulonephritis is defined by the National Cancer Institute's general medical-info page as follows: “A condition in which the tissues in the kidney become inflamed and have problems filtering waste from the blood.”

The National Kidney Foundation's explanation is that glomerulonephritis is “a group of diseases that injure the part of the kidney that filters blood (called glomeruli).” Other terms for the disease are *nephritis* and *nephrotic syndrome*, the Foundation notes. “When the kidney is injured, it cannot get rid of wastes and extra fluid in the body.”

Now, how and why those kidney tissues become inflamed or otherwise injured—and what can be done during or even before that happens—is another subject. Do read on.

### DEFINITION

Here's how Johns Hopkins Medicine defines it: “When the kidneys' filters (the *glomeruli*) become inflamed and scarred, it is called *glomerulonephritis*. The kidneys slowly lose their ability to remove wastes and excess fluid from the blood to make urine.”

Let's medically elaborate a bit here:

First, glomeruli is the plural of glomerulus—meaning, two or more “glomeruluses.” What's a glomerulus, you ask? Simple: it's a tiny blood vessel that connects to a nephron.

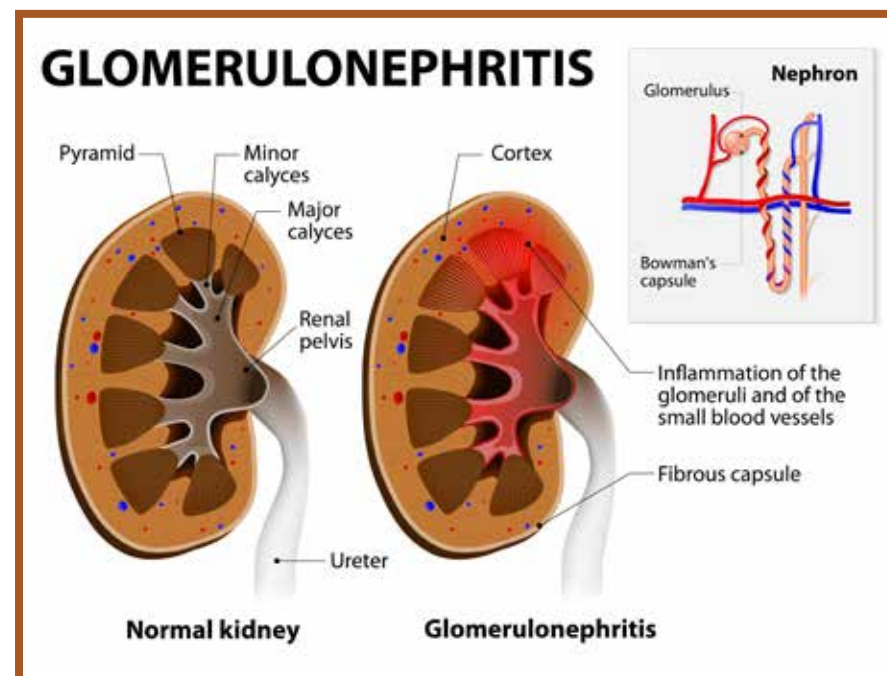
Now, the “-nephritis” part of glomerulonephritis comes from “-itis,” which means inflammation of whatever word you put before the “-itis”—plus nephron, the basic building block of the human kidney.

What's a nephron? Encyclopedia Britannica defines it as the “functional unit of the kidney, the structure that actually produces urine in the process of removing waste and excess substances from the blood.” Now, there are about 1,000,000 nephrons in each human kidney—with the nephrons having glomeruli attached to them.

So when these connected sets of glomeruli and nephrons get inflamed and scarred, you have a case of glomerulonephritis.

### CAUSES

So what causes those kidney building blocks to get inflamed? Infection, inflammatory conditions like lupus, certain genetic conditions, and other diseases or conditions, for starters. Certain medicines, or



exposure to certain chemicals, can also cause it.

According to the National Kidney Foundation, there are actually two kinds of glomerulonephritis: acute and chronic.

