

Harvard Health Letter

VOLUME 48
NUMBER 10
AUGUST 2023

Surprising causes of neck pain

Your daily activities may be triggering pain without you realizing it.

A sore neck can dog you in every position—lying down, sitting, standing, or walking—and the discomfort can be debilitating. The pain might come from structural neck problems such as arthritis (worn cartilage at the ends of your neck bones) or degenerated discs (worn cushions between your neck bones).

But often the cause is related to strains in the neck muscles, triggered by something subtle in your daily routine. Here are some surprising culprits behind neck pain and strain, plus quick fixes to feel better.

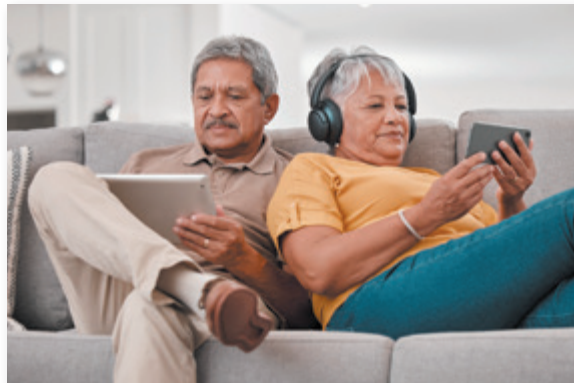
Binge-watching a TV show

Like to watch back-to-back episodes of your favorite program? You might be holding your neck in an awkward position for hours at a time. “A lot of people lean way back while they watch TV, extending the neck backward. Or they lean to the side, forcing the neck too far sideways. Both positions can strain neck muscles,” says David Evangelista, a physical therapist at Harvard-affiliated Spaulding Rehabilitation Hospital.

Quick fixes: “Use a horseshoe-shaped travel pillow that goes around your neck when you lean back to watch TV. If you lean to the side, use more pillows to fill the gap between your head and shoulders. And change your position every 15 or 20 minutes to give your neck a break, so it doesn’t get stiff,” Evangelista says.

Leaning forward

You might lean forward throughout the day, whether that’s toward a computer monitor that’s hard to see or toward another person during a conversation. If you extend your



Simply curling up on a couch for a few hours can lead to neck muscle strain and pain.

neck each time, that can strain the muscles and cause pain.

Quick fixes: If you’re going to lean, keep your back straight and tilt forward at your hips. If you can’t see your computer monitor well, pull it closer to you or increase the font size. If you have eyeglasses for reading or distance vision, see if they help. If they don’t help enough, you can get glasses just for using a computer. If you don’t use eyeglasses, get an eye exam: you may need a pair. Similarly, if you lean forward a lot to hear people in conversation, consider getting a hearing test.

Wearing a flimsy bra

Wearing a bra with little support makes your muscles and ligaments do all the heavy lifting. For someone with heavy breasts, the extra weight can pull the neck forward and stress the neck and shoulder muscles, leading to neck and back pain.

Quick fixes: Get a better bra. Make sure both the underwire and middle section of the bra lie flat against your body, the cups aren’t too tight or too loose, and the band is level

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4 Blackfan Circle
Boston, MA 02115

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PUBLICATIONS MAIL AGREEMENT NO. 40906010
RETURN UNDELIVERABLE CANADIAN ADDRESSES TO:
CIRCULATION DEPT., 1415 JANETTE AVE., WINDSOR, ON N8X 1Z1

Published monthly by Harvard Health Publishing,
a division of Harvard Medical School

In association with

B Belvoir Media Group, LLC, 535 Connecticut Avenue,
Norwalk, CT 06854. Robert Englander, Chairman
and CEO; Timothy H. Cole, Chief Content Officer;
Phillip L. Penny, Chief Operating Officer; Greg King,
Chief Marketing Officer; Ron Goldberg, Chief Financial
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The goal of the Harvard Health Letter is to interpret medical
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© 2023 Harvard University (ISSN 1052-1577)

Proceeds support research efforts of Harvard Medical School.

ASK THE DOCTOR

by ANTHONY L. KOMAROFF, M.D., *Editor in Chief*

How can I avoid long COVID?

