

October 2012

WILLIAMSBURG'S

# Next Door Neighbors®

VOL.6, ISSUE 10

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## A Healthy Start

Focus on Heart Health

Dr. Michael Casciello

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Before I turned 50, I never gave my health much thought. I figured I was young enough and active enough to avoid any major illnesses and I still saw health issues as something I might have to deal with "when I got older".

Lucky for me, I was never seriously ill in my 20's, 30's and 40's. However, some of the decisions I made during those years about what I ate, drank and smoked certainly could prove to be problematic for me in years to come.

This issue, *A Healthy Start*, focuses on heart health. It provides you with excellent interviews with area doctors who will educate you on many ways you can ensure that your most vital muscle - your heart - keeps beating to nourish your body with the oxygen it needs to thrive. A healthy start can begin at any age. We all have one body and the better we take care of it, the better our chances are of living a longer, problem-free life. Medical technology is advancing more and more and it is exciting to learn about the ways we can benefit from our local medical community. You will enjoy some of the information you will find in the pages ahead.

I hope you will read the heart-related stories and give consideration to your own health habits and how you might improve them. Sometimes it just means changing small habits to achieve positive outcomes that will go a long way to improve your chances for a longer, healthier life. NDN

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## THE INSIDE STORY ON THE **HEART**

By Rachel Sapin

The human heart is a hardworking machine, a very hardworking machine. It beats around 100,000 times, and pumps more than 2,000 gallons of blood through the body each day, all the while being no bigger than the size of a fist.<sup>1</sup>

This is what Dr. Michael Casciello, a cardiology specialist at Sentara Williamsburg Regional Medical Center, loves about the heart. “Much of the physiology of the human body is

not visibly moving,” he explains. “The kidneys and liver, they just kind of sit there. You don’t really see a lot of activity. The way the heart works as a pump has always made sense to me.”

Dr. Casciello, who grew up in Virginia Beach and then in Richmond, knew he had a knack for engineering, but he also knew he didn’t want to work with inanimate objects.

“The combination of the engineering side of how the body works, specifically how the heart

works, and applying that to help people with whom you can form a relationship, really drove me toward cardiology as opposed to engineering,” he explains.

Dr. Casciello attended medical school in Bethesda, Maryland while in the military. He went on to serve as a doctor in the Air Force, finishing his 17 years as the Chief of Cardiology at Wright-Patterson Medical Center. His time in the military took him on many adven-

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tures, including being part of a small team of air mobile rapid response doctors who are sent on special missions to help military and other Americans in crisis.

"The stress of that uncertainty is hard to raise kids in," he says remembering his military life. He moved back to Williamsburg with his family two years ago, relieved to finally find a place they could call home and feel part of a community.

For Dr. Casciello and his wife, Christy, who he met in high school, the opportunity to work in Williamsburg seemed ideal. "Williamsburg felt like home for us, because it felt like when we were kids growing up in the Richmond area 30 years ago," he says.

He was also enthusiastic about moving to Williamsburg because he saw the need for more advanced cardiac services in the community. He came to Williamsburg already having a strong working relationship with physicians at Sentara Heart Hospital, which was recently ranked one of the best heart health hospitals in the country, according to *U.S. News & World Report*.<sup>2</sup> He also helped advance initiatives such as Sentara becoming recognized as an accredited chest pain center, an effort that is nearly complete. He has several other programs which he is excited to get started in town.

Dr. Casciello's work includes invasive cardiology, which might sound a little scary at first, but it's actually a good thing for patients who could receive an incorrect diagnosis otherwise. Noninvasive tests such as echocardiograms and nuclear imaging, tests that take a picture of the heart where the lungs, ribs, and body tissue are in the way, can sometimes prove difficult to read because they are being taken from outside of the body.

Dr. Casciello points out that tests that rely on images outside of the body sometimes show problems that aren't really there, a situation doctors refer to as a "false positive". The tests can show abnormal results because they are designed to be extremely sensitive.

"The way I explain it to patients is the noninvasive tests are like throwing out a large net and you're trying to catch all the fish, but you might also catch a dolphin by accident," he explains. "We don't want to miss disease. Those tests are designed to be overly sensitive so that you're going to catch many people who are abnormal, but in the process, you may catch a normal person by accident."

An invasive test such as a diagnostic cardiac catheterization goes inside the body, and allows Dr. Casciello to get a definitive look at the heart and make sure he's caught a fish rather than a dolphin. "We put a catheter into the artery, usually in the wrist of a person, and use a guide wire to safely guide that catheter to different parts of the circulatory system," he explains. Using the wrist as an entry point for this type of procedure is more challenging for the cardiologist, but it provides a safer procedure and easier recovery for patients who are eligible for it.

Dr. Casciello has been doing procedures this way for nearly 10 years. When he first came to Williamsburg, he was one of the few doctors comfortable performing this type of catheterization. He continues to encourage other doctors in Williamsburg to perform this less intensive catheterization when they can.

Invasive tests not only help doctors weed out the false positives, but they identify the anatomy and physiology (architecture and engineer-



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ing) of what is wrong with a patient.

Another innovation that helps doctors get a clearer picture of the heart is what's called a transesophageal echocardiogram. This test, which involves literally inserting an ultrasound camera into the esophagus,. It sounds a lot like an episode of the children's show, *The Magic School Bus*, but it actually provides vivid pictures of the heart. Dr. Casciello adds, "What I tell patients is that because there's only this very thin wall of tissue between the probe and the heart, we get what looks like high definition pictures, like the kind from a HDTV. You can see super small things in super fine detail."

New 3-D technology in imaging is also making cardiac diagnoses more accurate, and surgery safer for patients. "One of the things that we've recently begun using is 3-dimensional echocardiography," Dr. Casciello says. Historically, echocardiograms have used the same technology as ultrasounds and have only been able to give doctors a 2-dimensional picture of the heart.

Dr. Casciello looks forward to the coming months that will bring with them a new cardiac CT scan to Sentara. The new machine will give him the ability to perform even more of the cardiac imaging he needs for a patient at Sentara in Williamsburg, and will allow patients who often drive to Norfolk or other cities to get more of their cardiac care closer to home.

All of these cardiac imaging techniques help create a picture of the problems and obstacles in and around the heart that may prove difficult for medicine therapy and surgery later on. "If we can give that kind of information to a surgeon before they make their first incision, then they can plan the surgery ahead of time with fewer surprises to make the surgery safer," he explains.

Of course, as much as Dr. Casciello appreciates technology that helps him take better care of patients and that can also save lives, he encourages preventive cardiology and believes a healthy lifestyle is the best pathway to a healthy heart. "I try to impress upon patients that a lot of what we end up treating, whether it's coronary disease, hypertension, strokes, heart failure, or heart rhythm problems such as atrial fibrillation, all are related to or made worse by obesity and smoking," he says.

After two years of living in Williamsburg, Dr. Casciello feels right at home. But there's one thing he hopes will come back with time: "My Virginia accent that I had through high school and college. The military got rid of that for me," he says with a laugh. "Once, when I was deployed, I worked with some Italian military guys, and they made fun of me because I couldn't pronounce my own [last] name. I pronounce my name like the girl's name 'Cassie' and the color 'yellow.'"

When asked what he told the men in reply, Dr. Casciello explains matter-of-factly, "It's the Virginia version." NDN

*Have a question for Dr. Casciello, or want to keep up with the latest information on heart health in Williamsburg? Follow him on Twitter at @Good4Hearts.*

1. <http://www.sentara.com/hospitalsfacilities/hospitals/williamsburg/Pages/williamsburgregionalmedical.aspx>
2. <http://health.usnews.com/best-hospitals/area/va/sentara-norfolk-general-hospital-6340620>

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# Diet, Diabetes & Heart Health

By Kathy Van Mullekom

As a child, Itrish Scott-Brown remembers having discussions with her grandmother about helping the sick. Those discussions, still vivid in her memories, led her to pursue a career as an internal medicine specialist.

“Because my grandmother was always my

role model and I held her in high esteem, her advice and encouragement always motivated me to pursue a career in medicine,” says Dr. Scott-Brown.

Dr. Scott-Brown, 37, graduated from Old Dominion University in 1995 with a Major

in Biology and a Minor in Biochemistry. She is a graduate of the Eastern Virginia Medical School Class of 1999, and completed a three-year residency in internal medicine at Lehigh Valley Hospital. She is also certified by the American Board of Internal Medicine.

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Dr. Scott-Brown practices with Riverside Family Practice and Extended Care in Williamsburg, where she also lives with her husband and two daughters, ages 9 and 13. As the mother of two girls, she tries to serve as a role model for good health. She exercises daily – walking and doing Zumba® dance or elliptical workouts.

“And, I’m an avid soccer mom,” she says.

She enjoys eating healthy foods such as couscous, brown rice, wild rice, pumpernickel bread, green peppers, spinach, onions, scallions and Romaine lettuce. She hopes her girls develop similar likings.

“My oldest is picky with vegetables but she loves salads, stir fry, couscous wheat pasta and wild rice,” she says.

“I chose the field of internal medicine because I enjoy interacting with adults,” Dr. Scott-Brown says. She converses daily with her patients about diet and exercise, particularly sugar consumption and its impact on heart health. Age plays a role in blood sugar because it tends to increase as you get older. Sugar consumption, however, is the new public enemy for young and old, she believes.

“Too much sugar, mostly simple sugar, is associated with obesity, hypertension and diabetes – all directly associated with more heart disease,” Dr. Scott-Brown says.

Diabetes is a chronic disease in which there are high levels of sugar in the blood. People with diabetes have high blood sugar because their body cannot move sugar into fat, liver and muscle cells to be stored for energy. Some of the symptoms of diabetes include blurry vision, fatigue, frequent urination, excess thirst, hunger and weight loss. Because Type 2 diabetes develops slowly, some people with high blood sugar have no symptoms.

According to the American Diabetes Association, people with diabetes have a higher than average risk of having a heart attack or stroke. In fact, these occur in people with diabetes more than twice as often as people without diabetes and they also tend to develop heart disease or have strokes at an earlier age than other people.

Even though Dr. Scott-Brown advocates against eating too much sugar, she acknowledges not all sugar is bad. Good sugars found in fruits and vegetables do not cause a rapid release of insulin and drop in sugar levels like bad sugars do. Fruits and vegetables also offer lots of beneficial fiber, vitamins and nutrients.

Carbohydrates are divided into two types, simple and complex. Simple carbohydrates (also called simple sugars) are made of basic sugar, so they tend to be high sources of glucose and are relatively low in fiber - soda, candy, syrups, sugar white rice, white, bread, white pasta, pastries and desserts. Packaged foods tend to be high in simple carbohydrates or sugar. They are absorbed quickly into the body.

Complex carbohydrates (also known as starches) take longer for the body to digest. The slower release of insulin gives your body fuel continuously and leads to less hyperglycemia. Also the slower release of insulin leads to decreased production of glucose through the liver and can aid in weight loss. Complex carbohydrates tend to be higher in fiber and include plants and grains such as wheat, millet, barley, rice, oats,

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rye and beans.

Dr. Scott-Brown recommends that you read labels when you grocery shop and check for a high fiber content. Look to see if the first ingredient is whole wheat flour or whole oat flour, which are beneficial complex carbohydrates.

For the best foods low in sugar, Dr. Scott-Brown suggests: Walnuts. She recommends no more than 2 ounces. They are a good substitute for candies. Vegetables tend to be rich in vitamins and fiber. Cottage cheese, about a quarter cup has less than 2 grams of sugar. Lima beans, legumes and lentils have healthy sugar and are rich in nutrients. Foods with high fiber or more than 5 grams of fiber per serving tend to be good. For example: oats and barley.

Foods she recommends avoiding include candy, cookies, syrup, soda, fruit juice, french fries, pastries and snack cakes because they are simple carbohydrates that cause a quick rise and drop in sugar. Sugar in fruit, however, is different than sugar from cookies or cake. Fructose, glucose and sucrose are all forms of sugar and are metabolized differently by the body. Fructose found in fruit does not cause a quick rise and drop in blood sugar. There is a slower release of insulin when we ingest fruit – because of higher fiber content.

“Even so, eat fruit in moderation,” Dr. Scott-Brown states.

To stay healthy – diabetic or not – Dr. Scott-Brown advises to follow a diet high in vegetables, lean protein and whole grain carbohydrates.

“Portion control is the key,” she says.

Dr. Scott-Brown suggests filling half of your plate with vegetables, one fourth with lean protein like fish or chicken and one fourth with whole grain rice or couscous. She also advises her patients, diabetic or not, to make exercise part of their lifestyle.

“Movement of any form is good,” she says. “Exercise can improve blood pressure and strengthen heart muscles, as well as other parts of the body.”

Genetics can play a major role in developing diabetes, she explains, but the amount of sugar we eat also plays a role and diabetes is on the rise, even in children.

“Most studies show that it is possible to prevent or delay diabetes even with a strong family history,” she says. “If you are diabetic and lose weight, you can reverse the effects of diabetes and can get off medications, particularly if you are overweight and eating a high sugar diet.”

When it comes to good nutrition, Dr. Scott-Brown tells her patients to stop drinking sugar, particularly sodas and fruit juices. Snack on fruits, and eat less fat, she advises. She also recommends exercising regularly: 30-60 minutes, five days a week. Lose excess body weight, too – as little as 5 percent can have a major impact on blood sugar.

If you smoke, stop. Avoid excess alcohol consumption because it can lead to unwanted high triglycerides. Finally, know your health risks. Get your blood sugar tested and track it over time.

“Changes in diet and exercise will lead to lower sugar and higher energy levels that will motivate you to move forward toward an even healthier lifestyle,” Dr. Scott-Brown summarizes. NDN

# Sleep Well *for* Cardiac Health

By Linda Landreth Phelps

Sleep. Like air and food, we all need it to survive. But contrary to sleep's usual beneficial properties, compromised slumber could be working mischief in the dark. It may be hastening many towards accidents, illness, or even an untimely death.

"Recent studies strongly suggest a causal relationship between sleep apnea and various forms of cardiovascular disease," says cardiologist Dr. Hugh McCormick, Jr. of Tidewater Physicians Multispecialty Group (TPMG).

The word "apnea" (literally translated from the Greek, "to breathe") simply refers to the suspension of breathing. This can be voluntary - "I'm going to hold my breath until I turn blue!" - or involuntary, such as choking on aspirated food.

Obstructive Sleep Apnea (OSA), which falls into the involuntary category, is the most common type of sleep disorder. Those who suffer from OSA fall blissfully asleep, only to have their airway muscles relax, clamp down and stop their



Lisa W. Cumming Photography

breathing, sometimes for a relatively long period of time. Partially rousing to gasp for breath can occur hundreds of times a night, preventing the deep sleep necessary to wake refreshed. It's a more common malady than one might suspect, and sufferers may be unaware that they spend their lives in a state of nightly oxygen starvation and daytime sleep deprivation.

Rattling the rafters with heavy snoring is usually a good indication of Obstructive Sleep Apnea. One woman whose husband snores says every night since their wedding is like trying to sleep in a rowboat with a large, gaffed fish that is desperately thrashing and gasping for oxygen. Over many years, she has trained herself to sleep lightly in order to give him the wifely elbow whenever his breathing stops for too long.

But sleep apnea isn't gender-specific. Grandma or little sis can be just as affected by it, and you don't have to snore the house down to be suffering from it. Those who have Central Sleep Apnea are quiet sleepers

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whose central nervous systems malfunction and fail to signal the body to breathe deeply or often enough. These people can go for years without a proper diagnosis, suffering from mental fuzziness, relentless fatigue or a multitude of puzzling physical ailments that are seemingly unrelated to sleep.