### Infectious diseases

Infectious diseases can directly or indirectly lead to glomerulonephritis. These infections include:

- Post-streptococcal glomerulonephritis. This may develop a week or two after recovery from a strep throat infection or, rarely, a skin infection caused by a streptococcal bacteria (impetigo). Inflammation occurs when antibodies to the bacteria build up in the glomeruli. Children are more likely to develop post-streptococcal glomerulonephritis than are adults, and they're also more likely to recover quickly.
- Bacterial endocarditis. Bacterial endocarditis is an infection of the inner lining of the heart's chambers and valves. According to the Mayo Clinic, it's not clear whether the inflammation in the kidneys is the result of immune system activity alone or other factors.

### Autoimmune diseases

Autoimmune diseases are illnesses caused by the immune system attacking healthy tissues. Autoimmune diseases that may cause glomerulonephritis include:

- Lupus. A chronic inflammatory disease, systemic lupus erythematosus can affect many parts of the body, including the skin, joints, kidneys, blood cells, heart and lungs.
- Goodpasture's syndrome. In this rare disorder, also known as anti-GBM disease, the immune system creates antibodies to tissues in the lungs and kidneys. It can cause progressive and permanent damage to the kidneys.
- IgA nephropathy. Immunoglobulin A (IgA) is an antibody that's a first line of defense against infectious agents. IgA nephropathy occurs when deposits of the antibody accumulate in the glomeruli. The inflammation and subsequent damage may go undetected for a long time. The most common symptom is blood in the urine.

### Vasculitis

Vasculitis is inflammation of blood vessels. Types of vasculitis that can cause glomerulonephritis include:

- Polyarteritis. This form of vasculitis affects medium and small blood vessels in many parts of the body, including the kidneys, skin, muscles, joints and digestive tract.
- Granulomatosis with polyangiitis. This form of vasculitis, formerly known as Wegener's granulomatosis, affects small and medium blood vessels in the lungs,

“

WHEN THE KIDNEY IS INJURED, IT CANNOT GET RID OF WASTES AND EXTRA FLUID IN THE BODY.

”



upper airways and kidneys.

### Sclerotic conditions

Some diseases or conditions cause scarring of the glomeruli that results in poor and declining kidney function. These include:

- High blood pressure. Long-term, poorly managed high blood pressure can cause scarring and inflammation of the glomeruli. Glomerulonephritis inhibits the kidney's role in regulating blood pressure.
- Diabetic kidney disease (diabetic nephropathy). High blood sugar levels contribute to scarring of the glomeruli and increase the rate of blood flow through the nephrons.
- Focal segmental glomerulosclerosis. In this condition, scarring is scattered among some of the glomeruli. This may be the result of another disease, or it may occur for no known reason.

### Other causes

Infrequently, chronic glomerulonephritis runs in families. One inherited form, Alport syndrome, also might impair hearing or vision.

Glomerulonephritis is also sometimes associated with certain cancers, such as gastric cancer, lung cancer and chronic lymphocytic leukemia.

Some forms of chronic glomerulonephritis are caused by changes in the immune system. However, in many cases, the cause is not known. Sometimes, patients will have one acute attack of the disease and then develop the chronic form years later.

## **SYMPTOMS**

The condition of glomerulonephritis affects the ability of nephrons to filter the bloodstream efficiently. The breakdown in filtering results in accumulation of wastes or toxins in the bloodstream, poor regulation of essential minerals and nutrients, loss of red blood cells, and/or loss of blood proteins.

Symptoms of glomerulonephritis may vary depending on whether one has the acute or chronic form and cause of glomerulonephritis. The patient may notice no symptoms of chronic disease. In such cases, the first indication that something is wrong might come from the results of a routine urine test (urinalysis).

The biggest problem with glomerulonephritis is that it can be there for some time before any symptoms appear—and by the time they do, kidneys can already have been badly damaged.

Initially, any symptoms of

glomerulonephritis may look like other medical conditions or problems.