Q I was pretty sick with COVID-19 but have improved somewhat. Now I'm worried about getting long COVID. How serious is long COVID, and what can I do to avoid it?



A Some people who “recover” from COVID-19 unfortunately suffer persisting symptoms—such as fatigue, difficulty concentrating, and disrupted sleep—that seriously impair their ability to function at work and at home. This illness is called long COVID. While it is more likely to develop in people who were most severely ill when they first caught the virus, it also can occur in people who were only mildly affected. Initially, some people (including some doctors) suspected that such persisting illness was due purely to psychological problems or even that the patients might be faking their illness.

Three years later, it is clear that tens of millions of people are affected by long COVID. Senior Harvard economists have estimated that the cost to the United States of caring for post-COVID illnesses may be as much as \$3.7 trillion over the coming years. If the millions of people currently affected by long COVID remain sick for years—that is, if long COVID becomes a chronic illness—then the cost is likely to be considerably greater.

It also has become clear that the illness is due to physical problems caused by the virus. Two 2023 scientific reviews published in the journals *Nature Reviews Microbiology* and *Frontiers in Medicine* summarize the many underlying biological abnormalities that are found in people with long COVID, involving primarily the brain, the immune system, energy metabolism, and the heart and lungs. How can you protect yourself from getting long COVID? Vaccines protect you against getting COVID-19, and you can't get long COVID without first getting COVID-19. But vaccines are not perfect: some people get “breakthrough” infections with the COVID virus despite having been vaccinated. Fortunately, a 2022 study published in the journal *Nature Communications* finds the risk of long COVID is reduced by vaccination.

Two 2023 observational studies in the *British Medical Journal* and in *JAMA Internal Medicine* found that people with COVID-19 who were prescribed the antiviral medicines nirmatrelvir/ritonavir (Paxlovid) and molnupiravir (Lagevrio) were 25% to 50% less likely to develop long COVID than people of similar age and state of health who did not get an antiviral. Randomized trials are needed to make sure antivirals truly protect against long COVID, and such trials are under way.

Long COVID is a real and serious problem, but fortunately vaccines and antiviral drugs appear to offer some protection against getting it. The National Institutes of Health has committed over \$1 billion to discover how to better diagnose, effectively treat, and ultimately prevent long COVID—answers that we sorely need. ♥

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The secret to finding a primary care provider: Be flexible

Be open to seeing a physician, nurse practitioner, or physician assistant for primary care.

Forget being finicky if you're looking for a new primary care physician. It's hard enough just finding one who's taking new patients. That's due to a doctor shortage in the United States, fueled by such factors as population growth, low pay, physician burnout, a lack of required postgraduate training programs, and a wave of retirements.

The shortage is becoming so serious that some states are trying to make it easier for doctors to practice there, or they're creating new medical schools. And Congress is debating how to increase the number of training programs in the country. Those measures aren't going to help you get a new primary care physician anytime soon. So you need to be flexible about the type of health professional you seek. Fortunately, you have options.

Primary care physicians

This category includes several kinds of primary care doctors. They've all earned a bachelor's degree (which takes three or four years), graduated from medical

school (which takes four years), completed a training program (which takes at least three years), and passed licensing exams. They all promote wellness and preventive care and treat a wide range of conditions. But each doctor's focus is a little different.

Internal medicine specialist. An internist treats adults only and has completed training in a hospital and subspecialty clinics (such as cardiology or gastroenterology) for every organ system in the body.

Internal medicine-pediatrics. A "med-peds" physician treats adults and children and has trained in both internal medicine and pediatrics.

Family practitioner. This doctor can treat children and adults and has a broader scope than an internist or med-peds physician. For example, some family practitioners can perform minor surgery and even deliver babies.

Geriatrician. A geriatrician deals with the medical complexities of older patients with many chronic conditions. Geriatricians also consider the many issues that affect older adults, such as social or functional limitations.

Other primary care providers

You can also turn to an advanced practitioner for primary care: a nurse practitioner (NP) or a physician assistant (PA). Both are licensed and can diagnose and treat patients, order medical tests, and prescribe medication. But there are differences in their training and autonomy.

