



PEP TALK



PULMONARY EDUCATION PROGRAM
LITTLE COMPANY OF MARY HOSPITAL

Special Edition, July 2021

July 15 Luncheon Speaker on Mindfulness

Danielle Cummings is the inpatient palliative care chaplain at Providence Little Company of Mary in Torrance. She is a Reverend with the Federation of Christian Ministers and loves supporting interfaith conversations and spiritual care. She has lived in central Los Angeles with her husband for 15 years and has three sons. Growing up, she lived in the Pacific Northwest and overseas in Kenya as a missionary kid. She studied at Azusa Pacific University and Fuller Seminary and loves learning from her Latinx community and the patients she works with. She enjoys writing, hiking, and hosting parties.

11:00-11:30 Social time
11:30-12:15 Presentation
12:15-12:30 Question and answer

Long Haul COVID & the Role of Exercise Rehabilitation Therapy Counts

By Yvonne Koga

Our June 17 virtual luncheon speaker was Dr. William Stringer, Professor of Medicine, David Geffen School of Medicine at UCLA. He provided information about clinical trials seeking

participants and the unequal toll that COVID has taken here in the U.S. on Black and Latino people and Indigenous Americans. These groups are three times as likely to be hospitalized and twice as likely to die from COVID 19 as are white and non-hispanic people in the U.S.

He spoke of the chronic symptoms experienced by Long Haul COVID (LHC) patients and how quality of life can be adversely affected even in a 20 year-old who recovers from a mild case of Covid. Here in California there is a 40% likelihood of death from Covid in the Central Valley among agricultural workers than the general population. Survivors may also have long haul problems from the disease.

In an international cohort study (3,762 people confirmed or suspected of Covid from 56 countries,) symptoms were tracked for 7 months following recovery. The most chronic post-covid symptoms reported were fatigue, post-exertional malaise, and brain fog. Other symptoms were neurological sensations, headaches, memory issues, insomnia, muscle/joint pain, palpitations, shortness of breath, dizziness, balance issues, speech/language issues, chest tightness, tachycardia and other sleeping symptoms. The average number of symptoms was 14. About 45% of the cohort reported needing a reduced work schedule and 22% reported not working at all due to health issues. The prolonged, mul-

ti-system involvement is an indication of significant disability common to LHC participants.

While most people with Covid reported being back to normal in 11 days or less, about 1 in 7 had symptoms lasting 4 weeks, 1 in 20 were ill for 8 weeks, and 1 in 50 suffered more than 12 weeks. A number of trials are being conducted to find effective treatments for some of the lingering symptoms.

At Harbor-UCLA, Dr. Stringer and his team are setting up a Post-Covid Clinic. It will be a Multidisciplinary Clinic with virtual (video and telephone) as well as on site visits and multi-threaded (one patient, multiple consultants) visits. Patients could access e-consults and specialists would work closely with primary care physicians. This would provide diagnosis and assessment services for Covid-19 survivors with lingering symptoms, care management and coordination for chronic symptoms. Patients can be enrolled into clinical trials. It will provide training and education to health professionals in the management of Covid-19 prolonged symptoms. Exercise rehabilitation therapy can be an important part of the program because of the well-known and documented benefits it provides to improving pulmonary function, muscle strength, and endurance. The use of the cycle, treadmill, weights, outside walking and other physical activity would

need to be adapted to the physical capacities of participants.

Dr. Stringer's presentation can be accessed on the PEP website: www.peppioneers.com. He has the ability to explain complex medical information in layman's language that provides us the ability to better understand the topic and for which we are grateful.



Five-a-Day Keeps the Doctor Away

by Robert DePass B.S.

If I listen carefully I can still hear my mother telling me to "eat your greens"! To some, fruits and vegetables are a poor second to a diet rich in gooey fats or sweet sugars. But is there anything in my mother's advice? **Does eating more fruits and vegetables actually benefit your health?**

One of the leading dietary contributors to disease and malnutrition across the world is sub-optimal fruit and vegetable intake. Low fruit and vegetable intake is associated with an increased rate of total mortality, cardiovascular disease, cancer, and respiratory diseases such as COPD. Combined with a sedentary lifestyle and a history of smoking, reduced fruit and vegetable intake can increase the risk of death and is associated with a lower quality-of-life. The World Health Organization and the National Health Service of England recommend eating around 5 servings of fruit and vegetables a day. [Healthy diet choices like these can also help to improve the func-](#)

[tioning of the immune system](#), among other benefits.

Recently, the [American Heart Association](#) reported [a study, published in the journal Circulation](#), that aimed to answer some of these questions. When accounting for other factors, the study showed that people who eat more servings of fruit and vegetables live longer. Men and women who had at least 5 servings of fruits and vegetables per day were less likely to have cancer, cardiovascular or respiratory disease. Leafy greens (e.g. salads), non-starchy vegetables (e.g. tomatoes, mushrooms), cruciferous vegetables (e.g. broccoli, cabbage, kale, cauliflower), citrus fruits and vitamin C-rich and β -carotene-rich fruits and vegetables (e.g. apples, oranges, carrots) had a greater beneficial effect on health than either fruit juices or starchy foods (e.g. potatoes, corn). This is an important take-home message. The current [Dietary Guidelines for Americans](#) tell us to treat all types of fruits and vegetables the same, but this new study shows us that is not the case. These data encourage us to focus on non-starchy vegetables and whole fruits (not juices) if we want to maximize the potential health benefits. And how many servings do we need? The greatest reduction in mortality risk by any cause was seen in those who had at least **5 servings** per day of these types of fruits and vegetables. There was no further reduction in mortality risk for a greater number of servings.

Overall, incorporating more fruits and vegetables into your diet, **especially non-starchy vegetables and whole fruits (not juices)**, is a positive choice to optimize health benefits, quality of life, and longevity.

Please join us in congratulating Board member Jocelyn Dannebaum for receiving her California real estate



Jocelyn has served on the Board of Directors for nearly 5 years and we wish her much success.



August Birthdays

| | |
|--------------------|----------------------|
| 2 John Bailey | 15 Margaret Smaldone |
| 3 Paul Sakanoi | 17 Sidra Wieder |
| 4 Alice Desving | 17 Norm Miller |
| 7 Mitch Chamari | 18 Bob Campbell |
| 8 Karen Thompson | 22 Dorothy Rodgers |
| 10 Adrienne Katz | 23 Dave Thomas |
| 10 Rita Donohue | 27 Tommy Cook |
| 15 Dorothy Slawson | 27 Sherman Werner |

Karen Thompson, Editor

PEP PIONEERS is a non-profit corporation comprised of graduates of the Pulmonary Rehabilitation Program at Providence Little Company of Mary Hospital. We are dependent on private donations and fundraisers to finance events and purchase equipment that benefit all of its members. Tax Deductible donations may be made to:
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