### Symptoms of acute cases

Symptoms of acute glomerulonephritis appear suddenly. They may strike after an infection in the throat or on the skin. In some cases, the patient may get better without any treatment or intervention. In other cases, the kidneys may stop working unless the right treatment is started quickly. If you have one or all of these symptoms, be sure to see your doctor right away. These symptoms are:

- Puffiness of your face in the morning
- Blood or protein in the urine (hematuria, proteinuria)
- Urinating less than usual
- High blood pressure
- Shortness of breath and/or coughing due to extra fluid in the

and white blood cells, infection, or too much protein

- Blood tests, which measure levels of waste to determine how well kidneys are functioning
- Ultrasound tests, which use computerized sound waves to generate images of the kidneys and their blood vessels and tissues to check for normal size, shape and function
- Kidney biopsy, in which tissue samples are removed from the kidney and checked under microscope

## **TREATMENT**

Glomerulonephritis is treated based on the patient's individual age, overall health and medical history,

used for acute glomerulonephritis, but they are important in treating other forms of disease related to bacterial infection.

In cases where acute glomerulonephritis is rapidly getting worse, the patient may be put on high doses of medicine that affects the immune system. In some cases, the doctor may order plasmapheresis, a special blood filtering process to remove harmful proteins from the bloodstream.

### Medications

A doctor may prescribe corticosteroids, such as prednisone. If prednisone does not work, the doctor may suggest other medicines that affect the immune system, like cyclophosphamide.

### Kidney dialysis or transplant

Even with proper treatment, complications may develop. Kidney function may decrease to the point of end-stage renal disease (ESRD) or kidney failure. If this happens, the patient may need dialysis or a kidney transplant.

End-stage kidney disease is chronic kidney disease that can only be managed by regular kidney dialysis or a kidney transplant. Kidney failure is the loss of 85 percent or more of kidney function.

Acute kidney failure due to infection-related glomerulonephritis is treated with dialysis. Dialysis uses a device that works like an artificial, external kidney that filters the blood.

## **PREVENTION**

Glomerulonephritis currently cannot fully prevented until more is known about its causes, says the National Kidney Foundation.

However, good hygiene is helpful in preventing viral infections like hepatitis, which could lead to this illness.

Here are some additional steps that might be beneficial:

- Seek prompt treatment of a strep infection with a sore throat or impetigo
- Control high blood pressure, which lessens the likelihood of damage to kidneys from hypertension
- Control blood sugar to help prevent diabetic nephropathy

For patients with chronic glomerulonephritis, it is very important to control high blood pressure because doing so may slow down kidney damage.

The doctor may recommend eating less protein; towards that end, a *renal dietitian*, or a dietitian trained to work with kidney patients can be very helpful in planning such a diet. ★

“INITIALLY, ANY SYMPTOMS OF GLOMERULONEPHRITIS MAY LOOK LIKE OTHER MEDICAL CONDITIONS OR PROBLEMS.”



lungs

### Symptoms of chronic cases

Glomerulonephritis of the chronic variety may develop silently—without symptoms—over several years. It often leads to complete kidney failure. Early signs and symptoms may include:

- Blood in the urine (hematuria)
- High blood pressure
- Swelling of your ankles or face (edema)
- Frequent nighttime urination
- Very bubbly or foamy urine (proteinuria, or excessive protein)
- Lack of appetite
- Nausea and vomiting
- Tiredness
- Difficulty sleeping
- Dry and itchy skin
- Nighttime muscle cramps

## **DIAGNOSIS**

To diagnose glomerulonephritis, a doctor will first review your medical history and conduct a physical exam.

Other tests may include:

- Urinalysis, which test urine for red

level of illness and how well he or she can handle specific medicines, procedures, or therapies.

While kidney disease unfortunately cannot be cured, various treatments can slow its progression and prevent complications. These treatments may include:

- Blood pressure medicines such as ACE (angiotensin-converting enzymes) inhibitors that protect blood flow into the kidneys
- Corticosteroids may be used to decrease inflammation that leads to scar tissue
- Diuretics (water pills) may be used to remove excess fluid in the body through more urine production
- Diet changes including eating less protein, sodium, and potassium
- Dialysis to remove wastes and fluid from the blood after the kidneys have stopped working

Here are some more specifics:

The acute form may go away by itself. Sometimes you may need medication or even temporary treatment with an artificial kidney machine to remove extra fluid and control high blood pressure and kidney failure. Antibiotics are not