The NP becomes a registered nurse first (with a two- or four-year degree), and then earns a master's or doctorate degree in advanced practice nursing (which takes two to three years). NPs can practice medicine independently in



It's important to have a primary care provider in place before serious health problems develop.

about half of the United States. In many states, however, they must collaborate with a doctor.

The PA has a health- or science-related bachelor's degree and a master's degree from an accredited physician assistant program (which takes two to three years). Unlike NPs, PAs are not permitted to practice independently. They must work in collaboration with a doctor.

Doctors vs. advanced practitioners

Is there a difference in the quality of care you'll receive if you go to a doctor versus an advanced practitioner? "It's difficult to say. Studies comparing the quality of care between the two groups are inconclusive. But if you spend four years in medical school and three-plus years in a training program, it's probably true that you'll perform better than advanced practitioners in some regards, since you have more training," says Dr. Anupam Jena, the Joseph P. Newhouse Professor of Health Care Policy at Harvard Medical School and co-author of the new book *Random Acts of Medicine*.

Still, Dr. Jena notes that NPs and PAs are skilled clinicians who can spot medical problems and, if they can't treat them, connect you to the care you need. So don't fret about the type of primary care provider you see.

"The priority is establishing the relationship. Otherwise, if you're sick, and you don't have someone you can call, you'll have to go to an emergency department or a walk-in clinic. That's not optimal," Dr. Jena says. "You want a relationship with someone who knows you and can make recommendations you'll listen to. And ideally it's important to have that in place before a serious problem develops." ♥

Resources to find providers

Tap into these resources when looking for a primary care provider

- ▶ **Referral lines.** Hospitals often have referral lines that can direct you to primary care providers taking new patients.
- ▶ **Your family, friends, and doctors.** They may have recommendations for providers they trust.
- ▶ **Online reviews.** Look at physician review sites, but take reviews with a grain of salt unless there's a large number of comments pointing one way or the other.

Why are you coughing at night?

Postnasal drip, gastroesophageal reflux disease, and other health issues can trigger nighttime coughing spells.

Some people don't cough during the day, but then start hacking once they're in bed. Several conditions can cause this, and some have a common culprit: gravity.

Common triggers

Several health issues are associated with nighttime coughing. These are some of the most common:

Postnasal drip. Postnasal drip describes a constant trickle of mucus from the upper airways—the sinuses and throat. “In the daytime, when you're upright, these fluids drain naturally with the help of gravity, and you swallow and clear them. When you lie down, you lose the help of gravity, and mucus collects at the back of the throat. If mucus lands on the vocal cords in the throat, or if you inhale some mucus and it enters the lungs, it triggers a wet cough that produces phlegm or mucus,” explains Dr. Neil Bhattacharyya, an ear, nose, and throat specialist (otolaryngologist) at Harvard-affiliated Massachusetts Eye and Ear.

Gastroesophageal reflux disease (GERD). Stomach acid generally is squeezed down into the intestine when the stomach contracts, or is pulled down by gravity. However, when the circular muscle between the stomach and the esophagus (the tube that carries food from the mouth to the stomach) fails to tighten properly, acid can squirt back up, irritating the lining of the esophagus and structures in the throat. This backwash is called reflux. When you lie down, acid doesn't flow naturally into the intestine and can reflux even more easily. “When acid gets on the vocal cords, you start to cough. In severe cases, acid gets into the windpipe and causes wheezing,”

Dr. Bhattacharyya says. GERD can cause a dry cough that may or may not be accompanied by a burning feeling (heartburn) or pain in your chest.

Medication side effects. Some drugs—for example, ACE inhibitors such as lisinopril (Prinivil, Zestril, others) or enalapril (Vasotec), which are used to treat high blood pressure and heart disease—can cause a frequent, dry cough as a side effect. “In the daytime it might feel more like a need to clear your throat. At night, it's much worse,” Dr. Bhattacharyya says.

Heart failure. Heart failure is the term for a gradual decline in the heart's ability to pump enough blood to meet the body's needs. “When the heart isn't pumping well, fluid backs up and seeps into other tissues. In the daytime, when you're upright, gravity forces the fluid into the lower extremities. When you lie down, some fluid builds up in the lungs, which makes you cough,” Dr. Bhattacharyya says. “A dry cough at night may be one of the first signs of heart failure.”