"If you've had a heart attack, hypertension or a condition called atrial fibrillation (a heart rhythm disturbance), these could very well be associated with sleep apnea," Dr. McCormick says. Frequent accidents, loss of concentration, even weight gain can also be signals that there is trouble in dreamland.

Additionally, there is speculation within the medical community that such diseases as Diabetes Mellitus and Alzheimer's Dementia could also be tied to sleep apnea. "When you're not breathing correctly, obviously you're not getting enough oxygen to the brain and other parts of your system," Dr. McCormick says. In addition to low levels of oxygen, individuals with sleep apnea are in a regular state of carbon dioxide overload, and that's a problem that affects the entire body.

Patients who come to sleep clinics for diagnosis are closely monitored during sleep testing for things such as restless body movement, pauses in breathing, how long those pauses last and how many there are in a given period.

As a cardiologist, Dr. McCormick works closely with his colleague, Dr. Francisco Vega, a sleep specialist with offices right next door.

"It's amazing how many undiagnosed cardiac arrhythmias are revealed by sleep studies because they monitor patients' hearts with an EKG," Dr. McCormick says.

In 2008, The American College of Cardiology published a paper linking sleep apnea with various forms of disease, but in a "which came first, the chicken or egg?" mystery, declined to state whether sleep apnea is the cause or the result of these diseases.

According to Dr. McCormick, the probability is that sleep apnea was an ongoing issue before the disease's physical symptoms showed up. He says that, despite recent advances in medical care including new, clot-busting drugs, early diagnosis of cardiac disease and surgical intervention, there are still over 300,000 new heart attacks each year in the United States.

"Some of these, I believe, are due to 'silent' heart attacks that occur during sleep and go unrecognized, sometimes for years," Dr. McCormick says. "We don't know yet whether treating sleep apnea will decrease this number." He feels that, pending further studies, it seems logical to go with aggressive treatment and watch for trends in results.

In his more than 45 years in the practice of medicine - from the halls of Nixon-era Congress while serving with the U.S. Navy Medical Corps to former President and CEO of the Cardiovascular Center of Hampton Roads and then beyond - Dr. McCormick has seen almost everything. In one of Obstructive Sleep Apnea's worst case scenarios, Dr. McCormick tells of a patient whose airway was so severely and irretrievably compromised that he needed a tracheotomy. But for most patients, there are many effective modes of treatment available for sleep apnea, ranging from simple mechanical devices to outpatient surgery.

In some instances, the oral cavity can be fitted with a brace that props the airway open, or a tissue "facelift" can be performed to take a tuck in droopy or flabby areas of the throat. By far the most common method of

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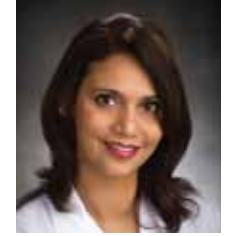
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treatment, a Continuous Positive Air Pressure (CPAP) machine is a simple, non-invasive way to improve quality of sleep.

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Both user-friendliness and portability are key elements of a CPAP system, since consistency is crucial to maintaining good health. If you need it, use it and don't leave home without it. Recent advances in design make CPAP machines more comfortable and much less cumbersome than the bulky older models. People who have tried and rejected earlier machines because they couldn't tolerate the mask should check out the latest models.

"I've had patients with controlled arrhythmias or hypertension who have stopped using their CPAP machines for one reason or another. They went back to their old ways and their

diseases came back, too," Dr. McCormick says.

Treatment is easier and physicians are becoming more universally aware of the presumptive link between sleep apnea and disease. Primary care physicians, neurologists, pulmonary specialists - all are now asking patients pointed questions designed to reveal underlying sleep disorders. As a cardiologist, Dr. McCormick closely quizzes his patients about their sleep habits. "I will often ask a patient's sleeping partner questions, too, to see if their answers match up," he says with a smile.

"My premise is that with continued education and recognition, there will be an increase in treatment for sleep apnea and a corresponding decrease in cardiac events - whether they be heart attacks, strokes, hypertension or blockages of the coronary tree - as well as improvement in central nervous system problems."

The heart accounts for a significant amount of our society's health issues. In a 2010 survey published by the Centers for Disease Control (CDC) coronary artery disease is listed as the chief cause of morbidity, mortality and job loss in the United States. Second and third on that list is cancer and lung disease, but right behind

that comes stroke and cardiovascular disease in general.

"I certainly don't want people to believe that if they get a CPAP machine most of their health problems will be solved, but it seems to me that if we can significantly reduce those diseases we'll have come a long way in practicing preventative medicine," Dr. McCormick says. "We've educated the public on the signs of a heart attack - chest pain, tightness, unusual shortness of breath- -and now we need to do an equally good job of identifying and treating sleep apnea and convincing people of the importance of uninterrupted sleep."

Dr. Hugh McCormick, Jr. stresses that if everyone you know kids you about snoring you should get it checked out since it could be a sign or symptom of a serious illness. So, if you fall asleep waiting for a red light to change, have blood pressure as high as the national debt and your dog is the only one who will sleep in the same room with you, chances are good that you should get some help. Your struggling body, your sleepless spouse and even your long-suffering dog will thank you. NDN

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# Oral Health AND THE HEART

By Alison Johnson

As a boy, Dr. Rick Rubin heard his grandfather speak of the rewards of his career in dentistry. He listened to stories about how much dentists could help people look and feel better, and he knew the job had allowed his grandfather to move from a childhood of extreme poverty to a comfortable life as an adult.

In the 1930s, Dr. Louis Rubin raised money for dental school by washing dental gowns for a penny apiece and scrubbing dishes at night. He always considered his career as a dentist a privilege. His grandson does, too – especially now

that a growing body of research suggests how crucial oral health is to overall physical health.

“It’s such a meaningful profession,” Dr. Rubin says, who practices at Williamsburg Family Dentistry. “I never take it for granted. It is a daily challenge that requires a combination of art, science, people skills and good manual dexterity and vision. I have the opportunity to educate every patient I treat about the importance of oral health.”

Increasingly, that education is touching on an apparent association between gum disease

and heart disease, the leading killer of both men and women in the United States.

While the topic is complex and more studies are needed to determine if there is a direct link, people with gum disease are nearly twice as likely to have heart disease, according to the American Heart Association; that’s separate from other risk factors such as smoking, obesity and diabetes.

According to the American Association of Public Health Dentistry, studies now show that treating gum disease can lessen the level of

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some factors in the blood that help cause heart disease.

One theory is that the bacteria and inflammatory proteins involved in gum disease enter the bloodstream and contribute to damage and thickening in blood vessels that lead to the heart. Gum problems also may raise the risk for other common conditions caused by chronic inflammation, including stroke, diabetes, respiratory illnesses and dementia, although, again, research is ongoing.

The simple take-home message: the mouth and the body are highly connected.

"We know that good periodontal care – healthy gums – improves oral health and reduces systemic inflammation, which may be good for your heart and reduce your risk of heart disease," Dr. Rubin explains. "The bottom line is both diseases are complex and gradually develop, so patients and their doctors should not discount the increased risk."

Anecdotally in his office, Dr. Rubin has found that patients with gum disease also tend to have some sort of heart issue or a risk factor for heart disease that requires medication, including high blood pressure or high cholesterol. Many patients also underestimate the importance of oral hygiene or don't understand that simply brushing their teeth isn't enough.

"People don't floss – that's the biggest finding," he says. "The number one answer from patients when asked if they floss is, 'Not as often as I should.' They also don't brush their tongue, which is like a carpet in the mouth in terms of accumulating bacteria and food."

Just 20 percent of plaque in the mouth is on teeth; the rest of the sticky, bacteria-collecting debris is on the gums, cheeks and tongue. Brushing a tooth, meanwhile, cleans just three of its five surfaces, leaving a full 40 percent still dirty. "Oral hygiene without flossing and rinsing is simply inadequate," he says. "My patients are always saying, 'Wow, I had no idea.'"

Flossing removes debris from the sides of teeth, while antiseptic mouthwashes kill bacteria throughout the mouth and form a thin layer on teeth to repel stains and plaque. Chewing sugarless gum with the ingredient Xylitol – Dr. Rubin recommends the Orbit brand – also can help fight cavities and stimulate the production of saliva, the body's natural mechanism for holding down acidity in the mouth. Teeth will soften or decay if acid levels get too high, which is one reason why carbonated drinks are so damaging.

Because cavities and gum disease often have no symptoms until they reach an advanced stage, the American Dental Association recommends that everyone visit a dentist for a checkup and cleaning every six months. People with gum disease or who smoke or have a predisposition for plaque build-up and staining may need to go more frequently.

"Gum disease is often a gradual, silent condition, so people may not know even if they have a fairly aggressive case," Dr. Rubin says. Some signs of trouble: red, swollen or tender gums, bleeding while brushing or flossing, persistent bad breath and teeth that begin to look longer due to receding gums.

Dr. Rubin, 42, didn't go straight into dentistry. Born in New Jersey and raised in south Florida, he served in the Army for three years – he was stationed in Germany – before earning a psychology degree from the University of Florida. He considered working for the Federal Bureau of Investigation after graduation, but the FBI had a hiring freeze so he enrolled in graduate school instead.

A year into his master's program in health policy and management at New York University, the FBI interviewed Dr. Rubin for a special agent position but told him they'd need him right away. He opted to finish his degree, which, he says, "led me in a totally different direction."

That direction was dentistry, which had helped shape his family histo-

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ry since his grandfather graduated from the Indiana School of Dentistry in 1938. Dr. Louis Rubin was the son of Russian immigrants who “were absolutely dirt poor,” his grandson says. As a dentist, though, his grandfather earned enough money to have a stable life, set his own hours and retire by age 60, while doing work he loved and building lifelong relationships with his patients.

Dr. Rubin wanted that kind of life. He enrolled at Nova Southeastern University in Fort Lauderdale, Florida, where he earned a Doctor of Dental Medicine (D.M.D.) degree. He opened his dental practice in Williamsburg nearly five years ago, a month after his grandfather died at age 96.

“I’m just happy he knew what I was going to spend my life doing,” Dr. Rubin says.

He now practices with colleague, Dr. Brett Dunnill, D.D.S., who also emphasizes the importance of the body-mouth connection. In his free time, Dr. Rubin enjoys exercising, being outdoors and spending time with his wife of 11 years, Jennifer – a licensed psychotherapist – and children Hannah, 8, Maya, 6, and Brody, 3. He also has written several study guides for dental and hygienist students who are preparing for national and regional certification exams.

In the future, Dr. Rubin expects doctors and dentists to work together more closely as research continues to uncover links between body and mouth. That’s already happening, in fact: some cardiologists, for example, now ask him to fill out forms on a patient’s gum health before heart surgery.

“I don’t think it’s surprising. After all, the head and neck are part of the body,” Dr. Rubin says. “I can’t look at someone’s gums and say, ‘You need to see a cardiologist.’ But I can tell them what we know at this point. I can help them understand just how important oral health is to overall health and well-being.” 

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# The Impact of a STROKE

By Kathy Van Mullekom



Lifestyle impacts your health, including the risk of stroke - a message neurologist Dr. Arvo Kanna passionately passes on to his patients. In fact, he hopes that is what they learn from him.

“People can often have a large impact on their health, and often improve their neurological function or sometimes prevent neuro-

logical diseases through certain habits in life,” he says.

“A good lifestyle and good medical care, before a stroke happens, are much better than secondary preventive measures after a stroke. Treatment of hypertension is the most important modifiable risk factor for stroke, but stop-

ping cigarette smoking is the most important risk factor that can be eliminated,” he says.

Dr. Kanna, 52, practices with Sentara Neurology Specialists in Williamsburg, focusing on general neurology and neuroimaging. He chose medicine for stable employment and because he had older friends who enjoyed the

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“Teaching was the career of both of my parents, but I ended up teaching patients on a daily basis on how to improve their health and enjoyed it,” Dr. Kanna says.

A resident of Williamsburg, Dr. Kanna graduated from medical school at Loma Linda University in Loma Linda, California. He completed an internal medicine residency at Michigan State University in Kalamazoo, Michigan, and neurology residency and neuroimaging fellowship at State University of New York in Buffalo, New York.

In his private life, Dr. Kanna follows the lifestyle advice he gives patients. He does aerobic exercise like walking, running or biking three days a week and uses a weight-training machine two days a week. On weekends, he often hikes or helps his wife in the garden. His diet consists of whole, plant-based foods; he avoids sodas and alcohol.

To relieve stress, he goes to the beach or a forest, spending quiet time in nature, usually with his family, which includes a son and daughter, both in college. Photography and music also help him relax.

“It is known that a sedentary lifestyle with inadequate exercise, excessive consumption of alcohol, illicit drug use, obstructive sleep apnea (often related to obesity) and excessive stress with poor sleep, can contribute to increased stroke risk,” he says.

When a stroke occurs, there are two main possibilities. Either a blood vessel has a blockage of blood flow, resulting in damage to the brain from lack of blood flow (lack of oxygen, lack of fuel for the brain), resulting in what is called an ischemic stroke. Or, a blood vessel leaks blood into or around the brain, resulting in a hemorrhagic stroke.

“Roughly, 85 percent of all strokes are ischemic, or from blocked blood flow,” he says. “The remaining 15 percent are due to hemorrhage, or a leaking blood vessel, which disproportionately accounts for more than 30 percent of all stroke deaths.”

Strokes happen. “More than 795,000 strokes occur in the United States annually – about 185,000 of those strokes are recurrent strokes,” Dr. Kanna says, citing statistics from the National Stroke Association at [www.stroke.org](http://www.stroke.org). “Strokes are more common in men than in women; however, women tend to live longer, so the number of strokes at the oldest ages is higher among women. But, stroke can occur at any age, even during childhood.”

There are genetic disorders that play a role in the potential for stroke – a predisposition to form blood clots, abnormal formation of an artery wall, or genetic disorders that cause high blood pressure, heart disease, diabetes or high cholesterol.

“However, for the most part, genetic disorders play a relatively minor role in predisposing people to have a stroke,” he says. “Even when genetics plays a major role, excellent lifestyle and good medical care can largely overcome or markedly delay the effects of genetics.”

Knowing whether you or someone else is having a stroke is not always easy to recognize. It’s best to call 911 and go immediately to a hospital’s emergency room. If the victim is having a severe headache, sudden loss of vision in one or both eyes, unexpected difficulty speaking or understanding, sudden weakness or numbness or tingling on one side of the body, sudden clumsiness and trouble walking, then the victim should not hesitate to seek medical attention.



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Diagnosis and treatment time are crucial. It's estimated that about two million brain cells die every minute during a stroke, according to Dr. Kanna. Most of the fatalities from acute stroke occur within the first 30 days after onset, and survival is largely dependent on the type of stroke.

Treatment time is critical, because the most advanced treatments for stroke, such as the "clot-busting" medicine t-PA (tissue plasminogen activator), or the radiology treatments that involve retrieving a clot and opening an artery mechanically, require the patient to get to the hospital quickly.

"If these treatments are not done within three hours or so for intravenous (IV) t-PA and within six hours for radiology interventions, they are no longer helpful and may do more harm than good," Dr. Kanna says.

Other early treatment factors are also important to a patient. For example, giving IV fluids, correcting blood sugar, maintaining appropriate blood pressure, and identifying cardiac problems, should be started by ambulance personnel and continued at the hospital.

At the hospital, laboratory testing and brain imaging need to be quickly performed.

Finally, the conditions that mimic stroke – low blood sugar, seizure, head trauma, multiple sclerosis or brain tumor – need to be excluded before these time-sensitive treatments, such as the "clot-busting" medicine, can be started.

"Our goal in stroke treatment is to begin administering the drug t-PA within one hour of the time the patient arrives at the emergency department," Dr. Kanna explains.