● ► HAMASPIK NEWS

# When they don't have words, **they** have toys



## Play therapy at Sipuk Mental Health Clinic brings children back to their happy place.

### When they don't have words, they have toys

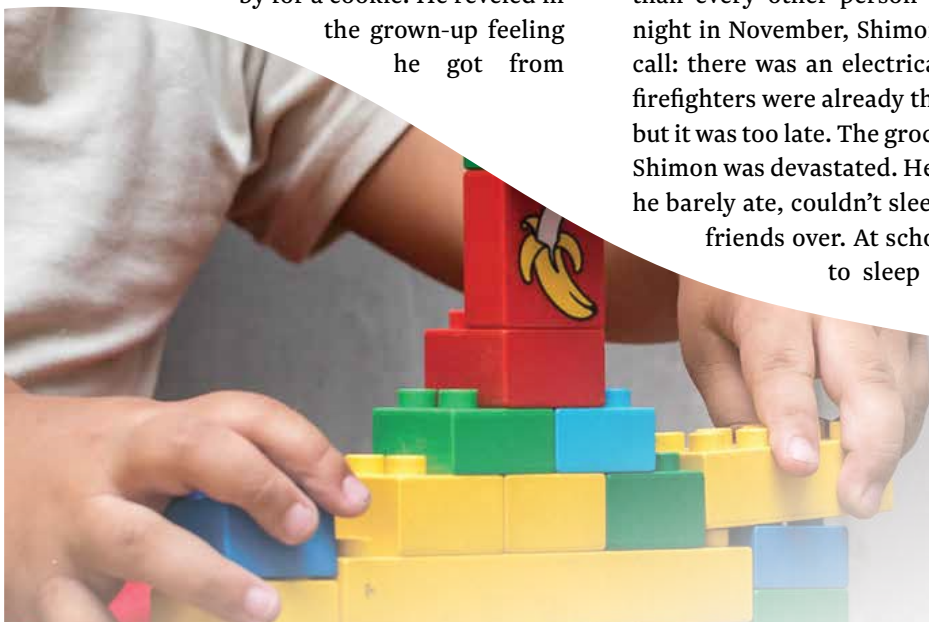
Shimon loved visiting his father's grocery store. Almost every day after cheder, Shimon would stop by for a cookie. He reveled in the grown-up feeling he got from

restocking the candies on the shelves and picking up fallen cereal boxes. And on some lucky days, if a Danish got smashed, he'd get to take it home to eat after supper. Even when his father was busy with a long line of customers, he'd always give Shimon a wink that told him he was more important than every other person in the store. Then, one night in November, Shimon's father got an urgent call: there was an electrical fire at the store. The firefighters were already there battling the flames, but it was too late. The grocery store burned down. Shimon was devastated. He completely shut down: he barely ate, couldn't sleep, and stopped inviting friends over. At school, Shimon would drift to sleep in middle of learning, sit listless and

alone at recess, and pick at his lunch. "Don't worry, we have insurance for the store," Shimon's parents told him. "No one was hurt, that's the main thing." But he couldn't be comforted. Shimon's rebbi urged his parents to take care of the issue right away, and they brought him to the Sipuk Mental Health Clinic for play therapy.

### Play therapy: Exploring a child inner world in his natural language

"When we enter the child's world through play," says Mr. Chaim Winter, Director of Supervision at Sipuk and a play therapist for over 30 years, "we can understand them on their own level. And the magic is in that connection." When adults go to therapy, the goal is to foster a direct connection between the adult and the therapist. Through this connection, the therapist guides the adult to identify their struggles and find a path to wellbeing. When a child goes to play therapy, connection is fostered



## ● ► HAMASPIK NEWS



through play, and that connection is then used to heal the child. Trauma, anxiety, grief, and family dissolution are common scenarios that rupture the secure attachment a child previously had with his parents. The child's subconscious mind wonders if his parents are still in tune with his needs. He acts out with unhealthy fears, negative actions, or withdrawal.