What you should do

When a new nighttime cough lasts more than a few weeks, see your doctor to rule out the most dangerous causes, like heart failure. Your doctor can also review your prescriptions for potential side effects that might lead to a cough, and swap out a medication if necessary.

Those causes aren't too hard to suss out. “But it can take a bit of trial and error to figure out if GERD or postnasal drip is causing nighttime

coughing. I'll typically recommend a month of treatment for one or the other, depending on symptoms, and see if the person gets better,” Dr. Bhattacharyya says. “If one avenue doesn't work, we can try the other. It's better than doing an expensive diagnostic test that requires anesthesia.”

GERD treatment involves dietary modifications (avoiding foods and drinks

that seem to make your GERD symptoms worse) plus drugs that suppress acid, such as omeprazole (Prilosec).

For postnasal drip, treatment involves medication that either thins mucus secretions (so they flow more easily and don't go in wrong places) or dries up mucus production (to decrease the volume of secretions).

Other things you can do

In addition to medical treatment, these strategies might help reduce nighttime coughing:

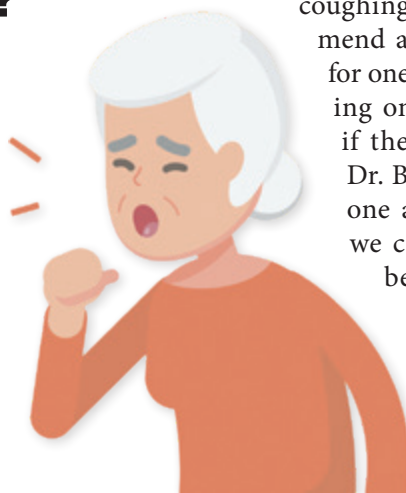
Sleep on a wedge pillow. The elevation helps you swallow secretions better and makes it harder for stomach acid to reflux.

Use a room humidifier. “This is especially helpful in the winter, when dry air makes secretions thicker. A humidifier can break them up and thin them out,” Dr. Bhattacharyya says.

Stay upright after eating. Wait an hour or two before you lie down.

Keep cough drops handy. If you wake up coughing, sit up and (when possible) suck on a cough drop to calm an irritated throat.

Try some honey. Have a teaspoon of honey, or put some in a cup of decaffeinated tea. Some people find that honey can soothe a sore throat and suppress a cough. And at the very least, it can be a comforting treat. ♥



Don't get duped: Here's how to avoid online pharmacy risks

Medication deals on the internet often come with a steep price.

Type the words “best online pharmacy” into a search engine, and you’ll find countless options promising prescription drugs delivered right to your door at discount prices. Just be careful if you plan to place an order. Many online pharmacies are unscrupulous purveyors of potentially harmful products. It takes some know-how to identify legitimate pharmacies selling approved medications.

Online pharmacy dangers

The vast majority of online pharmacies are rife with risks, according to the FDA and the National Association of Boards of Pharmacy (NABP), an independent nonprofit group.

The NABP has found that at least 40,000 online pharmacies aren’t complying with patient safety standards or laws; about 95% of websites offering prescription-only drugs operate illegally; and 89% of illegal online pharmacies don’t require prescriptions for prescription-only drugs. Yes, it really is that bad.

What does that mean for consumers?

You don’t know who you’re dealing with. “It could be a pharmacy in another country that doesn’t have the same level of quality control that we do, or it could be a fake pharmacy with a legitimate-looking storefront,” says Joanne Doyle Petrongolo, a pharmacist at Harvard-affiliated Massachusetts General Hospital.

You don’t know what you’re getting. “You can’t tell if the pill you get has been stored properly, if it’s expired, if it’s the correct strength, or even if it’s the right medication. Also, you don’t know what else is in the product,” Doyle Petrongolo says. The NABP found that some pills contain dangerous substances along with the medicine.



Warning signs of bogus online pharmacies

Avoid online pharmacies that

- ▶ don’t require a doctor’s prescription
- ▶ aren’t certified by the National Association of Boards of Pharmacy
- ▶ don’t have a licensed pharmacist on staff to answer your questions
- ▶ offer discounts that seem too good to be true
- ▶ don’t protect your personal and financial information.