Recovery after a stroke depends on how many brain cells have been damaged. Sometimes brain cells stop functioning for a few hours to days, but then recover, in the area at the margins of the stroke area. Brain cells in the center of the stroke area, which immediately suffer complete loss of blood flow, sustain permanent damage. Recovery depends upon where the stroke occurs, and whether other brain cells can take over the functions of the cells that were lost.

Rehabilitation begins in the hospital and continues with therapy at a rehab facility, home therapy or outpatient center, helping

the patient with eating, dressing, walking and talking needs. Often the pace of recovery, and relative degree of ultimate recovery of function, are evident within the first month after a stroke.

Early neurological and primary care follow-up are important, so appropriate, close management of blood pressure in the first few weeks to months after a stroke, and continued management of blood sugar, cardiac problems such as atrial fibrillation (an irregular heart rhythm that predisposes to stroke and usually requires strong "blood thinners" to reduce stroke risk), and treatment of depression, dietary/swallowing issues, safety issues including risk of falls, all must be worked through. These measures can help reduce recurrence risk, encourage the patient during a difficult recovery period, and help the patient get back to partial or complete independence.

"The majority of stroke patients improve, due to continuing stroke education, the benefits of stroke research and improved stroke-related and medical care," Dr. Kanna says. "Remember, 'time is brain.'" NDN

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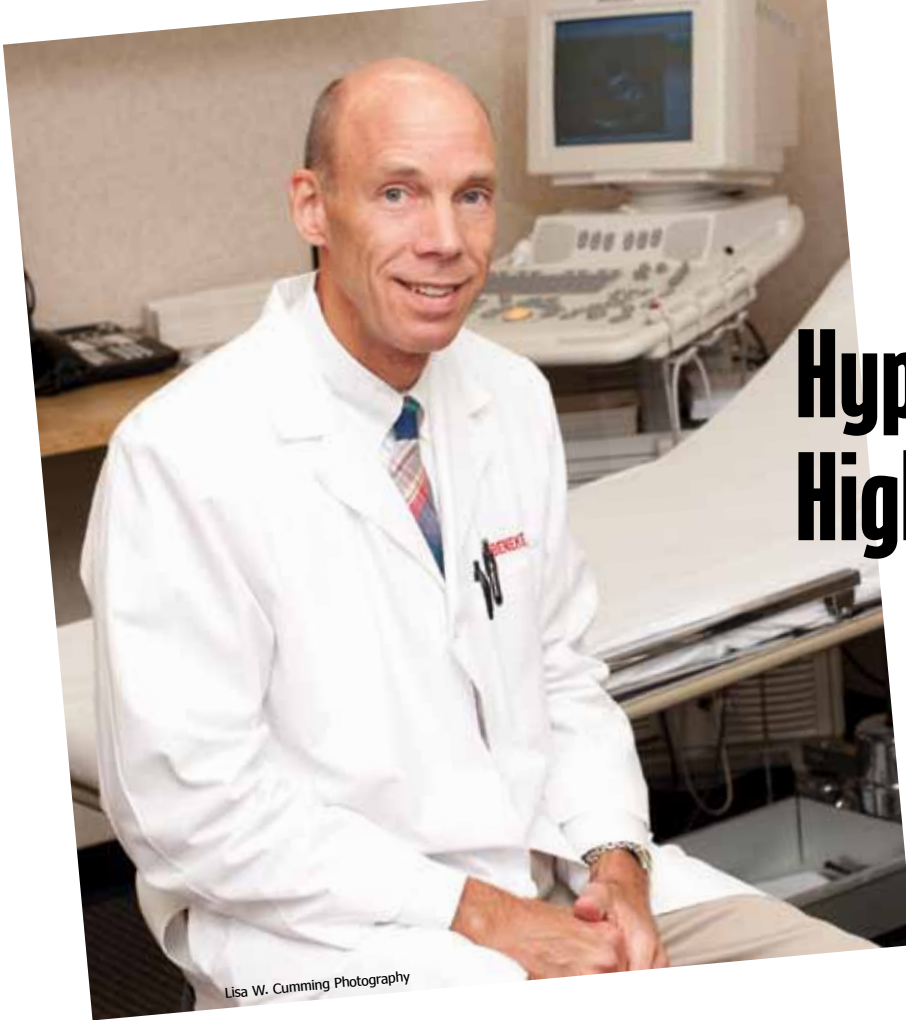
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# Hypertension or High Blood Pressure?

By Narielle Living

Dr. William J. Beneke is a reserved, intelligent physician who has spent his career focused on heart health. A 1986 graduate of the University at Buffalo State University of New York, he now spends his time working with cardiac patients in Williamsburg.

It's a long drive from Buffalo, New York to Williamsburg, Virginia, but when he and his wife were looking for a place to call home, it was an easy decision. Dr. Beneke's wife, a graduate of the College of William and Mary Law

School, was tired of the long, harsh Buffalo winters. "We liked this area, and we liked the climate," he says.

During his residency, Dr. Beneke spent a month working in cardiac care with the well-known researcher, Francis Klocke. "He is one of the top cardiac researchers and was just a great teacher," Dr. Beneke says. He was so profoundly influenced by that experience, William Beneke decided to build his own career in cardiovascular medicine.

In Dr. Beneke's practice at Advanced Cardiovascular Institute he often sees patients with high blood pressure, or hypertension, related to heart disease.

The National Heart, Lung and Blood Institute defines blood pressure as the force of blood pushing against the walls of the arteries as the heart pumps. If this force becomes too great, as happens with high blood pressure, damage occurs in the body.

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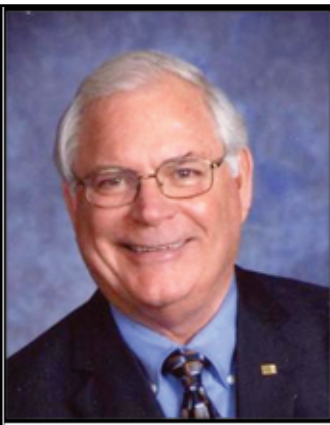
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high blood pressure and hypertension?

According to Dr. Beneke, "You can have one isolated reading with high blood pressure, such as 140/90, but that doesn't mean you have hypertension. Hypertension is the disease, which refers to consistently high blood pressure."

Blood pressure readings are classified into stages. A normal blood pressure reading is 120/80 or less. It is not uncommon, nor is it unhealthy, to have low blood pressures. "If it's too low, there may be a danger of fainting, but for the most part 100/60 or that sort of range is just fine." Dr. Beneke says that often people have lower blood pressure due to a vegetarian diet or genetics. A lower blood pressure is very healthy and not something that needs changing."

When people are in a stage of pre-hypertension, blood pressure readings range from 120 to 140 over 80 to 90. At this stage a doctor might attempt to identify why the blood pressure reading is high and suggest specific lifestyle or dietary changes to bring it down. People with certain diseases, such as diabetes or heart disease would receive more aggressive treatment at this stage.

Blood pressure readings for people with hypertension are consistently higher than 140/90. At this point it is critical to take steps to alleviate the problem. Left untreated, hypertension leads to thickening of the artery walls, causing the heart to have to pump harder. When this happens, the heart muscle also begins to thicken. This can lead to shortness of breath, stroke, dementia and heart failure. "When the heart muscle gets thickened and stiff it becomes one of the leading causes of heart failure," Dr. Beneke says.

The unfortunate fact of high blood pressure is that most of the time there are no symptoms. "Sometimes people will get headaches, but there's really no other way to tell if you have high blood pressure without taking an accurate reading." Hence, the idea that we can feel our blood pressure rise is a fallacy. Accurate readings must be done after a period of sitting, relaxed, for at least five to fifteen minutes. "It's okay to check your blood pressure at a pharmacy, but only if you've been sitting and waiting for a period of time," Dr. Beneke explains. Readings taken after any type of activity, including walking through the store, are inaccurate and will not give you a good idea of your true blood pressure.

Dr. Beneke notes that people in the United States have a high incidence of cardiovascular disease resulting from hypertension, mainly influenced by factors such as diet, lifestyle and age. The good news, however, is that many times this type of disease is reversible.

"If your arteries have started to calcify, some of that is irreversible," he says. "But, it's important to note that there has been at least one study showing us that a change in diet resulted in reduced blood pressure by a good five points." He goes on to add that other lifestyle changes, such as quitting smoking, greatly reduces the risk of a heart attack.

The one thing for people to remember is that if you have been making unhealthy lifestyle choices, it's important to at least try to reverse some of the damage you may have done to your body. Quitting smoking at any age is a positive thing and affects not just your health but the health of those around you.

The causes of high blood pressure leading to hypertension are varied and depend on the person. "It might be stress related, but most times this disease develops for other reasons. Sometimes it's a genetic predisposition, and many times it is lifestyle related." People who smoke, drink heavily and do not exercise are more at risk for developing hypertension than those who lead active, healthy lifestyles.

Treatment for high blood pressure varies depending on the person and the underlying cause of the hypertension. Sometimes a change in

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diet, such as adding more fruits and vegetables and eating only low sodium foods can help. Often this type of change leads to weight loss which can also lower blood pressure. "A twenty pound weight loss can have a significant effect on a person's blood pressure," Dr. Beneke says.

Sometimes medication is necessary and is the only thing that can save a person's life. In these cases, a doctor will still recommend changing lifestyle habits such as lowering sodium intake and regular exercise.

It is important for everyone to remember to monitor their blood pressure, but Dr. Beneke emphasizes that it is equally important not to create stress around the number. "Sometimes people get so caught up in monitoring their blood pressure readings at home, they'll check multiple times a day, every day," he says. "That's just not necessary, and it can cause stress when in truth there is no real problem."

While it is a good thing to monitor your blood pressure, it's important to remember a couple of things. First, it must be done after a short period of resting, around five to fifteen minutes, or the reading will not be accurate. Second, it's good to take the readings at different times during the day. A person's blood pressure surges in the early morning and slowly drops during the day, meaning there will always be multiple readings during a twenty-four hour period.

And lastly, try not to feel anxiety if you have a high blood pressure reading. "Once in a while it happens to all of us," Dr. Beneke says. "The important thing to recognize is when it happens on a regular basis then you can begin to treat it." Instead, focus on leading an active, healthy lifestyle with a moderate amount of alcohol and no smoking, as well as making good eating choices. No matter where you are in your health journey, it's never too late to step onto the road to wellness. NDN

# HEART MATTERS

By Natalie Miller Moore

Dr. Vasudev Ananthram is friendly and laughs a lot, despite his serious profession. His career in cardiology started on a very personal note – he was a resident in internal medicine in Texas when his father had a heart attack at age 52. He rushed back to India to see him, after a harrowing day and a half trip, and arrived to find him in the capable hands of a cardiologist.

“I was already leaning towards choosing cardiology. But the interaction with the cardiologist during my dad’s care helped. His knowledge impressed me, and he gave us hope but helped us understand the seriousness,” Dr. Ananthram says.

That was 21 years ago, and today Dr. Ananthram has a cardiology practice in Williamsburg. The reason he wanted to be a doctor goes back even further than that. While playing in the mounds of sand near his childhood home one day, he broke his arm. “It was scary. But the orthopedic surgeon reduced it, cast it and I was whole again. It made me think it was cool to be a doctor and fix things,” Dr. Ananthram says.

Part of his choice to specialize in cardiology is that it’s a fast-developing field. The understanding of the systems that regulate the heart, such as the brain, nervous system and hormones, continue to evolve. Medications and surgery methods continue to advance. In his practice, he sees all kinds of cardiac patients, including people with arrhythmia, which is abnormal heart rhythm.

Dr. Ananthram explains that arrhythmia can be the heart beating



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too fast, too slow or erratically. Some symptoms include chest pain, shortness of breath, fatigue, dizziness, fainting and even cardiac arrest. "It is potentially serious, so it's important to be vigilant and smart," he adds.

According to Dr. Ananthram, arrhythmias are more common than heart attacks. The most common kind of arrhythmia is atrial fibrillation, a condition where the upper chambers of the heart fibrillate, or contract very quickly and irregularly. When the chambers sit and quiver, the blood stagnates in those chambers and it can clot. If that clot breaks loose and goes to the brain, it can cause a stroke.

"The longer we live, the chance of atrial fib increases, as it can be caused by high blood pressure and valve problems," he explains. "It can be caused by congestive heart failure, hyperthyroid, an enlarged heart or overuse of alcohol or caffeine. There's also a family component, so people with close relatives who had heart problems at a young age should pay particular attention when they have any symptoms. Treatment for arrhythmias includes medication, implantation of a pacemaker or electrical cardioversion, which is using an electrical shock to restart the heart's rhythm."

Sometimes Dr. Ananthram sees patients who are dealing with unexplained chest pain or shortness of breath. In some cases, an arrhythmia can be found by listening to a patient's pulse, but there are more precise methods today, such as the 12-lead ECG (using 12 wires attached to different parts of the body) to determine the precise location of the problem.

The ability to continuously monitor patients has changed the way cardiologists determine diagnoses of arrhythmia, such as an ambulatory monitor called a loop reader. Patients wear the monitor for several days and then the cardiologist reads the results. "At the time you see the patient, they may not be having it right then. It's a very useful tool to have a monitor to pick up abnormalities and relay the signal," he states.

"If it helps patients feel better or live longer, that's my rule on adopting new techniques and technologies," he says.

One of the best changes Dr. Ananthram has seen in the past decade is the decrease in smoking. "It's not cool any more – there's now a yuck factor," he explains. But the next challenge on the horizon for our health is obesity. Dr. Ananthram suggests that his patients make small steps toward healthier adjustments, rather than radi-

cal changes. "Make choices you can live with. I'd say that decreasing portions or the number of times you eat something is a good place to start. And I like the idea of trying smaller plates," he says.

Where you eat might also be a small step, like only eating at the table. "Snacking in front of the TV means you may unconsciously consume more calories," Dr. Ananthram explains.

Exercise is another way to improve heart health. Dr. Ananthram recommends walking, which is the simplest and least expensive way to get exercise. But he also suggests changing it up so you don't get bored.

Personally, Dr. Ananthram enjoys walking, jogging and lifting weights. His two young daughters also keep him busy. They love the outdoors and encourage their dad to go puddle jumping with them after a rain. His wife, Angelina, manages his practice and that keeps the whole family busy. He says that he loves living in Williamsburg, because it's so beautiful and quaint. "It's got so much water around, and it's so colonial. It's a great place to live," he adds. That also means there is no reason not to get out and take a walk around this town – it's full of things to see, and good for your heart, too. NDN

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# Racing the Clock



By Ryan Jones



Lisa W. Cumming Photography

How fast do you read?

If you average two hundred words per minute, it's estimated that one person in the United States will experience a heart attack before you reach the fourth paragraph of this article. By the time you finish the last sentence, three Americans will have died from a heart-related event.<sup>1</sup>

While the verities of heart disease might not be quite as precise in real-time, the statistics are still pretty sobering. According to the Center for Disease Control (CDC), nearly 785,000 Americans will be subjected to their first coronary event this year. Cardiovascular intervention specialist Dr. Surjya Das says that being able to quickly identify the onset of a heart attack is not only critical to saving lives, it can greatly affect the extent of recovery.

"Our emergency rooms and emergency medical service (EMS) personnel are attuned to the fact that there is a huge variability in presentation of symptoms," he explains. "Patients with indications of a heart attack are given an EKG, which reads the electrical pulses of the heart. There

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are certain findings that are classic for a heart attack, but there are also things that can be misinterpreted. People who have what is called ST elevation (which suggests acute occlusion of one of the main blood vessels) usually undergo an emergency heart catheterization. The faster we can open the artery up, the less damage they'll have to the heart, and the less chance they will have of dying or developing complications in the long run."