Such situations often spiral beyond a parent's control, and they realize they need the help of a qualified therapist. The therapist's role is to help the child feel safe enough to explore these

today," he calmly observed. After a few minutes, Shimon started looking around the room, taking in the wide variety of toys designed to ignite the imagination. At the next session, Shimon asked Mr. Winter if he could play with the Playmobil. "Of course," said Mr. Winter. "All the toys in this room are here for you." Shimon looked around all the shelves and drawers. "What's this?" "A sand tray." "Can I play with the mentchies?" "You can play with everything." Shimon saw that Mr. Winter was serious. There was nothing he could do that would throw his therapist off-kilter, not touching all the toys, nor even a full-blown tantrum. One day, after several sessions of exploring, he worked up the courage to take the blocks and started building a grocery store in the sand tray. He built the structure. Filled the shelves with food. Walked the mentchie-customers down the aisles, filling up

## Through play, the child can express thoughts and feelings that are difficult for him to communicate verbally.

frightening feelings. In play therapy, the therapist establishes a strong rapport with the child and the child learns to trust him. Through play, the child can express thoughts and feelings that are difficult for him to communicate verbally. Once the therapist — and the parents — gain access to the child's world, they can facilitate the child's healing. "The process looks simple," says Mr. Yosef Chaim Berman, LCSW, a therapist at Sipuk. "But we're trained to use simple words and actions to effect tremendous change. Using the insights we gain from the child's play, we can foster growth and change."

### How it worked for Shimon

When Shimon's parents brought him to Sipuk Mental Health Clinic, he was literally kicking and screaming. They had to carry him into the therapy room. His therapist, Mr. Winter, didn't flinch. "Wow, there's a lot of kicking and screaming

their wagons with groceries. He found the magic that his father's store had contained for him — and he recreated it, all by himself. A year later, Shimon is flourishing at school and at home, secure in the knowledge that he could rewrite his story and face his deepest fears.

### Somatic relational play therapy: Healing through your body

Traditional talk therapy has been around since the days of Freud. But recent research has taught us that it's our body that stores trauma and stress. We can bypass the complicated depths of our minds and heal through our bodies. Somatic modalities barely touch on the mind and work directly with the heart and body. A child — and even an adult — usually experiences trauma as a lack of control over what's happening to him.

## What is Sipuk Mental Health Clinic?

Sipuk, a division of Hamaspik of Kings County, is a licensed article 31 mental health clinic in Boro Park devoted to the behavioral and mental health needs of adults and children in the community. Sipuk's highly trained, culturally sensitive therapists are chosen to align with your personal needs and help you or your loved one along the path to health and happiness. We provide high-quality mental health care that's fully covered by insurance. Clients choose Sipuk because of our expert clinical team, experienced leadership, and because of our holistic, confidential, and compassionate approach. In somatic relational play therapy, the therapist provides a safe place for the child to explore a gigantic collection of toys. Children can't put words to their feelings — so they play them out. This is their way of expressing themselves. By creating scenes in the sand tray, building the events of their lives with blocks, or reenacting a scenario with dolls, they revisit their story and tell it the way they want it to happen. Sometimes expressing feelings during therapy is enough to heal them. Often, the therapist will show the parents how to continue the process at home with therapeutic skills and specific methods of talking to the child. This way, the parent is empowered to continue the healing process between sessions.



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## ● ► HAMASPIK NEWS


*It Happened through Hamaspiik*

# The Lifeline

The Nishmoiseini hotline is all about chizuk.

And perhaps the most valuable source of chizuk is the first-person accounts from parents who offer vulnerable, candid snapshots of their life.

It's not easy to get on a hotline and share your story with the world, but the parents who do, know that they're offering an invaluable resource to others. They're shining a light on what can feel like a very dark situation, when parents first learn of their child's diagnosis. They're creating a space for shared understanding and connection in a world that can feel lonely, disheartening, and overwhelming. And while they may feel like they're speaking to a nameless, faceless audience, sometimes, they get to hear about the ripple effects... and become inspired themselves.

Rabbi and Mrs. F.\* were among the first parents to share their story on the Nishmoiseini hotline. Each of them spoke on their respective lines — the husband in Yiddish, and the mother in English — describing their journey raising a child with special needs. They were open and genuine, being honest about the tough times as well as sharing tips, insight, and inspiration.

They each recorded their story, sent it out into the world... and then the ripples began spreading.