You’re risking more than your health.

The NABP reports that some online pharmacies are out to steal your personal information (putting you at risk of identity theft) or install malware on your computer.

Don’t be scared off

Despite the risks, there are plenty of licensed, legitimate online pharmacies. Using them has many benefits. The main one is cheaper prices for certain drugs. “You can sometimes save hundreds of dollars, so it’s worth considering,” Doyle Petrongolo says.

Other reasons to use online pharmacies include the convenience of having medications delivered directly to your home, and privacy if you’re too embarrassed to pick up certain drugs at the corner drugstore.

Ordering safely

To order prescriptions with the confidence that you’re getting legitimate products, learn the signs of safe online pharmacies. These companies

- ▶ are licensed with a state board of pharmacy
- ▶ have a physical address and phone number, preferably in the United States
- ▶ require a doctor’s prescription
- ▶ have a licensed pharmacist available to answer your questions
- ▶ have prices that aren’t too good to be true
- ▶ clearly state that they don’t sell your personal information.

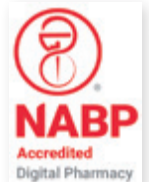
How can you tell all that by looking at a website? Doyle Petrongolo recommends using the NABP’s Buy Safely tool (<https://safe.pharmacy/buy-safely>), which allows you to type in an online pharmacy website (the website address, not the name of the pharmacy) to see if it’s been verified by the NABP.

You can also look for a symbol on the pharmacy website indicating that it’s NABP-accredited. The symbol resembles a vertical infinity sign (like the number 8) inside a red circle, and has the words “NABP Accredited Digital Pharmacy.” Examples of online pharmacies with this symbol are Amazon’s pharmacy service (<https://pharmacy.amazon.com>) and HealthWarehouse.com (www.healthwarehouse.com).

And before you order anything online, remember that you can sometimes find prices that are just as good—or better—at a local pharmacy.

“You don’t have to look for deals on medications that have been around for a long time, like hydrochlorothiazide or atenolol to treat blood pressure, or simvastatin to treat high cholesterol,” Doyle Petrongolo says.

“You think they’ll be more affordable somewhere else, but they’re actually often cheaper—just a few dollars—at a local drugstore or big-box store.”



Look for this symbol on a pharmacy website.

3 strategies for safer home workouts

Create a safe exercise space, get safety gear, and practice smart workout habits to reduce your risk of injury.

Working out at home is convenient, but it comes with risks (especially if you exercise alone) such as muscle strains, falls, and injuries. This was evident during the first year of the pandemic, when COVID-19 risks led many people to exercise at home, and exercise injuries resulting in emergency room visits were up about 50% from the year before, according to some insurance company estimates.

To reduce your injury risks when exercising at home, focus on three strategies.

1 Create a safe workout space

Your exercise environment is the foundation for exercise safety. Make sure it's well lighted (to prevent falls), well ventilated (to keep the air fresh), and not too hot (so you don't get overheated or dehydrated) or humid. Adding a dehumidifier (about \$30 for one that handles a small room) to the space may help dry out humid air, if necessary.

A safe workout space should also have a level floor and plenty of room to move. "Your workout space should be wide enough that you can move your arms freely, without touching anything when you're standing, and long enough to accommodate your whole body when you're on the ground for floor exercises," says Janice McGrail, a physical therapist at Harvard-affiliated Spaulding Rehabilitation Hospital.

Keep the floor free of clutter and throw rugs, and remove any nearby furniture with sharp corners.

2 Stock the space with safety essentials

The following items can boost the safety of your workout.

A large mirror. Maintaining the proper form during exercise is crucial

to avoiding muscle strains and sprains. A framed full-length mirror (about \$10 at a big-box store) will enable you to see how you're doing. Secure the mirror to the wall to keep it from falling and shattering.

An exercise mat. A little cushioning underfoot will reduce pressure on your joints and provide a safer landing spot than a hard floor. The mat should be nonslip and about half an inch thick. A set of interlocking exercise foam floor tiles are perfect for the job. Prices for a set start at about \$25. (Note: Don't exercise on thick carpet, which may cause your sneakers to get stuck and cause a fall.)