Heart attacks, which are known in the medical community as Acute Myocardial Infarctions (AMI), occur when blood flow to the heart is obstructed. In most instances, this happens as a result of plaque build-up in the arteries. Over time, plaque may accumulate in blood vessels until an impediment is formed, or it may harden and break loose from the side of the artery wall and cause a blood clot. As blood flow is restricted to the heart, tissue begins to die from oxygen deprivation. This can trigger long-term health problems and, in severe cases, cardiac arrest. To correct the obstruction, intervention specialists insert a tube-shaped device called a catheter into a main artery during an emergency procedure called a cardiac angioplasty. Afterwards, small metal tubes called stents may be lodged in the affected area to ensure that blood flow continues to reach the heart. Since timing is critical, much of the medical research over the last three decades has focused on reducing the time it takes to diagnose and treat heart attack victims. An assortment of programs and studies have converged into a widely recognized standard known as door-to-balloon time (D2B), which is the elapsed time between a patient's arrival at a medical facility and the time a coronary angioplasty is performed.

"The whole (D2B) time is pretty interesting," Dr. Das says. "It's an arbitrary number, but it's based on different studies. There is a continuum of risks associated with heart attacks, and the earlier you can get the artery open and reestablish blood supply, the less likely a person is to have a problem. A 90-minute D2B time (the national standard) is really an outlier for us. I think our average for the year is around 50 minutes. Pre-activation by EMS has cut 10 or 15 minutes off of our D2B time because technicians are able to identify heart attack victims early and then let us know that they are en route. When they arrive, we are waiting and ready to go. That makes a big difference."

Since the key to surviving a heart attack is early detection and treatment, being able to correctly identify symptoms should be paramount in preparedness.

"The classic heart attack symptom is a feeling like an elephant is sitting on your chest," Dr. Das explains. "But there are other warning signs. Some people experience pain that radiates up to the jaw and down the arm, or they may have an unusual shortness of breath. The biggest symptom people don't recognize is a feeling similar to indigestion. There was a classic instance where a woman was watching a Wimbledon final and was suffering terrible indigestion. She was also sweating and noticed a pain radiating to her jaw. She mentioned it to her neighbor, who told her 'I had the same thing and it turned out to be an ulcer.' So she took some Tums and watched the rest of the tennis match. The next day, she went to see her primary care doctor, but by then she had completed the heart attack. There was really nothing we could do at that point because the damage was done."

With indicators that can easily be confused with other ailments, one wonders if there is any definitive way to sort out the symptoms of a heart attack.

"That's a good question because it can be pretty variable," Dr. Das says. "Try to look for associated symptoms. If you're having chest pains and then you break out in a sweat or feel short of breath, you should seek

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help. The same applies if you have any of those things with pain radiating to the jaw. Indigestion is the one that is very difficult because you obviously don't want to call 911 for a stomachache. You should be concerned if you have no good reason for the indigestion. There's usually some sort of associated symptom like having trouble breathing or breaking out into a cold sweat."

If conditions permit a choice, Dr. Das recommends calling EMS for transport during a heart attack situation. In addition to being equipped with emergency resuscitation equipment, EMS personnel are able to speed things up in a big way before arrival at the hospital.

"When people call 911 and EMS arrives, heart attacks can be identified very quickly," he explains. "Taking an aspirin right away can also help. That's one of the first things EMS will do is give aspirin. Whenever we do angioplasty, no matter what the setting, one of the core treatments is aspirin."

Heart attacks can strike in all walks of life, so Dr. Das suggests a practical approach to prevention rather than extreme diets or other difficult-to-manage lifestyles.

"If you have a family history of heart problems, it really sets the background for developing a heart disease," he says. "Untreated high blood pressure, smoking, high cholesterol, diabetes, obesity - these are all things that lead to a higher risk of heart disease. There are a lot of diets out now that can potentially prevent or reverse heart disease. For the most part they are vegan diets that are completely plant-based. There is one out now by Dr. Caldwell B. Esselstyn that has been getting a lot of publicity because he shows pictures of people who had an established heart disease, followed his diet, and (according to him) the plaque actually dissipated. That said, a vegan diet like that is very difficult for most people. I think people should focus on not smoking, watching their diet by trying not to eat a lot of fried foods, and exercising regularly. People who exercise regularly have more efficient hearts, so if they do have a heart attack they tend to be protected a little bit more."

Dr. Das's heart-savvy advice comes from a solid foundation of study and experience. He graduated from the Albany Medical College in 1994 and has worked as a board certified Cardiovascular Disease and Interventional Cardiology specialist in hospitals from San Francisco, California to Bethesda, Maryland. He went on to finish his cardiology fellowship at the National Naval Medical Center in Bethesda, Maryland and followed that up with an Interventional Cardiology Fellowship at William Beaumont Hospital in Royal Oak, Michigan. He also served for thirteen years in the U.S. Navy, where he was stationed in both Japan and Kuwait.<sup>2</sup>

"When I was doing my cardiology training in Bethesda, I realized that working with heart attack victims was the most rewarding and exciting thing I could do," he remembers. "You get such a great feeling when someone's having a problem and you can be there and help. It has that sort of immediate feedback."

Dr. Das has performed over three hundred coronary interventions since 2008, including more than a hundred emergency procedures in patients with life-threatening heart attacks.<sup>3</sup> That's an impressive footprint in the world of cardiac intervention. While it may not completely eclipse the number of people who died from heart disease in the last three minutes, it certainly makes a big difference to the survivors who are living here in Williamsburg. NDN

1 [http://www.cdc.gov/dhdsdp/data\\_statistics/fact\\_sheets/fs\\_heart\\_disease.htm](http://www.cdc.gov/dhdsdp/data_statistics/fact_sheets/fs_heart_disease.htm)  
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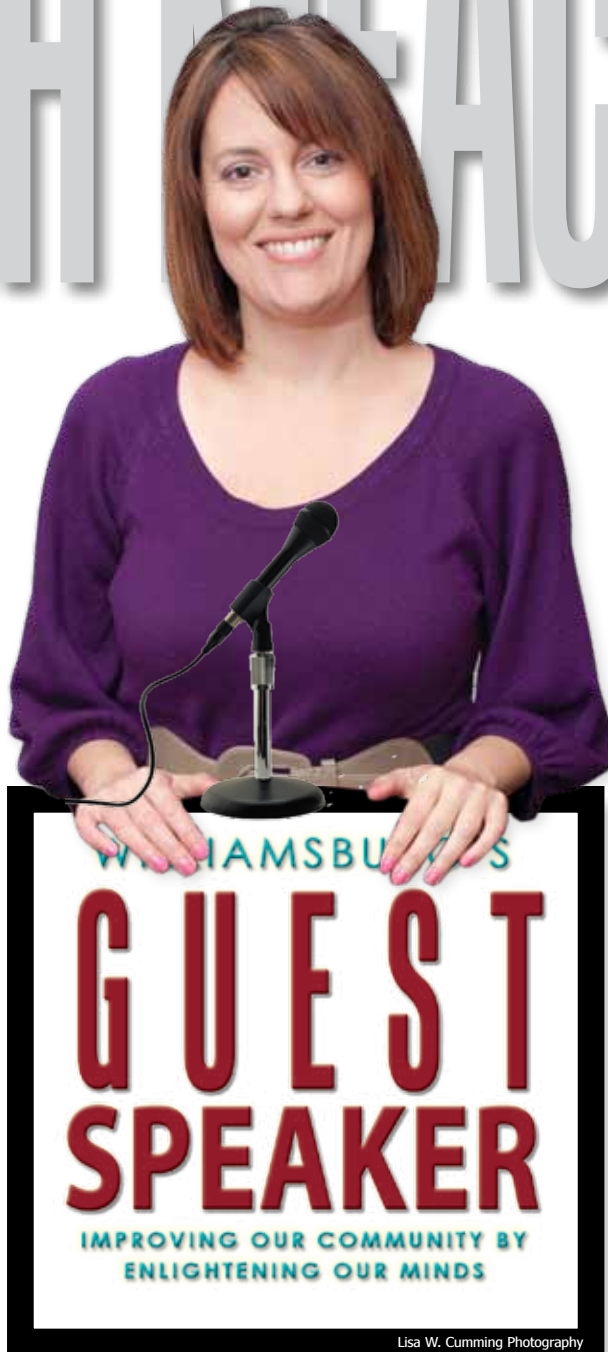
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# SARAH MEACHAM

## ON AVALON: A CENTER FOR WOMEN & CHILDREN



Lisa W. Cumming Photography

For Sarah Meacham, Executive Director of Avalon: A Center for Women and Children, advocating for people experiencing sexual and domestic violence, poverty and homelessness has been a life-long calling. While she began her career 15 years ago serving families in crisis, her love of creating solutions and building collaborations has fueled her passion for making a difference in the community.

"It is such an amazing experience

to watch a family come together to heal from domestic and sexual violence. Watching a woman transcend fear and not thinking she has the strength or ability to make it on her own to seeing her realize her own resiliency, talents and beauty, that inspires me to do everything I can to ensure when a survivor takes that first crucial step to break isolation and get help, Avalon is here to wrap services

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and support around her," Sarah says.

### When did you first become involved in Avalon?

I joined the Avalon team in December 2008 in a fundraising capacity but was promoted to Executive Director in June 2009. During that time, the agency has successfully reinvigorated its programs and services, expanded volunteer opportunities, and increased the number of local women and children served each year by more than 30%.

### What is the mission of Avalon?

Avalon provides shelter and support to those experiencing domestic violence and sexual assault in the Greater Williamsburg area. By offering tools for safety, self-sufficiency and empowerment, Avalon works to break the cycle of abuse and helps create a positive future.

### What programs are provided?

24-Hour Help Line offers callers experiencing domestic violence, sexual assault, stalking and homelessness

crisis intervention, counseling, safety planning and emergency referrals.

Emergency Shelter provides a 20-bed shelter available 24-hours/day. Women and children may stay in the shelter for up to 60 days of safe, secure respite at no cost while receiving counseling, life-skills training and legal advocacy. Residents are also provided basic necessities such as food, clothing and transportation.

Self Sufficiency Services extends beyond the provision of emergency shelter where Avalon offers survivors of violence case management, counseling and support groups, school and court advocacy, accompaniment to legal and benefits appointments, financial literacy education, housing assistance, employment assistance, health education, and information and referrals.

Access to Housing assists shelter residents with identifying, applying for, and securing safe, secure and affordable permanent housing. For those clients who need intensive supportive services beyond their 60-day shelter stay, Avalon maintains six two-

bedroom transitional housing units. Transitional housing typically lasts for several months to two years, while residents obtain critical services and support needed to move toward more permanent housing situations. Supportive housing is low-cost, long-term housing with on-site supportive services for families that have been in crisis.

Community Outreach Services are accessible to the entire community without compromising the confidentiality of the shelter and transitional housing location. The programs operating out of this office offer continued support to former residents of on-site programs and provide counseling and/or advocacy to clients who do not require or desire Residential Services. Furthermore, these services are available to male victims, a population who typically are overlooked, yet still need support and education to deal with violent situations.

Legal Advocacy for women and girls seeking legal remedies from their experience of violence. This includes assistance obtaining a restraining or-

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der against one's batterer or stalker, help in obtaining child custody or a divorce, or sometimes just access to an attorney's advice regarding options.

Youth Leadership Council facilitated by Avalon staff members and college interns for local high school students who want to make a positive impact on healthy relationships for their peers. They meet to discuss a national curriculum and to work together on various service projects.

Education and Awareness offers informative seminars to community, volunteer, civic, faith-based and youth groups. Topics include Domestic and Sexual Violence Dynamics, Avalon's Services, Healthy Relationships, Teen Dating Violence, Cultural Competency and Community Response.

### What are some of the biggest misconceptions about abusive relationships?

"If it's so bad, why doesn't she just leave?"

For most of us, the decision to end a relationship is not an easy one. Put yourself in that position, of deciding to

leave your relationship – even abuse aside – just up and leave your relationship and strike out on your own. How do you feel about it? Now fear for your life and the lives of your children and all you love on top of that – how do you feel about leaving under those circumstances?

*Domestic violence only happens in poor families.*

Domestic violence occurs throughout all levels of society. There is no evidence that suggests that any income level, occupation, social class or culture is immune from domestic violence. Wealthy, educated, professionals are just as prone to violence as anyone.

*"I would never let someone hit me, I'd leave!"*

Easier said than done. By the time the abuse has escalated to physical violence, the abuser has used a number of other tactics to instill fear, lack of confidence and hopelessness in their abused partner.

**How has your work affected your per-**

### sonal life and outlook?

My experience at Avalon has changed the way I see the world and the responsibility I have to treat others with respect through my words, my kindness and my decisions. I have learned that there are no simple solutions when you are dealing with issues surrounding abuse and poverty. Every situation, every family is different and are equally deserving of the respect, time and support they need to make the best choices for their lives.

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# Generations by Natalie Miller-Moore



## CASH AREHART

Age 31

David "Cash" Arehart finds himself with a very lofty title for someone just hitting his 30s: The Worshipful Master of the Williamsburg Masonic Lodge. At 31, he is the youngest Master of the Masonic Lodge in 260 years. But Cash says that currently half of the Masons are younger than he is.

"There was a surge in membership in the 1950s and 60s, when people were joiners. But since then, lots of organizations saw declines. But I think there's a societal shift where young people

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want to be part of something bigger," Cash says.

He says that other lodges are hurting for members but not the one in Williamsburg, which has 260 members, and has added 100 of those in the last decade.

Cash attributes his own membership in the lodge to "always being a joiner." He was active in the Boy Scouts of America, and as a young adult in Williamsburg, sought ways to be thoughtful and active in the community. Cash grew up in the Shenandoah Valley, and started working at Colonial Williamsburg (CW) while he was in

college at Christopher Newport University (CNU).

After graduating from CNU, he got a part time job at a store in CW's Historic area and "never made it out." Although he aspired to be a history teacher, he was pleased to be

working for the largest living history museum in the country.

In 2005, while performing as an actor in Colonial Williamsburg's Revolutionary City

for young people to do?" he says.

Besides the opportunity to meet people, Cash points out that some of the historic people featured in Revolutionary City were

Masons, like Edmund Randolph and the Reverend James Madison. He thought joining the Masons would put him in good company with important and respected men like Peyton Randolph and James Monroe. He points out, however, that the Masons welcomed not just the gentry, but workers, as well, like tavern keepers, cabinet makers, tailors and foundry men. So his interest in history and his desire to be involved led him to join

the Masons.

"Williamsburg has been around for hundreds of years. Any place like that would be worth careful observation of history, especially when dealing with long-term thinking. It gives you a kind of 1,000 yard

**“**  
**I wanted fellowship and camaraderie, and in Williamsburg, I felt like, ‘what is there for young people to do?’”**  
**~ Cash Arehart**


program, he worked with Ron Carnegie, who played George Washington, and was also a member of the Williamsburg Masonic Lodge.