Mrs. F. has received roughly two calls a week since her story went live on Nishmoiseini. The calls are mostly from parents with children who have been given a similar diagnosis, asking for referrals based on her experiences.

She's not the only one approached; the Nishmoieini hotline is known for generating life-altering solutions via its parent-to-parent referral system. There was one woman whose baby wasn't gaining weight, and the doctors wanted to put in a feeding tube. She heard a story on Nishmoiseini about how a baby in a similar situation was successfully treated without resorting to a feeding tube, and suggested it to her own doctor; within a



short time, the baby was eating better and gaining weight!

In another case, involving Mrs. F. herself, a mother called her to share an incredible story: her nine-month-old baby wasn't focusing or making eye contact at all. Three separate specialists had thrown up their hands and said there was nothing to be done. But the woman heard Mrs. F.'s story on Nishmoiseini... and wondered if her child may have been misdiagnosed.

She took him to the ER and asked them to test him for infantile spasms and another condition, and indeed, those issues turned out to be the problems. With medication and treatment, and specialized early intervention catering to the correct diagnosis, the baby is now making incredible progress, looking around, playing with toys, and thriving in ways the parents had never dreamed of.

But even that paled in comparison to the story with the biggest impact of all.

A woman recently called up the F. family to thank

them.

"A few months ago, I had my fifth child," she said. "The child was born with severe disabilities, and I was under tremendous pressure from family members to give the baby up. There were so many questions: how would it work, how would we manage to take care of this baby with our other young children at home, could we handle these tremendous challenges..."

"And then," the woman continued, "my husband heard your husband's story on the Yiddish hotline. He told me to listen to yours — and I did. The chizuk that your story gave both of us was the one thing that gave us the strength to bring our child home."

"And," she concluded, voice thick with emotion, "we are so, so glad that we did."

Mrs. F. was astonished and moved to tears.

Nishmoiseini has been a lifeline to her. And now, through the hotline, she and her husband were zocheh to be that same lifeline for others.





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# Status Report

# Happening In Hospitals Today



**MISGUIDED MEDICAL MONOPOLY:** MERGING TWO MAJOR UPSTATE N.Y. REGIONAL HOSPITALS WOULD HAVE BEEN A BAD IDEA, SAYS THE FTC

## SYRACUSE PUBLIC, PRIVATE HOSPITALS SCRAP MERGER PLAN; FEDERAL GOV'T APPROVES

**Syracuse, New York** — After lengthy negotiations and plans, the impending merger between the State University of New York (SUNY) Upstate Medical University and the Crouse Health System—both based in upstate Syracuse—was canceled.

And that's cause for celebration—at least if you ask the Federal Trade Commission (FTC).

According to that federal agency, the proposed merger would have left the city of Syracuse with just two hospital systems—Upstate and St. Joseph's Health—and given the combined entity a 67 percent share of commercially insured inpatient services in Onondaga County.

"It is very good news for patients and healthcare workers in upstate New York that this proposed merger is not going to happen," said an FTC press release. "The deal presented substantial risk of serious competitive and consumer harm in the form of higher healthcare costs."

## SURGERY AT INDEPENDENT CENTERS COST LESS THAN AT HOSPITALS IN NETWORKS

**Chicago, Illinois** — If you need minor or even major surgery that can be done at a system-affiliated hospital or an independent hospital, you might pay less at the latter.

So says new research by the medical journal *JAMA Network Open*.

Researchers with that publication first analyzed 3,195 hospitals' negotiated prices. They found that prices for surgical procedures are significantly lower at independent hospitals than at healthcare facilities within networks. For example, the median price for a shoulder arthroscopy was \$2,643 at independent hospitals, compared to \$4,432 at hospitals within a network.

The findings come as hospitals have remained noncompliant with federal price transparency rules requiring providers to publicly post healthcare prices. Out of 2,000 U.S. hospital websites, reports industry outlet *Healthcare Dive*, only about 25 percent are in full compliance.

## HUGE MOVE ON HEALTHCARE ARTIFICIAL INTELLIGENCE (AI) BY GE HEALTHCARE

**Chicago, Illinois** — Healthcare industry giant GE Healthcare, the brand behind many of the CT scans and other hardware endemic to hospitals, is now making a bold move into the still-exploding field of healthcare artificial intelligence (AI).