Supportive sneakers. The most comfortable sneakers you own might not be the safest for exercising. Wear a pair that fits snugly around your heel



Use a mirror during a home workout, so you can make sure you're maintaining the proper form.

and midfoot and has a roomy toe box, good support, and soles that aren't too cushioned or beveled (as running shoes are), which may lead to a fall.

Water. Keep a water bottle nearby, so you can take a few sips in between exercises to stay hydrated.

A smart speaker. If you exercise alone, you'll need to call for help in case of emergency. A smart speaker that you can call out to is a great option (starting at about \$30). Just make sure your workout space has a good Wi-Fi signal. Note: You can also use a smart watch or an alert button, but those can be pricey (hundreds of dollars). Your smartphone can also do the job.

A carbon monoxide monitor. Carbon monoxide is an odorless, colorless, potentially deadly gas emitted from combustion engines. If your workout space is in a garage, along with a car, install a carbon monoxide monitor (starting at about \$20).

MOVE OF THE MONTH: ARM CURLS



Stand with your feet about shoulder-width apart, your chest lifted, and your shoulders back and down. Hold a dumbbell in each hand with your arms down at your sides and palms facing forward. Slowly bend your elbows, lifting the dumbbells toward your shoulders. Hold. Slowly lower the dumbbells to the starting position. Repeat 8 to 12 times, take a break for 30 to 90 seconds, and repeat the process again.

3 Practice safe exercise habits

Remaining aware of exercise risks and practicing safe exercise habits should be part of your routine—just like putting on a seat belt in a car. Here are some suggestions.

Get your doctor's okay. Make sure you have a green light for your exercise routine if you've been inactive recently, or if you have a chronic condition such as heart disease or poor balance. Start with a simple routine, and increase the difficulty gradually.

Warm up first. Strained muscles are common exercise injuries. Doing a 5- or 10-minute warm-up first—such as marching in place and moving your arms around—will prime your

muscles and body for the demand of your workout.

Don't push yourself too hard. "In general, exercise should feel like a challenge or make you feel fatigued, but it should not cause sharp pain. It is okay and even expected for your muscles to feel tired and a bit sore after you exercise, but the soreness should go away in about a day. If you are still sore several days later, that's a sign that you did too much. Next time, use lighter weights or do fewer repetitions," McGrail says.

Carry weights carefully. "Grasp any weight, even a lighter one, in the middle

of the handle to keep it steady so you don't drop it. When picking up heavy dumbbells or kettlebells from the floor, bend at your knees and keep your back straight. When standing up again, use your legs rather than your back, so you don't strain it," McGrail says.

Tread lightly with treadmills. Treadmill accidents at home are common causes of broken bones, head injuries, and friction burns. If you have a treadmill, don't set the speed too fast or raise the incline too high, and change difficulty levels gradually. Take advantage of any safety mechanisms

your treadmill has, such as a tether you can wear that automatically stops the machine if you fall. Keep the treadmill unplugged when you're not using it, to protect children who might want to play on it.

Stretch after a workout. The muscles are warm and ready for stretching. Don't bounce during a stretch, which can cause injury; hold each stretch for about 30 seconds at a time. This will help keep your muscles long and supple and prevent them from being injured during your next workout and your daily activities. ♥

Causes of neck pain... from p. 1

across your back and doesn't ride up. Or try a sports bra or posture bra that brings the weight of the breasts closer to your ribcage and distributes it across your torso.

Sleeping in risky positions

Sleeping seems harmless, but some sleep positions pose big risks for the neck. When you sleep on your stomach, for example, you rotate your head to the side. Sleeping on your side without the right support pushes your neck toward your shoulder. Staying in these positions for hours can cause neck muscle strain and pain.

Quick fixes. Avoid sleeping on your stomach. And if you're a side sleeper, check the support under your neck. "Lie on your side with your head on your pillow. If you can easily slide your hand in the space between your head and shoulders, you're not getting enough support at night. Get a new pillow to fill the gap. Any material will do," Evangelista says.

Sitting "comfortably"

For many people, sitting comfortably means slouching, which is bad for your neck and back. "Poor posture puts abnormal strain on the spine, including the neck and the ligaments holding



Angling your head down for a long time strains the neck muscles and can lead to pain.

it together, and that can cause pain," Evangelista says.