"I wanted fellowship and camaraderie, and in Williamsburg, I felt like, 'what is there

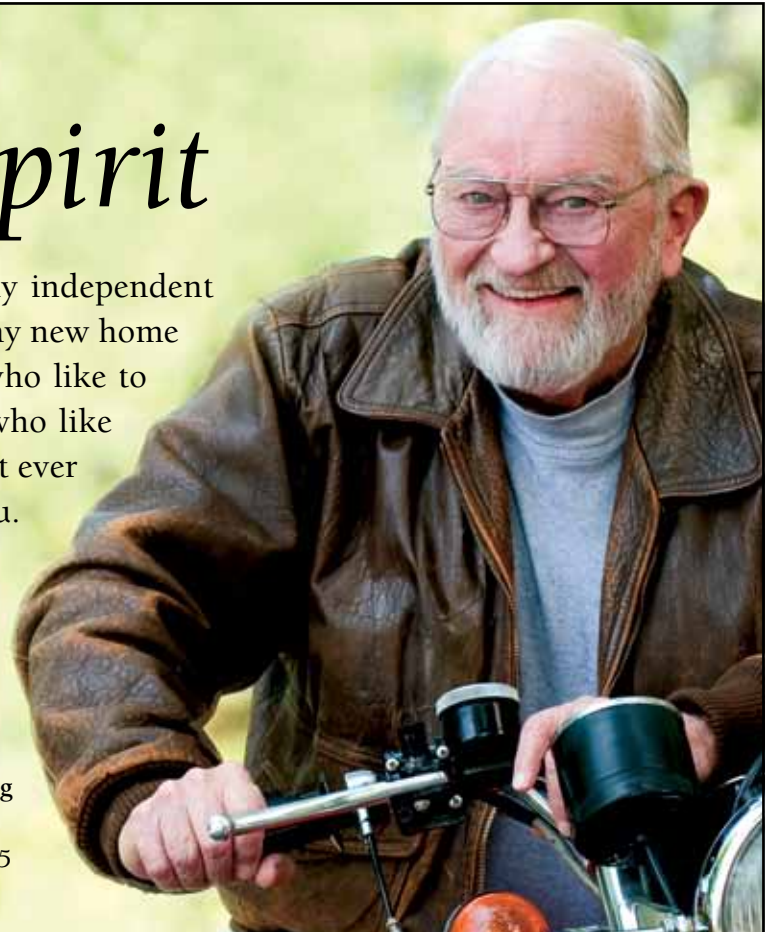
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approach," he says.

Cash emphasizes that no one is solicited to join the Masons, and that a person who is interested has to initiate the process. There are a few requirements though: membership is only open to men age 18 and older. He explained the all-male membership as a relic of the enlightenment era in which the Masons were founded, and a reflection of the time it came into being. There's also a strong emphasis on moral character. Members must believe in God, although whether that manifests as Christian, Jewish, Muslim, or other theism is a personal choice. The Masons are not a religious organization, nor are they a philanthropy. They teach a set of morals and values to members, and members might be philanthropic, but that's not the goal. An additional requirement is to be a person of good moral character and vouched for by two other Masons.

He states one of their mottos is "We take good men and make them better men." It's really up to the individual to put their en-

ergy into it, to continue to seek education, reflection, introspection and relationships.

Speaking for his generation, Cash says that he feels people are getting "digitally saturated" and that may explain some of the increase in civic involvement.

"They want to unplug and be part of something with meaning. They'd rather focus on self-improvement and reflecting rather than the 'me first gimme gimme' mentality that a lot of people have," he says.

Today, Cash works as part of the production team for Electronic Field Trips for Colonial Williamsburg, helping educate today's students. He says that he's excited about sharing history with students, especially the idea that students can "discover and consider how the past impacts them today."

Cash spent seven years as an actor in Revolutionary City, and that is how he met his wife Kelly. She was getting her master's degree from the College of William and Mary and saw him in character. They have been married for two years, and she is working

on her PhD at the college.

As the Worshipful Master, Cash is sometimes called upon to share information about the Masons locally. In fact, he was recently asked to speak to the Patriots Colony book club about the Lost Symbol, a book by Da Vinci Code author Dan Brown.

Cash wryly refutes the idea that the Masons are a secret society.

"If it's a secret, it's a poorly kept one. We have a website, a Facebook page, and a monthly open house. People can come by and see it. I wear a Mason ring and have a Mason license plate, and we are in the phone book," he says. The lodge also is open on the 4th of July and on Grand Illumination Day.

In Williamsburg, a historic town, it might be easy to think of the Masons as just another relic. But with their young Master and multi-generational membership, the Masons may be just as much a part of Williamsburg's future as its past. NDN

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## A LOOK AT Year-End Business Taxes

By Greg Lilly, Editor

“I’m a fixer,” Janet Riggs, CPA/ABV says. “I like to get things where they need to be.” As we move into the last quarter of the year, Janet says there are changes in tax reporting that small businesses need to know before year-end. Some of these have been in force for some time, but she says few small businesses have

understood them. With the current economic climate, the IRS is beginning to focus on lost sources of tax revenue. “Most people don’t know this, but the hammer is coming down,” she warns, and she has a solution.

Janet was born and raised in Alexandria, Virginia. “Over the years, I’ve been gradually

moving south and east because I really love the water,” she says. “As places have grown up with traffic and congestion, I’ve tried to keep ahead of that by getting out of the way.”

Many of her early years were spent in the operational side of the healthcare industry. “About 20 to 25 years,” she states. “I did a vari-



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ety of things: academic medical centers, private practices, healthcare consulting...a whole lot of different things.”

She found that she liked the finance leg of her business operations responsibilities.

“About ten years ago, I decided to get my CPA. This was after I had earned my Master’s Degree with a Specialization in Finance. I worked for a long time for an entrepreneur who had a lot of different businesses. That was interesting and a real learning experience for me because I learned about all sizes of businesses from the very small to the very large.”

Janet would help work out entanglements of the businesses, setting the operations right. “Then I discovered I tended to get bored,” she admits. “I thought it might be a good idea to try public accounting.”

Janet explains that for small businesses, the chosen business structure is an important aspect of its tax reporting requirements. For most small businesses there are four main structures: Sole Proprietorship, Limited Liability Company (LLC), Partnership and Corporation.

“Starting out, many people want to economize and cut out consulting a competent attorney and accountant,” Janet says. “Whatever money you save there you may spend in taxes

and penalties down the road. So it is a great idea to work out the start-up details with an experienced lawyer and accountant. The most important consideration at the beginning is to decide what type of entity you want to set up. This is a very fact intensive undertaking as the business structure depends on the type of business, its potential size, the compliance costs, the goals and objectives of the owner, etc. There are advantages and disadvantages to each type of entity.

With Social Security looking for funds, the IRS is focusing on who is paying Social Security taxes.

“A really important item to pay attention to this year and next in small businesses is the question of whether someone is an independent contractor or an employee,” Janet explains. “The IRS had an amnesty program last year and wanted everyone who has independent contractors who are really employees to come clean with no penalties. That usually is a prelude to a crack-down. I’m anticipating a lot of activity in regard to the classification of employees and independent contractors. The distinction is sometimes fuzzy and confusing to small business owners.” Janet suggests working with your accountant to decide if a

person working with your company as an independent contractor should really be an employee. This is important for the small business owner because in the event of an audit, he or she can be held responsible for paying the payroll taxes due as well as interest and penalties.

“The big drive is the Social Security tax,” Janet states. “A lot of Social Security taxes are being avoided, so the IRS is trying to get that back in line to fund the system.”

If that person doing work for your business is in fact an independent contractor, your business must issue a form 1099 for anyone whom you have paid more than \$600 during the year. “That includes individuals, LLCs and partnerships,” Janet explains, “one of the exceptions is when your company pays corporations – unless it is legal or medical costs and payments for products only without associated services.”

An example Janet gives is a business buying a new air conditioning system for its office. The equipment arrives and is installed by a local HVAC company. Your company pays for the job with a check. The IRS requires your company to send the HVAC company a 1099 form. “That full amount goes on the 1099,” she states. “It is up to the recipient to deduct

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the cost of the air conditioner equipment from the labor.”

Another recommendation Janet has for a small business owner is to understand your company’s tax returns. “That’s a big problem. People really don’t understand what is going on in their tax returns. It is essential. The IRS holds you responsible for knowing what is in the return. You signed it and you have to

idea’ is not a valid excuse for the IRS.”

The main aspect of Janet’s work that she likes is the problem solving. “I really enjoy that,” she says. “Every case is like a puzzle; if you tweak the puzzle in one place, three or four other pieces move. You have to understand how those parts shift. I find that challenging and interesting.”

Helping people is another part of her career.

not wait until the last few weeks of the year, Janet states. “It is important to consult with your tax advisor well before the year is over. While we may not know exactly what will happen with tax laws, there is at least some hedging and planning that can be done now.” NDN

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**“I like helping people to realize their full potential. We are in this profession to help protect our clients and to minimize any bombshells that could destroy their business.” ~ Janet Riggs**

know.”

She sees past years’ tax returns come into her office from new clients that are not prepared correctly. “If the tax payer is not versed in the return, that can be a real problem and can generate lots of taxes, penalties and interest.”

Talk to your accountant, Janet advises. “Make sure you don’t just pick up your tax return at the front desk and leave,” she says. “It is important to meet with the accountant and have him or her explain what is going on in the return. A business owner saying ‘I have no

“I like helping people to realize their full potential. We are in this profession to help protect our clients and to minimize the possibility of encountering any bombshells that could destroy their business. Tax work is not about filling out a form, taking the numbers a client gives you and sticking them in the computer. That’s not what it is about. It’s about looking at the whole picture. Start at the beginning and to the greatest degree possible cover your clients to protect them.”

Being aware of the tax requirements should



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Corey Miller Photo

# IRON MAN

By Greg Lilly, Editor

“My main goal right now is the Hawaii Ironman coming up in October,” Adam Otstot says. “That’s the Big Kahuna, the Ironman’s Championships. My training is geared for the full Ironman, and I’m training between 18 and 24 hours a week.” Adam is a top triathlete and the hero of his physical education students at Rawls Byrd Elementary School.

A triathlon consists of three events: swimming, bicycling and running. Each leg of the race includes transitions from one to the next where the clock is running on the total time of the triathlon.

Adam explains that there are four main triathlon distance races. “The Sprint Distance is typically about a 700

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to 800 meter swim; the bike [ride] is about a 20K (about 12.5 miles) and then a 5K run. The Olympic Distance, also called the International Distance, is a 1500 meter swim, a 40K bike and a 10K run. The long distance triathlons, which are what I focus on, like the Ironman is a 2.4 mile swim, 112 mile bike and a marathon (26.2 miles) run. Then there is a half-Ironman, which is exactly half of that: 1.2 mile swim, 56 mile bike and 13.1 mile run. Those are the main four distances.”

Adam arrived in Williamsburg in 2000 as an undergraduate student at the College of William and Mary. “I’d been a runner in high school, and I ran for the Tribe for four years in Cross Country and Track and Field,” he says. He decided that he wanted to go into teaching and did his student teaching at Matthew Whaley Elementary School and at Jamestown High School. “I was fortunate to get a part-time job at Rawls Byrd Elementary School as a physical education teacher while I worked on my master’s degree at William and Mary. I became a full-time PE teacher at Rawls Byrd and this is my ninth year.”

He says Williamsburg has brought him good

fortune. “I met my wife, Tori, here and we’ve just bought a house. It’s been good here in Williamsburg.”

About two years after Adam graduated from college, he became interested in the sport of triathlon. “Initially, I was interested in running, maybe marathon running,” he says. “You know, trying to stay competitive. The luck of the draw was that I kept getting hurt – soft tissue things like Achilles problems and knee problems. I decided to buy a bike to cross-train. Once I bought the bike, I really enjoyed it and rode more and more. I thought I would try a triathlon to see how I could do. I had no background as a swimmer as a youth. I could swim, but never competitively.”

He laughs when he recalls the first few triathlons he entered. “Those were a little rough in the swimming leg of the race. My cycling and running were strong enough that I could be fairly successful. After those first few triathlons, I decided to focus on it. I like the diversity of the training. I liked learning something new with the swimming.”

His first triathlon was in Richmond. The distance was a Sprint Triathlon. “It’s called

the Power Sprint and it’s put on by Richmond Multisports,” he adds. “It’s a great triathlon for a first one. It’s a pool swim, so you don’t have to deal with the open water and the nervousness going on there. The bike course is through scenic rolling hills, not too difficult. The run is nice. It was a good first one for me. I think that is a good beginning race for a lot of people.”

He says that when he competes in a new triathlon, he likes to review the course if he can, just to be sure he doesn’t find a surprising challenge along the route during the event. “That first time I do a race, I will at least drive the bike course. Some of these races, the bike portion is over a hundred miles long. I’ll at least drive it to get a mental image of what I’ll be doing. The same for the run course if it is really long – I’ll drive it or bike it. For the short sprints, I’ll practice the whole course if I have the time.”

September’s Half-Patriot here in Williamsburg was Adam’s warm-up to the big event he’s training for: the Hawaii Ironman in October. “I like the Half-Patriot,” he says. “The swim is in the James River. The James is not the cleanest river in the world, but I’ve never been bothered by murky river water. The hardest part is when

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we are in really shallow sections.” Williamsburg is adding another Half-Ironman next June. “That’s going to be great to have two here in town,” Adam says.

For the Hawaii Ironman championships, Adam trains up to 24 hours a week. That’s his schedule as he prepares for a race, but the rest of the year he says he averages about 13 or 14

to get one guy across the finish line. Like my friend Sasha Digges at Peak Physical Therapy & Sports Rehabilitation. I have received a lot of support from him. He has helped keep me healthy and consistent.”

Also the students at Rawls Byrd Elementary motivate him. “Everyday those kids inspire me,” Adam says. “I love teaching P.E. – mov-

was there once before in 2009.”

Swaying palm trees and girls in hula skirts are not along the course in Hawaii. “The course is brutal,” he describes. “That’s one of the reasons it has such history behind it. It’s out in the middle of a lava field on the big island of Hawaii. The swim is tough because so many people are there and they are all so good. The bike course is hilly, hot, windy and no trees. The run is like running in an oven. It is definitely the ultimate challenge

**“Ironman Hawaii was the first and is recognized as the greatest Ironman triathlon in the world and attracts top athletes. That is the place to test yourself.” ~ Adam Otstot**

hours a week. “I swim five days a week, bike four to five days a week and run four to five days a week. That means just about every day, I’m doing two workouts.” He is determined and committed. Along with his workouts, he teaches full-time and has a new wife.

“Tori and I have been married for just over a year,” Adam says. “She’s great support for me. She’s my biggest fan.”

He says there are many people helping him with his successes. “It really takes a team

ing is fun. Sometimes when we get older, the act of moving or going to the gym just loses its fun factor. Working with those kids reminds me that what I do is enjoyable, and I should be having fun with it – and not to be so serious about it.”

For Ironman races, Hawaii is the championship. “Ironman Hawaii was the first and is recognized as the greatest Ironman triathlon in the world and attracts the top athletes,” Adam explains. “That is the place you test yourself. I

for triathletes. Only a very few people can qualify for it each year.”

Adam has Williamsburg rooting for him as he travels to the Ironman championships. While he has his mind set on his goal, he also thinks about his students.

“I hope I’m setting an example for the kids at school, to help them pick something that they are passionate about,” he explains. “I want to show them that anything is possible. Just give 100% and do it.” NDN



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Arts  
& ENTERTAINMENT

# The Right Time & Place

By Greg Lilly, Editor

Lisa W. Cumming Photography

Williamsburg attracts artists. Watercolor painter and teacher Sharon Parker says it is the atmosphere. "It is such a beautiful, unique spot with Colonial Williamsburg, the college, the marshes and rivers surrounding us," she describes. "We have a variety of great subjects for

painting. There is a lot of different topography, buildings and gardens that are just gorgeous."

Sharon shows her paintings at New Town Art Gallery and at This Century Art Gallery (TCAG). She also teaches classes and leads open studio work at TCAG's Arts District lo-

cation.

She grew up in Newport News. "My dad was in the Air Force, and we lived there from the time I was in fourth grade. I always wanted to go to the College of William and Mary," Sharon says. "I did, but I dropped out my

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sophomore year and moved to California. I came back to Newport News in 1976 and met my husband, Louron.”

In 1988, Sharon had enrolled her young son at Williamsburg Christina Academy (WCA). “At that time, they needed an art teacher, and my son was just starting school there, so I began teaching art. I didn’t feel prepared at all. But, I jumped in and loved it.”