Currently, the health-tech powerhouse—a subsidiary of General Electric (GE)—is developing a *machine learning platform*, or self-teaching software, that will ultimately help health systems diagnose patients and even assign them hospital beds.

To achieve that goal, GE Healthcare poached Jaha Kass-Hout, MD, a former machine-learning authority who

worked for Amazon, to become its chief technology officer (CTO).

The move puts GE HealthCare in competition against already-established players in the healthcare AI field—behemoths like Amazon, Alphabet and Microsoft which already have deals with health systems.

## NEW HOSPITAL INFECTION CONTROL RECOMMENDATIONS ISSUED BY INDUSTRY GROUPS

**Arlington, Virginia** — Recommendations for hospital staff, patients and visitors alike—but especially for staff—on how to control and prevent infection-causing bacteria have just been updated again.

Among other things, they include: short-trimmed fingernails; avoiding dry and cracked hand skin (which can then harbor even more infectious bacteria)



**IF ONLY THAT SIMPLE:** NEW GUIDELINES OUT

due to excessive soaping—and to use alcohol-based hand sanitizers instead; installing hand sanitizer dispensers inside and outside of each patient room; designating certain basins for hand-washing only; and replacing drain-cleaning bleach with EPA-approved biofilm remover.

The recommendations were compiled jointly by: the Society for Healthcare Epidemiology, the Infectious Diseases Society of America, the Association for Professionals in Infection Control and Epidemiology, the American Hospital Association, and the Joint Commission.

## WITH LESS FEDERAL RELIEF CASH, MORE RURAL HOSPITAL CLOSURES, SAYS STUDY

**New York, New York** — Without that increased temporary support from Uncle Sam over the pandemic, America's most rural hospitals are once again facing a slow epidemic of closures.

That's according to a report by New York-based non-profit the Chartis Group.

The group's study finds that nearly 51 percent of U.S. rural hospitals have a negative operating margin, and the number of such facilities that eliminated services like obstetrics increased in 2022.

What's more, says the report, as pandemic relief dollars erode, the trend of rural hospital closures is expected to ramp up again in 2023.

The Provider Relief Fund, and sequester relief and other programs, have helped prop up hospitals hit hard financially by the pandemic. Only two hospitals closed their doors in 2021 and seven in 2022, a drastic change compared with the record-setting 19 in 2020.

## HOSPITAL-OWNING COMPANIES CUTTING DOCTORS FROM ERS TO SAVE COSTS

**Washington, D.C.** — If you think the modern hospital has become more of a business and less of a calling, a recent report by National Public Radio (NPR) would lend your thoughts credence.

The report says that American Physician Partners (APP), a medical staffing company owned by private equity investors, has been cutting doctors from emergency rooms in hospitals that it owns simply to decrease costs and increase earnings.

One such hospital, according to the NPR report, is the Tennova Healthcare hospital in Clarksville, Tennessee, where one patient took three trips to the ER on three consecutive days before seeing a doctor for a specific problem.

The report notes that, for cost-cutting hospital owners like APP, doctors are increasingly being replaced by nurse practitioners (NPs) and physician assistants (PAs) who can perform many of the same duties for less than half of the pay.





# The Senior Care Gazette

News from  
the World of  
Hamaspik  
HomeCare and  
Senior Health

## New Test for Parkinson's, Other Conditions

### Breakthrough Accuracy Detects Diseases in Spinal Fluid

Parkinson's disease is a degenerative syndrome that results in the gradual loss of brain circuitry involved in movement, thinking and behavior. It is diagnosed in about 90,000 Americans every year.

While Parkinson's cause is largely unknown, "we do have evidence that genetics as well as environmental factors play a role," notes Adina Bodlander, R.N., Hamaspik HomeCare Field Nurse. (In fact, a recent major study of retired U.S. Marines associated chemical-contaminated drinking water with increased cases.)

Research shows that under ten percent of Parkinson's cases can be directly traced to genetic causes, she continues—noting that most common genetic defect associated with Parkinson's is a mutated LRRK2 gene, found frequently in families of North African or Jewish descent. "But

in most cases," she says, "no primary genetic cause can be found. Therefore it is not uncommon to see Parkinson's in all different communities."