Sharon had always been good with crafts and loved creative work. “My girlfriends and I would do crafts and sell them at craft shows. I always had my hand in creative things.” Art was her hobby then and she enjoyed teaching it.

When Sharon had been at William and Mary, she’d thought of majoring in English. As she taught art at WCA, she felt motivated to go back to school. “I enrolled in William and Mary again to pursue a Degree in Studio Art and Elementary Education,” she says. “I did that part-time while I taught at WCA and raised our son. When I went back to William & Mary, I really just loved every class. I joined This Century Art Gallery and was able to exhibit upstairs in the Member’s Gallery – that

was a big step for me.”

Sharon feels like she’s at the right point in her art career. “I’m glad I’m in this season of my life,” she adds. “I’ve taught part-time at This Century Art Gallery since 2000. I taught on and off at WCA until 2009. When I left the school environment, I had more time. That next summer, 2010, a group of artists formed New Town Art Gallery. I got in on that as a founding member. That has been a great boost to my art career – painting more, having an exhibit space, as well as still exhibiting at TCAG. I’m enjoying having more time to paint and work on progressive goals.”

Her subjects range from abstract and still life to landscapes and figurative. “We have an open studio each week with a clothed model. This weekly practice with a live model is great,” she says. “This is the direction I want to go now – more figurative work.”

Having people in her paintings brings a contemporary mood to her work. People, in coffee houses or on the street, living their daily existence populate her work. “The uniqueness of the person attracts me to figurative art,” Sharon says, “trying to bring out their personality,

capturing the mood. That is always a challenge to get those spiritual and emotional qualities, as well as the physical. I like the combination of realism and abstraction that you can get.”

She does mostly studio work and a few commissions. “I like best going out and doing what appeals to me. I like to paint en plein air. We live in such a beautiful area, so many spots for painting or for reference photos.” When painting outside, Sharon likes to finish the work there including the detail work. “Even if I have to go back several times at that same time of day,” she adds. “With en plein air painting, because of the changing sun, you really have to go with your first impression, what first grabbed you about the scene. Get it down in a sketch – the shadows, the light – and then you can finish the details.”

Her medium is mostly watercolor. “Watercolor is such a fresh, spontaneous medium,” Sharon says. “You want the water and the pigment to do their thing because you always end up with surprises. Of course, it is easier to overwork than any other medium because of that fact. Oils and acrylics are more forgiving because you can paint over them.” With

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watercolor there is little correction; if an artist makes a mistake, she has to start a new painting. That's what Sharon enjoys. "For me, it's all about the spontaneous aspect. You can be bold or wet and loose with it. Watercolor always gives you something beautiful that could not have been orchestrated by only the brush." At William and Mary, watercolor had been one of her first media to use, and it continues to be her favorite.

"I don't know why people don't associate learning art more like the way you learn music," she says of her classes. "You can't play Beethoven's 'Moonlight Sonata' your first week. Like anything, art is practice, practice, practice. Even though it can be frustrating at first, stick with it and after your thousand paintings, or whatever it takes to get to proficiency, you'll be elated. You have to remember that you will always be learning. You never stop learning." Even as an art teacher, Sharon is constantly trying new techniques and gaining new skills.

She explains that "Art is a solitary pursuit." But the artist needs other artists as well. "Like anything in life, it is a balance. You need your

alone time to produce in your studio. In a painting group like the one I'm in, it is also good to get together and see what others are doing. You share ideas, suggestions and critiques. It's nice to have someone else's perspective."

Sharon can be found wandering around Williamsburg, scouting a scene for her next project. "It's attitude," she says of the people she includes in her figurative pieces, "how they turn their head, hold their hands, those things about them that bring out their personality. It's beyond physical appearance. Same with landscapes, the more evocative you can make it, the more you can illustrate the feeling of a place. This is expressive art."

She once did a painting of a group of people at Aroma's coffeehouse and café on Prince George Street, and other times of people browsing the Farmers Market or outside the Trellis. "I like group scenes, capturing the moment," Sharon Parker describes. "My figurative work incorporates landscapes, which I like. I include the people and their interaction. There are so many lively places here. This is the right time and place for my work." NDN

## Next Door Neighbors

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*Next Door Neighbors* is a monthly, direct-mailed magazine serving the residents of the Williamsburg area.

Circulation: 37,751



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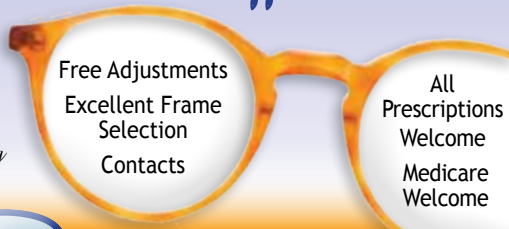


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# Recognizing ADHD

By Greg Lilly, Editor

The child can't sit still, can't seem to concentrate on one thing for more than a few moments and acts on flashes of impulse. Parents avoid going to a public place with the child due to "hyperactive and disruptive behavior." Just a boy being a boy, the parents thought, until he started kindergarten. Day care providers or teachers are one of the first people to recognize the behavior and bring it to the parent's attention.

"Attention Deficit Hyperactivity Disorder (ADHD)," says Dr. Zafar Ahsan, labeling the condition. He focuses on child and adolescent psychiatry. "The name explains the condition where there is a concern and

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questions about attention span and hyperactivity and impulsivity,” Dr. Ahsan says.

Originally from Pakistan, Dr. Ahsan came to the United States in 1984. “I had graduated with my medical degree from Sindh Medical College, in Karachi, Pakistan, and migrated to the United States,” he explains.

Dr. Ahsan prepared for the Educational Commission for Foreign Medical Graduates (ECFMG). “That’s the entrance exam for the medical field in the United States. All international medical graduates have to take the exam to enter a training program in the U.S. I enrolled in the Master’s Degree of Public Health program at New York Medical College with special interest in Developmental Disabilities,” he says.

Dr. Ahsan completed a research project on the quality of life of intellectually disabled individuals living in community housing. That honed his interest in psychiatry. “I pursued training in psychiatry and in my residency program in New York at Lincoln Medical Center, in the Bronx. Following the completion of residency, I did a fellowship in Child and Adoles-

cent psychiatry at Columbia Presbyterian hospital, in Manhattan. During my Fellowship, I got married to my wife, Saira, who was in the Pediatrics training program at the Washington University, in St. Louis, Missouri. She is also from Pakistan, and she was on a visa called Exchange Student Visa or J-1.” That visa has a requirement that once the students complete their training, they have to return to their home country for two years and get a sponsorship to return to the U.S. or, in the case of physicians, serve in a rural area for two years with a waiver.

“We opted to go that route,” Dr. Ahsan says. Dr. Saira Ahsan received the waiver with a position in the Appalachian Mountains in the far southwest corner of Virginia in Lee County. “We went there for two years,” Dr. Ahsan says, “and ended up staying for 14 years. Wonderful people there,” he adds. “They took such good care of us.”

Dr. Ahsan was the first full-time psychiatrist in Lee County. “That was a big honor for me,” he states.

One of his tasks was to work with patients in the prison system. “We created an inter-

disciplinary team approach: psychologists, the psychiatrist, the correctional officers, administrators and the councilors. Our primary focus was to take care of these patients (the inmates). We wanted to take care of their mental health, their physical health, their legitimate needs, so that they would stay stable. That was a clinically-rewarding experience for me. I did that for about 10 years.”

Dr. Ahsan met Dr. Avtar Dhillon, of the Community Services Board in Williamsburg. “That was in 2007 when they were setting up children and adolescent services. That had been my area of interest. Dr. Dhillon invited me to work at Williamsburg CSB, which is now Colonial Behavioral Health.”

Dr. Ahsan’s wife was still working in southwest Virginia, so he drove back and forth for six months. Eventually, he moved back to Lee County. “We liked this area and kept looking for opportunities,” he explains. “In 2008, she was offered a job at Sentara, and I secured a job at Eastern State Hospital and worked there for three years in the Forensic unit, another, clinically rewarding experience.”

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Colonial Behavioral Health contacted Dr. Ahsan again. "They had opened the Greater Williamsburg Child Assessment Center (GW-CAC). They do initial assessments there. If they find the child needs further assessment and treatment, the child is sent to the Child and Adolescent Clinic, which is in the same

anything that the parent would be able to observe the child not paying attention. However, once they start school, the teacher will see those aspects of the behavior."

In the academic setting, the teachers recognize the child not wanting to stay in his seat or not wanting to take turns.

severity."

No definite cause is known but like other medical conditions, a genetic factor plays an important role, "If there is a family member with ADHD then the child has a higher risk," Dr. Ahsan states.

He cautions not to jump to a conclusion

that an overactive, impulsive or fidgety child has ADHD.

"In our assessments, we try to separate and

**"ADHD is a childhood disorder and is usually recognized when a child starts school, because at home, parents are able to manage the child or they get used to the child's impulsive and hyperactive behavior." ~ Dr. Zafar Ahsan**

building. That's where I work. I do primarily psychiatric evaluations and medication management."

ADHD is a focal point of his assessments. "ADHD is a childhood disorder and is usually recognized when a child starts school, because at home, parents are able to manage the child or they get used to the child's impulsive and hyperactive behavior," he explains. "The concept of attention span does not make any difference because the child is not expected or involved in

"The child tends to be more overbearing on his or her peers. This is relatively more common in boys compared to girls," Dr. Ahsan says. "As a child grows and reaches puberty, the impulsive and hyperactive component mostly settles down or the child learns how to control it on their own. The majority of children grow out of it, it gets modified, or it gets exhibited differently in form and fashion than it was in third or fourth grade compared to middle school. Like any medical condition, it depends on the

identify any co-existing conditions. The concept of attention span or concentration could be a common factor in a number of other conditions. For a young child starting pre-K, day care or kindergarten for the first time, he or she may have separation anxiety or anxiety in general that sets in and affects the child's attention span. A child from a stressful home environment – that will contribute to the lack of attention and academic performance. Another important part of parents staying in contact

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with teachers is identifying possible learning disorders or disabilities. This is important because the treatment or intervention is entirely different for each condition. So a child with anxiety, who gets treatment for ADHD, will not get help, but may have an increase in his symptoms."

The assessment to determine ADHD collects data from many different perspectives. "This helps to get a view of the child's overall performance," Dr. Ahsan states. "Parents know what their children are capable of, so the parents fill out forms on the child's behavior. There are standard ADHD screening forms, the Vanderbilt ADHD forms." This assessment is a team approach. In addition to the parents, the child's coaches, teachers, instructors or any other mentors fill out these forms about the child's behavior.

"Data collection is first," Dr. Ahsan says. "Clinical interview is second. I will engage the child and determine if the child is performing at his or her age level – academically, socially, behaviorally and the child's own understanding of his or her behavior. Early screening is very

important and should be done preferably at kindergarten level."

"If the child has not received help by the time he enters middle school, he will start comparing himself developmentally with other children," Dr. Ahsan explains. "The child may get into trouble, have to spend more time on homework, [and] this starts to affect the child's self-esteem. Two things happen: the child will isolate himself or he will start to act out."

By the time of high school, if not treated or treated ineffectively, there could be larger problems. "The child may bring on problems like self-medication," Dr. Ahsan says. "These are the individuals who get involved in street drugs to self-medicate themselves because now they have not advanced developmentally and want to achieve some self-control, to prove that they can do better. They look for other resources like sharing medications from other people or buying street drugs. They want to excel, compare themselves to their peers and not get in trouble with their parents, but eventually they do. They get involved in things that aren't socially acceptable."

The treatment for ADHD is an interdisciplinary team approach. "The team members are the child (if age appropriate), parents, teachers and doctors," Dr. Ahsan states. Medications are commonly used.

"Safer medications, long-acting medications, better monitoring of overall health status," Dr. Ahsan lists things he hopes to see in the future of treatment.

While recognition is usually in the first years of school, treatment might not follow as rapidly as it should. The biggest barriers for treatment are lack of information and a lack of resources.

"There are some wonderful organizations like Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD.org) and the American Academy of Child and Adolescent Psychiatry (AACAP.org) that provide resources and information. Locally, CDR – Child Development Resources is a wonderful source along with Greater Williamsburg Child Assessment Center," Dr. Zafar Ahsan states. Take a team approach, he recommends, of doctors, teachers and parents to recognize, guide and help a child with ADHD. NDN

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# A Stitch in Time

By Greg Lilly, Editor



Lisa W. Cumming Photography

As the nights cool, many Williamsburg residents rummage through the linen closet or cedar chest for a favorite quilt to add to the bed. A quilt brings much more than warmth to your home; it adds style, history, beauty and artistry. Nan Losee has crafted quilts all her life and now concentrates on creating heirlooms for her family and bringing the history of quilting to the

public.

"I am passionate about quilting," Nan says. "I love every aspect of it. Whether reading about it, speaking on the subject or taking show-and-tell quilts to retirement homes, I'm amazed at the number of people who show up with their own quilts." These visits with local residents to share her enthusiasm for quilting

bring about tales from the audience about their own quilts. Nan has found that, sadly, many people don't know the particular story associated with a favorite quilt. "I encourage people to put a label on those quilts to tell the story, so as it is passed down, those pieces don't end up as a dog bed."

She relays stories of old quilts moving from

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the master bedroom or guest room to the children's room for an impromptu fort, and then the quilt wraps furniture for a move and eventually pads the dog's crate. Quilts were and are utilitarian, Nan adds, but some are special. Quilts can tell a story and that's what she loves about them.

Nan and her husband, Ron, are self-professed "history addicts." Ron was a career Marine officer. They moved often and when he retired, they were in Southern California.

"It took us four years to sell our California home," Nan explains. "We were determined to move east. Over that four year period, we thought about where to move. We always loved Virginia as a home, and each time his orders took us out of Virginia, we felt like we had left claw marks at the state line. There was no question that Virginia would be our destination."

Nan and Ron stopped in Williamsburg to visit a friend on their way to Lynchburg. "We hadn't thought about Williamsburg until we were here and within 36 hours we had bought a house. That was 18 years ago. This is where we were destined to be."

The quick change in plans happened on Jamestown Road outside the Polo Club. "That first night we arrived here, we sat on a planter bench outside the Polo Club," Nan describes, "and along came a Colonial Williamsburg interpreter who struck up a conversation with us. We just suddenly said, 'Oh my gosh, this is really history.' We have been involved since. I'm a volunteer at the textile department in the conservation building of Colonial Williamsburg (CW) working on historic textiles. We're both active in the Daughters of the American Revolution, and Ron is the registrar for the Sons of the American Revolution. We love Historic Jamestown and CW. We can't get enough of it."

Back in Nan's hometown in northern Illinois, she had watched her grandmother quilt. "She was a quilter, but my mother was not." Nan's mother had sewing projects going, and Nan would gather the left over fabrics. "I used those fabric remnants to imagine I was making quilts," she says. "Eventually I became a student of some fine quilters and learned their techniques."

While living in California, Nan taught quilting at the local community college, where she earned a lifetime teaching certificate in quilting. "That went on for about eight years before we moved to Williamsburg." She says to think of a quilt's construction like a sandwich. "The top slice would be a decorative piece of fabric, either in its entirety or made up of smaller pieces sewn together to create a design," Nan describes. "The middle, or filling, is batting, which is usually a cotton or polyester. The bottom of the sandwich is usually a muslin, historically it was a muslin, but now we use some lovely textiles on the back just as we do the top. The combination of the sandwich would be fabric on the top and bottom with a batting in between."

The quilter takes a needle and thread and stitches the sandwich together. "Occasionally, tying is done instead of stitching," she adds. "The tying is done with yarn or embroidery floss. That also holds the layers together. That's the basics of what a quilt is."