The disease is typically diagnosed by a neurologist after assessment of symptoms and sometimes a brain scan. It unfortunately can't be diagnosed until the appearance of movement-related symptoms, like tremors, slowness of movement, rigidity or postural instability. There is currently no blood or laboratory testing that can confirm the disease.

At the same time, there is no cure; medication can only slow progression, and home-based supports like those provided by Hamaspik HomeCare can ameliorate the experience.

But a new test, described recently in *The Lancet Neurology*, may be poised to

change all that.

The test, developed by the San Diego, Calif.-based Ampriom biotech firm, is called SYNTap.

Scientifically known as an *alpha-synuclein seed amplification assay*, it uses a patient's spinal fluid to detect *synuclein pathology*—one of the two biological hallmarks of Parkinson's. With the new test, doctors may be able to predict Parkinson's in symptom-free patients years before onset.

The test is available for physicians to order for patients who are exhibiting symptoms of Parkinson's—as well as Lewy Body dementia or multiple system atrophy. But treatment options may need to catch up before doctors use it more in the clinical setting.

So, why is this discovery exciting? How would it make a practical difference?

"For the first time ever we now see a biological cause of the disease," Adina Bodlander explains. "We now know that when the alpha-synuclein proteins start to misfold and clump, it causes other nearby, normal alpha-synuclein [proteins] to also misfold and clump—damaging neurons and causing Parkinson's to develop. We are now able to biologically define the disease instead of diagnosing and treating it through subjective clinical assessments. This will hopefully lead to earlier diagnosis, targeted treatment, and faster, smarter and cheaper drug development." ★

Contact Hamaspik HomeCare's Central Intake at 855-426-2774, ext. 700 to see if you or your loved one qualifies for a home health aide (HHA) and improve overall quality of life for you or your loved ones.

#### ► HEALTH NEWS

## Study Finds that Eating Less Slows Down Body's Pace of Aging in Health Older Adults

**New York, New York** — Recent research by New York City's very own Columbia University shows that caloric restriction can slow the pace of aging in healthy adults.

The international randomized controlled trial was led by the Butler Columbia Aging Center at Columbia University's Mailman School of Public Health.

"Our study aimed to test if calorie restriction... slows biological aging in humans," said senior author Daniel Belsky, PhD, associate professor of epidemiology at Columbia, in a press release.

To arrive at its conclusion, the Columbia team used the curiously-dubbed Comprehensive Assessment of Long-Term Effects of Reducing Intake of Energy (CALERIE) study, which was in Phase 2 at the time.

Funded by the federal National Institute on Aging (NIA), a division of the National Institutes of Health (NIH), the trial randomized 220 healthy men

and women at three sites in the U.S. to a 25-percent calorie-restriction or normal diet for two years.

To arrive at their conclusions, the team first analyzed three *methylation marks* on DNA extracted from volunteers' white blood cells. These DNA methylation marks are chemical tags on the DNA sequence that regulate the expression of genes and which are known to change with aging.

The first two, known as PhenoAge and GrimAge, estimate biological age, or the chronological age at which a person's biology would appear "normal." These measures can be thought of as "odometers" that provide a static measure of how much aging a person has experienced.

The third measure studied by the researchers is called DunedinPACE, an acronym for Pace of Aging, Computed from the Epigenome. ("Dunedin" refers to the 20-year (1973-1993) genetic study of 1,000 residents of Dunedin, New Zealand that originated the PACE DNA

marker.) The DunedinPACE methylation marker estimates the pace of aging, or the rate of biological deterioration over time. DunedinPACE can be thought of as a "speedometer."

The study had 145 volunteers agree to follow a calorie-restricted (CR) diet, compared to a control group of 75

participants maintaining their regular uncontrolled diet. The CR group had their caloric intake reduced by 25 percent below each individual's baseline level over a two-year period in healthy adults.

The findings are important because they provide evidence from a randomized trial that slowing human aging may be possible, according to researchers. In other studies, slower DunedinPACE was associated with reduced risk for heart disease, stroke, disability, and dementia. ★

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