The basic construction may seem simple, but the variety of designs and intricate details can be unlimited. Nan is part of a Civil War quilting group that recreates the designs of the period. "Quilts of the mid-nineteenth century were mainly utilitarian. They were very simple patterns," Nan says.



## Q & A

An Interview with Cathy Richardson, Ed. D.  
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### THE DOWNSIZING DEILEMMA: WHEN SHOULD I START?

RICHARDSON:

Downsizing can be a complicated process for anyone, especially the GI (1901-1924), Silent (1925-1945) and Baby Boomers (1946-1964) generations. The process incorporates major decision making, challenges and a major moving experience. Many young-at-heart feel because they are in good health, both spouses are very active, they live in a comfortable home with a master bedroom on the first level where they don't have to climb steps too often, they live in what they consider a nice community - that it makes it okay to delay even thinking about downsizing. It is recommended that the above generations refer to the information below to start the conversation on downsizing.

**Key Reasons for Downsizing:** Loss of a spouse through death or divorce; upkeep of the larger home; increasing cost of taxes and/or utilities (and may need equity to pay down debt). Also may desire: a smaller home, live closer to family, have access to a "Senior Active" environment; or desire to move to a Senior Apartment. Others might decide it's time for an Assisted Living facility or a need to move to a Nursing Home, etc.

**Five Common Questions Concerning Downsizing:** 1.) I want to move, but can I afford to move where I would like to live. If not, where do I go? 2.) Am I doing the right thing by moving? 3.) Will I have room for over-night visits from family and friends? 4.) Will the process be overwhelming? 5.) There is so much to do and so little time to get it done. What should I do first?

**Tips for Downsizing:** Make a "to do" list and keep it updated throughout the process; consider your new location with quick access to health care facilities; check the layout of your new location before making a decision and then decide on what furniture to move; sort your items wisely and determine the items to keep, give to family, friends, sell, donate or throw away; pack one room at a time and take pictures of special items; pack and carry important papers separate; and decide if a "Senior Organizer/Mover" or a "Move Consul-

tant" is needed.

**Benefits and Advantages of Downsizing:** It minimizes stress by: reducing the burden of maintaining unnecessary things; eliminating outside home care; offering a less complicated lifestyle; increasing cash flow; lowering utility bills; determining what possessions are more important; allowing more time to do the things you want to do; enjoying more time with family and friends; enhancing traveling time without home maintenance concerns; allowing more time to relax and enjoy your good health, etc.

**Major Challenges for Senior Downsizing:** Finding a home that can accommodate your needs (ask your Realtor®); dealing with sad feelings of leaving a place where you've lived and loved for decades; being overwhelmed by the task of moving; and/or knowing where to begin packing (contact a Move Consultant and preview the resources below).

**Resources for Senior Downsizing:** [www.WilliamsburgEstate.com](http://www.WilliamsburgEstate.com); [http://www.ourparents.com/senior\\_communities/virginia/williamsburg](http://www.ourparents.com/senior_communities/virginia/williamsburg); <http://www.elderlyelder.com/downsizing-for-seniors>; <http://senioradvocateonline.com> (Glossary of Terms); <http://seniors-downsizing.com>.

According to the Over-50 Council of the National Association of Home Builders, about six-percent of Americans between the ages of 55 and 64 move each year. Research also shows that two-thirds of all the people who have ever reached the age of 65 are alive today. Senior downsizing should be considered inevitable and an on-going focus.

This is my 12th and final article with updates on real estate issues that was considered to be of interest to you. As of November 2012, you will receive interesting update from Sam Mayo, the 2013 President of Williamsburg Area Association of Realtors®. Thanks to all of you for taking your time to read the monthly message from the President of Williamsburg Association of Realtors® and thanks to so many for your positive feedback over the last 12 months.

For additional expert information and guidance consult a REALTOR®. For a complete and accurate listing of homes for sale visit [www.WAAREaltor.com](http://www.WAAREaltor.com).

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With our current fabric choices, she and other quilters can let their imaginations fly. "As we become more indulgent in the beautiful fabrics of today, quilts can be quite elegant," she adds. "Many of these are free-form and fall into a modern, contemporary designs. But most are based on traditional four-patches, nine-patches, stars and other popular patterns. From those, other patterns have evolved. People using their imagination can get quite elaborate."

Regarding her personal style, Nan says she has stayed with traditional patterns "in appreciation for those who have gone before me in generations past. I know that these are the fabrics and patterns that they relied upon."

Some quilters enjoy the designs or doing appliqué (cut shapes sewn individually onto a piece of fabric). Others like the whole cloth quilt

"I am passionate about quilting. I love every aspect of it. Whether reading about it, speaking on the subject or taking show-and-tell quilts to retirement homes..."

~ Nan Losee

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with a quilted on design – showcasing beautiful quilting stitches. Nan says it comes down to personal style and physical ability. As people age, the actual hand-stitching of the quilt may be difficult.

Nan cautions not to assume all quilters are women. "We've had some men who are fine quilters in our Civil War group." One gentleman traveled for his career and found he had a lot of hotel evenings with bad television programs for his only entertainment. He was a Civil War buff and took up the hobby to fill those nights on the road.

Nan says that when shopping for a quilt check for the quality of the fabric and if the piece is quilted by hand or by machine. If you are looking at an antique quilt, check the overall condition, the age and the rarity of the fabric for that time period.

Several projects in the future have Nan excited. "I'm working on a quilt that someday will become a wedding gift for a granddaughter who is not even engaged yet," she says. "But, I thought if I waited until she got engaged, I might not have the drive or capability to do what I want to do for her. That's my current project."

Her Civil War quilting group is finalizing which design to replicate for the Mid-Atlantic Quilt Festival in February. The group was asked to exhibit again for 2013. "We're excited and working toward that," she says.

"I have one project that is in the hoop, being hand-quilted," Nan Losee explains. "It is inspired by a quilt I saw in the collection at Colonial Williamsburg. It's a full bed-sized quilt with a lot of detail. This is something I would put into an heirloom category. God help our children if a dog decides to make it a bed," she says with a laugh. NDN

# Hey Neighbor!

Please visit [www.WilliamsburgNeighbors.com](http://www.WilliamsburgNeighbors.com) and click on **Hey Neighbor!** for a complete list of current community announcements.

To submit your non-profit event to Hey Neighbor! send a paragraph with your information to: [heyneighbor@cox.net](mailto:heyneighbor@cox.net).

## Hey Neighbor!

### THE WILLIAMSBURG WOMEN'S CHORUS WELCOMES NEW MEMBERS

#### Ongoing

The Chorus meets on Thursdays at Bruton Parish House, 10:00-noon. The winter concert, Cantate! Sounds of the Season, is scheduled for December 14, 7:30 p.m. Contact Ann Porter, [aportermusic@verizon.net](mailto:aportermusic@verizon.net), for information. Rehearsals begin September 13.

## Hey Neighbor!

### NATIONAL CAPITAL LYME AND TICK-BORNE DISEASE ASSOCIATION

#### Ongoing

Meetings: Every 3rd Sunday of each month, from 2 – 4 pm at James City County/Williamsburg Community Center 5301 Longhill Road, Williamsburg. Education about the impact of Lyme and other tick-borne diseases is top priority for our new chapter. See [www.natcaplyme.org](http://www.natcaplyme.org) for more information. Email (local) address for further info is [bbgal2008@cox.net](mailto:bbgal2008@cox.net).

## Hey Neighbor!

### APPLICATIONS MASTER GARDENER TRAINING PROGRAM Through November 15, 2012

Classes will meet for three hours Monday and Wednesday mornings from January 7 through April 4, 2013. Topics include botany, soils, pest and disease management, best practices for lawn care, gar-

dens, flowers, fruits and vegetables, pruning techniques, landscape design and water conservation. Fee is \$150. Applications are available at [www.jccwmg.org](http://www.jccwmg.org) or by calling the Virginia Cooperative Extension at 757-564-2170. Classes fill quickly.

## Hey Neighbor!

### WALT OFFERS OUTSTANDING CLASSES FOR FALL 2012!

#### Ongoing

The Williamsburg Area Learning Tree (WALT) has more than 60 new and returning classes to choose from in the Fall 2012 catalog. All of these classes bring you and your neighbors together to share in the excitement and fun of learning and are open to the entire community. A complete list of classes can be picked up at either WJCC Libraries or can be reviewed online at [www.wuu.org/walt](http://www.wuu.org/walt). WALT, a not-for-profit education program, began more than 12 years ago and is a community service project of the Williamsburg Unitarian Universalists. For more information please call Jill Whitten – Program Coordinator 220-9975.

## Hey Neighbor!

### CHARITY MOTORCYCLE RIDES

#### September 22, 2012

The Five Forks Ruritan charity motor cycle ride starts and ends at the Williamsburg - Jamestown Airport, 100 Marclay Road, Williamsburg. Registration: 8 – 11 am. No bike out before 8 am. Last bike out at 11

am. All riders must have returned to Williamsburg-Jamestown Airport no later than 3 pm. Bike and rider \$20. Additional hands \$5. Additional rider \$10, includes 1 poker hand for the additional rider. Best hand \$125 awarded to the person with the best hand. In case of tie, winner determined by drawing for high card. Proceeds benefit local charities and local needy people. Ride is approximately 90 miles. There will also be a raffle. For more information, contact Charley Rogers, 757-565-3484 (h), 757-229-9256 (w). Email [charleyrogers@yahoo.com](mailto:charleyrogers@yahoo.com) or [fiveforksruritan@yahoo.com](mailto:fiveforksruritan@yahoo.com).

## Hey Neighbor!

### REFLECTIONS ON BACON'S REBELLION

#### September 22, 2012

During "Governor Berkeley Laments the Rebellion," meet with Governor William Berkeley as he recounts his time in Virginia and the unhappy circumstances that led to Bacon's Rebellion and the burning of Virginia's 17th-century capitol at Jamestown. This program is presented at 11:30 am, 1:30 pm and 3 pm in the Memorial Church. All are free with paid admission to Historic Jamestowne. Contact: 757-229-4997 or [www.historicjamestowne.org](http://www.historicjamestowne.org).

## Hey Neighbor!

### SEPTEMBER OUTDOOR SKILLS SAMPLER

#### September 22, 2012

At York River State Park from 10 am – 4 pm. Location: Contact station. Have you ever wanted to learn how to cast a fly, shoot a bow and arrow, or shift gears while mountain biking? Come and sample these and other outdoor skills with VA Dept. of Game & Inland Fisheries certified instructors. York River State Park, 5526 Riverview Road, Williamsburg, VA 23188. Phone - (757)566-3036.

## Hey Neighbor!

### PLANT SALE AT THE GARDEN!

#### September 22, 2012

From 8:30 am - 1 pm, the Williamsburg Botanical Garden will have plants for sale – mums, potted bulbs, perennials, shrubs, and more. The sale will be held in the Garden, with a rain date scheduled for Sunday, September 23, 8:30 am - 1 pm.

## Hey Neighbor!

### WILLIAMSBURG FARMERS MARKET

#### September 22 and 29, 2012

8 am – 12 noon in Merchants Square in Williamsburg. 40 vendors will sell apples, fish, mushrooms, artisan cheeses and chocolates, meats, pasta, organic produce, cut flowers and soaps. Enjoy food demonstrations, the market's live music and exhibits along with shopping in Merchants Square. For information, call 757-259-3768 or visit web site [www.williamsburgfarmersmarket.com](http://www.williamsburgfarmersmarket.com). September 22 – Spinning and Weavers

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November 4, 2012

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Guild will exhibit with interactive demonstrations. September 29 – An Occasion for the Arts will be open during the market. Each market will have live music by local musicians.

### **Hey Neighbor!** **"5 X 7 ART ON THE QT" FUN- DRAISER**

September 23, 2012

This Century Art Gallery fundraiser from 5:30 -8 pm at the City of Williamsburg Community Building. Tickets are \$45 per person for an evening of surprises including secret art, silent auction, food, drink, and lots of fun. 'Secret Art' are 5x7 original paintings, photographs as well as jewelry and sculpture donated by regional artists. Tickets are available at the door, or by contacting the Gallery by phone, 757-229-4949 or email, [thiscenturyartgallery@verizon.net](mailto:thiscenturyartgallery@verizon.net).

### **Hey Neighbor!** **PICK YOUR PADDLE**

September 23, 29 and 30, 2012

4-6 pm, explore the beautiful wetlands or river with us. Learn something new and exciting as you paddle up the creek or down the river; and don't worry, we provide you with a paddle of your choice (canoe or kayak). Please phone 757-566-3036 for reservations. Location: York River State Park.

### **Hey Neighbor!** **MICHAEL W. SMITH**

September 24, 2012

Show time: 7:30 pm. Even as defining as his platinum pop and worship albums have become, there is yet another musical side to Michael W. Smith that is as passionate and creative. Glory, the twenty-third career album from this Grammy winner, feeds the enthusiasm its predecessor (Freedom) stirred and soundly exceeds expectations. Ferguson Center for the Arts, Christopher Newport University.

### **Hey Neighbor!** **SHINDIG AT JAMESTOWN: AN EVENING OF BARBEQUE & BLUEGRASS**

September 26, 2012

To benefit the Jamestown Rediscovery Project, from 6:30 – 8:30 pm, join us for ShinDIG at Jamestown. Enjoy bluegrass music with our very own Archaeology Director Bill Kelso and the Who Ever Shows Up Band from 6:30 - 8:00 pm at the Dale House Café on Jamestown Island. Gates open at 6:00. All proceeds benefit the archaeologi-

cal research, educational programs and operations of the Jamestown Rediscovery Project at Historic Jamestowne. Tickets are \$27 per person and include the BBQ dinner. Tickets must be purchased online in advance. Location: Historic Jamestowne. Contact: 757-229-4997 or [www.historicjamestowne.org](http://www.historicjamestowne.org)

### **Hey Neighbor!** **BREASTFEEDING ADVICE**

September 27, 2012

Free. 5:30-6:30. Please join us for this free introductory class designed to help expectant mothers get off to a good breastfeeding. Call (757) 564-7337 press 5 then 3 if you have questions. Register online at [www.chkd.org/classes](http://www.chkd.org/classes). Pediatric Associates of Williamsburg, 119 Bulifants Blvd., Williamsburg.

### **Hey Neighbor!** **"MEMORIES ON DISPLAY" ART EVENT**

September 28, 2012

The Peninsula Alzheimer's Leadership Council presents this art appreciation event on from 5:30 to 7 pm. at New Town Art Gallery, 5140 Main Street, Williamsburg. Enjoy this elegant evening by viewing artwork created by Williamsburg residents who participated in the Memories in the Making© Art Program for those with memory loss. Appetizers and wine will be served. While the event is free, donations will be accepted for the Williamsburg Walk to End Alzheimer's®. For more information, contact Marjorie Hilkert at 757-345-6977.

### **Hey Neighbor!** **WILLIAMSBURG'S GOT TALENT!**

September 28, 2012

In its second year, this fundraiser for the Williamsburg Land Conservancy, is Williamsburg's spin on the television phenomenon. The event brings the region's best and brightest talent together to compete for prizes. Showtime is 7 pm at the Kimball Theater. For details on becoming a contest visit [www.williamsburglandconservancy.org](http://www.williamsburglandconservancy.org) Tickets are available online at [www.colonialwilliamsburg.com](http://www.colonialwilliamsburg.com), at the Kimball Theater or any Colonial Williamsburg ticket office, or by calling 1-800-HISTORY.

### **Hey Neighbor!** **CONSTRUCTION ZONES IN MARRIAGE**

September 28-29, 2012

Overnight retreat - 7 pm Friday to

## Next Door Neighbors

# 2013 Publishing Schedule

### JANUARY ISSUE

#### **Legacy**

*Planning for future generations*

- In Home Date: December 13, 2012
- Advertising Deadline: Tues, Nov. 27th

### FEBRUARY ISSUE

#### **Industry Innovations**

*Innovators with new ideas*

- In Home Date: January 17, 2013
- Advertising Deadline: Tues, Dec. 31st

### MARCH ISSUE

#### **Inside Williamsburg**

*People working behind the scenes locally*

- In Home Date: February 14, 2013
- Advertising Deadline: Tues, Jan. 29th

### APRIL ISSUE

#### **Beginnings**

*Locals on the verge of a new beginning*

- In Home Date: March 21, 2013
- Advertising Deadline: Tues, Mar. 5th

### MAY ISSUE

#### **Parenting**

*On being a parent*

- In Home Date: April 18, 2013
- Advertising Deadline: Tues, Apr. 2nd

### JUNE ISSUE

#### **Law & Order**

*Interviews with locals who uphold the law*

- In Home Date: May 23, 2013
- Advertising Deadline: Tues, May 7th

### JULY ISSUE

#### **Serving Our Country**

*Life in and after the armed services*

- In Home Date: June 20, 2013
- Advertising Deadline: Tues, June 4th

### AUGUST ISSUE

#### **The Arts in Williamsburg**

*Preview to Arts Month*

- In Home Date: July 18, 2013
- Advertising Deadline: Tues, July 2nd

### SEPTEMBER ISSUE

#### **Teachers & Mentors**

*Annual focus on education in our community*

- In Home Date: August 22, 2013
- Advertising Deadline: Tues, Aug. 6th

### OCTOBER ISSUE

#### **Good Health**

*Annual health issue*

- In Home Date: September 19, 2013
- Advertising Deadline: Tues, Sept. 3rd

### NOVEMBER ISSUE

#### **We're Thankful**

*An inspirational issue about gratitude*

- In Home Date: October 17, 2013
- Advertising Deadline: Tues, Oct. 1st

### DECEMBER ISSUE

#### **Williamsburg Holidays**

*Holiday guide for locals*

- In Home Date: November 14, 2013
- Advertising Deadline: Tues, Oct. 29th

4 pm Saturday at Eastover Retreat Center - just across the James River in Spring Grove. The 12 building tools include: examining issues, annoyances and beyond - learn to know them & how to handle them; goals & priorities - exploring & combining; understanding the strength of spiritual team work; depth of intimacy; love is ...God's definition; trust - strengthening and repairing methods; expectations-pitfalls and solutions; financial pitfalls, skills and budgets. Cost of \$190.00 includes Lodging, Breakfast & lunch, Program Booklets, and more. Register on-line: [www.westgraceministries.org](http://www.westgraceministries.org) or call 757.253.7976 for more information.

**Hey Neighbor!**  
**PUBLIC LANDS DAY TASKS BY LAND AND WATER**  
 September 29, 2012

At York River State Park from 10 am - 12 noon. Location: Visitor's Center. Float or hike along one of the York River's important tributaries. This guided tour allows hikers and paddlers to meet one another and share the experience of life in a brackish water marsh. The guided hike is free. Canoes are \$9/person or \$6/person per family of 4+, kayaks are \$16/solo and \$11 tandem. York River State Park, 5526 Riverview Road, Williamsburg, VA 23188. Phone - (757)566-3036.

**Hey Neighbor!**  
**JETHRO TULL'S IAN ANDERSON PLAYS THICK AS A BRICK 1 & 2.**  
 October 1, 2012

Show time at 7:30 pm. Ian Anderson returns to the Ferguson Center to perform both Thick As A Brick in its entirety for the first time since 1972, and his new album, Thick As A Brick 2. After 44 years of leading Tull around the world, Ian Anderson celebrates these true progressive rock classics with old and new fans across world-wide. Ferguson Center for the Arts, Christopher Newport University.

**Hey Neighbor!**  
**ROYAL DRUMMERS AND DANCERS OF BURUNDI**  
 October 4, 2012

Show time: 7 pm. Considered one of the best percussion ensembles on this planet, Burundi's top drummers have been touring the world since the 1960s. Their vibrant power and precision on 20 drums originally accompanied kings of this central African nation. Ferguson Center for the Arts, Christopher Newport

University.

**Hey Neighbor!**  
**MONEY TALK - A FINANCIAL GUIDE FOR WOMEN**

October 4 - November 1, 2012  
 Register by Friday, September 28, 2012. Sponsored by: Virginia Cooperative Extension and Senior Services Coalition's Community Action Plan on Aging. October 4- Financial Basics, October 11- Insurance Basics, October 18- Investing Basics, October 25- Investing for Retirement, November 1- Estate Planning. At the Colonial Heritage Clubhouse, 6500 Arthur Hills Dr. All sessions are 6:30 p.m. to 8:00 p.m. For more information contact Taryn DeRose at 757-645-2004.

**Hey Neighbor!**  
**CONCERT: CHARLES LINDSEY, JR., ORGANIST**  
 October 6, 2012

The concert will include an eclectic mix of traditional organ music and Mr. Lindsey's own arrangements of popular tunes. Time: 7:30 pm at the Williamsburg Baptist Church. Free and open to anyone who wishes to attend. All concerts are held at 227 Richmond Road, Williamsburg. For more information call the church at 229-1217.

**Hey Neighbor!**  
**3RD ANNUAL 10K RUN FOR THE HILLS**  
 October 6, 2012

Start time: 9 am. Riverside presents the 3rd Annual Run For the Hills 10K! Come out to Sanford B. Wanner Stadium in Williamsburg on Saturday, October 6, to Run (Or Walk!) just for the "health" of it, and support Beyond Boobs!, a 501(c)(3) non-profit organization dedicated to saving lives by providing support for young women with breast cancer and breast health for all. Partnered with The Health Journal, a 1-mile Fun Run begins at 8:30 a.m. and then at 9 a.m. all of our runners and walkers will line up for the 10K event along the challenging combination of roads and beautiful nature trails of the Warhill Sports Complex. Post-walk light breakfast, free 10K shirt and a brand new 2013 Beyond Boobs! Calendar to Live By! Register today at [beyondboobs.org](http://beyondboobs.org). Price: \$30.00 10K Run/Walk and \$20.00 1-Mile Fun Run/Walk. Venue: Sanford B. Wanner Stadium in Warhill Sports Complex, Williamsburg, VA. Register at [beyondboobs.org](http://beyondboobs.org). Any questions: Contact Vicki Vawter at (757)846-1095 or

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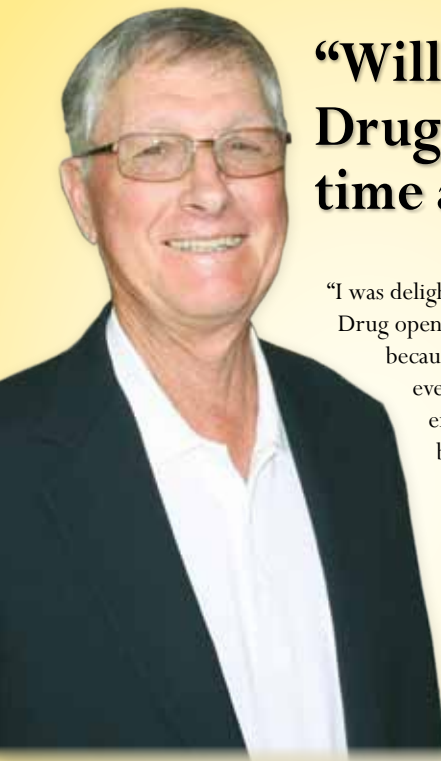
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~ **John Wilson**



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### Hey Neighbor! 44TH AN OCCASION FOR THE ARTS

October 6-7, 2012

Art Show and Music Festival. Free to the Public. Merchants Square and Boundary Street, Williamsburg. Free outdoor art event. Acquire a piece of fine art from one of 170 juried artists. Experience kid-friendly hands-on activities and youth art from area students. Enjoy on-going varied, live performances for all ages and tastes, including student performances each morning on the City Square Stage and the Kimball Theater. Web site: [www.aofta.org](http://www.aofta.org)

### Hey Neighbor! WILLIAMSBURG FARMERS MARKET

October 6, 13, 20, 27

From 8 am - 12 noon in Merchants Square in Williamsburg. Chefs present demonstrations and musicians play live music each Saturday at this producer-only market. The harvest season will have an abundance of pumpkins, apples, grass-fed bison, pork and chickens, pasta, Greek baked goods, artisan cheese, peanuts and honey for shoppers. For information, call 757-259-3768 or visit web site [www.williamsburgfarmers-market.com](http://www.williamsburgfarmers-market.com).

### Hey Neighbor! LIVE AT BIRDLAND DIRECTED BY TOMMY IGOE

October 7, 2012

Show time: 7 pm. In a setting designed to recreate the ambience and experience of a night at Birdland. This dynamic new ensemble, straight from the jazz mecca of New York City, provides an unforgettable musical event that goes beyond the traditional and sets the standard for the 21st-century jazz orchestra. World music is explored from every corner of the globe to surprise and delight audiences of all ages while infusing the best of American jazz with excitement that hasn't been seen in decades. Ferguson Center for the Arts, Christopher Newport University.

### Hey Neighbor! CATCH THE VISION TOUR

October 11, 2012

At 8 am and 2 pm, Williamsburg Christian Academy invites you to attend a tour of the school. Christ centered, non-denominational, Pre-K through 12 academy. This

one hour tour will give you a real snapshot of WCA. Please call 220-1978, ext. 113 for more information.

### Hey Neighbor! 42nd GOLF COLLECTORS SOCIETY ANNUAL MEETING & TRADE SHOW

October 11-14, 2012

Golf Collectors Society (GCS), a non-profit association of members who collect golf memorabilia and play with hickory clubs, will hold their 42nd Annual Meeting & Trade Show at the Williamsburg Hotel & Conference Center. In conjunction with the event, the United States Golf Association (USGA) Museum is hosting a Golf History Symposium at the Williamsburg Hotel on Thursday, October 11, from 1-5 pm. The GCS Hickory Championship will be played on the Plantation Course at nearby Kingsmill Resort on Friday, October 12 with a shotgun start at 8:30 am. More information about the GCS and this event is available at [www.golfcollectors.com](http://www.golfcollectors.com).

### Hey Neighbor! LIZA MINNELLI

October 12, 2012

Show time: 8 pm. Liza Minnelli, winner of four Tony Awards, an Oscar, a special "Legends" Grammy, two Golden Globe Awards and an Emmy, is one of the entertainment world's consummate performers. In film, on stage and in television, Liza has won critical acclaim, a multitude of fans, and recognition from her peers in show business, giving new dimension and credibility to the word "superstar." Ferguson Center for the Arts, Christopher Newport University.

### Hey Neighbor! 2nd ANNUAL SHRED-A-THON

October 13, 2012

The James City County Police will be hosting their 2nd Annual Shred-A-Thon on October 13th, 2012. (9:00 to 12:00) The event will be in front of the Williamsburg/ James City Courthouse, 5201 Monticello Ave. This event serves two purposes, the first is to help fight identity theft by shredding documents; the second is to fund the department's "Shop with a Cop" program. All the money raised at this event goes to support the "Shop with a Cop" program. For any questions or more information please contact Officer Todd Dill, 757-603-6025.

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**NEIGHBORHOOD**  
photo challenge

RIVERSIDE DOCTOR'S  
HOSPITAL  
WILLIAMSBURG

Find the 12 differences  
between the original  
photograph (top) and  
the altered photograph  
(bottom).  
**Enjoy!**



INTERMEDIATE LEVEL

**Look for the answers in  
the next issue of  
Next Door Neighbors.**

September 2012  
In the Neighborhood  
Photo Challenge





Real Estate. Reinvented.®

# WE HAVE JUST THE RIGHT HOME FOR YOU!



\$655,000

Beautiful Ranch in Premiere Section of Ford's Colony. Brazilian Cherry flooring, coffered ceiling, built-ins, heavy trimwork, wainscoting, stunning granite & stainless gourmet kitchen. Screened Porch & Raised "Trex" deck. Huge Unfinished basement with so many possibilities. Plenty of walk-in storage, 2 upstairs Bedrooms each with ensuite Bath.

**Andrea Pokorny**  
757.291.9119  
andrea@williamsburghomefinder.com



### TOANO

Private Forge Road retreat on 11+ acres, yet only minutes to CW! Builder's home with quality design & construction. Welcoming front porch, chef's kitchen, Timber tech deck & 3 season porch off 1st floor MSTR. 5 BRs, 4 BA, 4,033 sqft. Built in 2005. Zoned for horses. Proudly offered at \$850,000.

**Denise Fleischmann** 757-645-2150  
**Lorraine Funk** (757) 903-7627



### KINGSMILL

417 Fairfax Way

Fantastic one level living custom brick home on 5th green of Plantation course. 3 BR, 3BA, 3213 sqft. Large rooms, open floor plan, skylights, and solar tubes. Extensive woodwork and built ins, 2 screened porches, fantastic views, peaceful setting. \$525,000.

**Tim Parker**  
(757) 879-1781  
**Cyril Petrop**  
(757) 879-8811  
www.timparkerrealestate.com



### KINGSMILL • 19 Winsten Fax

GORGEOUS 4 BR, 4 Full & 2 Half BA 2,961 sqft. townhome. 2 spacious MBR suites (one on the first floor), beautiful Kitchen w/custom cherry cabinets & corian counter tops, updated BAs, PLUS a 750 sqft. lower level walk out featuring huge LR, separate HVAC zone, Kitchenette & custom Bar. One year home warranty. \$319,900.

**dianebeal**  
PRINCIPAL, REALTOR/STAFF, PROFESSIONAL  
(757) 291-9201  
dianebeal@lizmoore.com



### QUEENS LAKE

Move in ready. 4 or 5 BRs & 3 refreshed BAs on nearly 3/4 ac. lot. Circular drive, brick patio & level rear yard. Extensive HW flooring, LR w/FP, DR & den. Kitchen w/ plentiful updated cherry cabinets, center island, abundant counters and spacious eating area with FP & wood stove insert. Large master w/BA. Each additional BR has double closet & wood floors. Starling gutters, gas furnace & A/C. Great storage, large garage. MLS# 30033576, \$394,000.

**Susan B. Smith**  
757-876-3838  
susansmith@lizmoore.com  
www.lizmoore.com/susansmith



### GRAYLIN WOODS

Completely remodeled home with open floor plan offering 1 floor living & a bonus lower level room. Kitchen with granite opens to great room with stone FP. Spacious master BR features master BA with dual granite vanities. 3 add'l BRs. BR 2 offers ensuite BA. Screened porch, deck, fenced yard. 3,315 sqft. 4 BR, 3 1/2 BAs. \$400,000.

**Deelyn**  
757-503-1999  
deelynnelison@lizmoore.com  
www.PremierWilliamsburgRealEstate.com



### 2665 NORTH WATERSIDE DR.

Lanexa, VA

Waterfront! Ideal hideaway on 5.5 acres of privacy features 2nd story sunroom & expansive deck perched above Diascund Creek Reservoir. Spacious interior overflowing with custom character. Eat-in kitchen w/granite & stainless opens to family room centered around a large slate FP. Master w/sitting area & BA w/huge walk-in shower with seating. \$799,000.

**Charlotte Turner**  
757-784-4317  
charlotteturner@lizmoore.com  
www.homesbycharlotte.com



### LONGHILL WOODS 82 Carleton Court

City of Williamsburg very rare opportunity to live in sought after neighborhood. 4 BR, 2.5 BA 2919 sq ft Brick custom built by Ron Curtis has been impeccably maintained. Hardwood floors, granite and updated bathrooms. Impressive all season sunroom and deck overlooks private yard. \$395,000

**AMERIKA LAWALE**  
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