Quick fixes: Sit up straight: pull your chin back, lower your shoulders, and arch your back. If that's challenging at first, sit on the edge of your chair for a few minutes, which makes sitting up straight a little easier, and then sit farther back on the seat. If your budget allows, get an ergonomic desk chair with low-back support, adjustable height, and a thick seat cushion.

Looking at electronic screens

We all spend a lot of time looking at electronic devices. For example, you might be looking up at a TV mounted on a wall, or down at a smartphone or laptop. The trouble is that your head is heavy; angling it up or down for a long time leads to muscle strain and pain.

Quick fixes: Keep TVs, smartphones, and computer screens at eye level. Consider lowering the height of your TV,

elevating your computer screen by putting it on a small stand, or raising your smartphone screen by putting it on a stand or a pillow on your lap. "Wearing a travel pillow around your neck can add neck support," Evangelista says.

Lifting heavy dumbbells

Evangelista says many people lift dumbbells that are too heavy. "That throws off your body mechanics. Your trapezius muscles in the back overcompensate. They're connected to the neck, and the overuse can cause neck pain," he says.

Quick fixes: If you're struggling to lift a dumbbell, use a lighter weight. Make sure you're using proper form; a physical therapist or certified personal trainer can guide you.

Getting stressed

"We carry a lot of stress in our necks. We raise our shoulders and tense our muscles. If you have any underlying neck problems, it irritates them," Evangelista says.

Quick fixes: Practice stress management. Try some deep breathing exercises, go for a quiet walk in nature, or learn how to meditate. "I've seen people whose neck problems go away when they get stress under control," Evangelista says. "It's an important part of any plan to reduce neck pain." ♥



More evidence that aging might be reversible

It seems that every living thing ages—that aging is inevitable. Yet studies in animals have suggested that aging may, at least, be slowed. Scientists have been able to track this using genetic biomarker tests known as DNA methylation clocks, which indicate how rapidly body cells are aging. In a study published May 2, 2023, in *Cell Metabolism*, researchers found that when the blood supply of an old mouse was connected to the blood supply of a young mouse for three months, the organs of the young mouse aged dramatically. When the joined blood supplies were disconnected, the organs of the young mouse became biologically younger: in other words, the aging process could be accelerated and then

reversed. The scientists then found that in people going through severe COVID-19, surgery for a hip fracture, or pregnancy, the clocks showed a sudden acceleration of aging followed by a reversal. This study did not identify the factors that cause or reverse aging, and we are still a long way from being able to slow human aging more powerfully than we can through living a healthy lifestyle. But this kind of research offers hope that someday, we will understand the aging process well enough to slow it.



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FDA approves first drug designed to treat hot flashes

A new medication may bring relief to women struggling with the exasperating hot flashes of menopause. In May 2023, the FDA approved fezolinetant (Veozah). It's the first drug specifically designed to reduce the frequency and severity of flushing and sweating spells that occur as a woman's estrogen levels fall. Unlike hormone replacement—the main treatment for hot flashes, which might raise risks of breast cancer or blood clots—fezolinetant is a

nonhormonal drug that affects the brain's regulation of body temperature. The drug must be taken daily, and it must be accompanied by routine blood tests to check for signs of liver damage—a potential side effect. Other side effects can include abdominal pain, diarrhea, insomnia, or back pain. Other nonhormonal drugs used to treat hot flashes include certain antidepressants, blood pressure medications, and drugs that treat nerve pain.

Study finds dog walking injuries are increasing

Being a dog owner has many health benefits, like unconditional love, companionship, and increased physical activity required to play with and walk your pet. But be careful when you take Fido for daily strolls. A study published online April 14, 2023, by *Medicine & Science in Sports & Exercise* ties dog walking to a sharp rise in injuries among people holding the leash of a peppy pup. Researchers analyzed information in a national health database from 2001 to 2020 and identified almost 423,000 people (average age 53) who went to emergency departments after being

pulled or tripped by a leash. The annual number of injuries increased by more than four times during the study period, from about 7,200 in 2001 to about 32,000 in 2020. Dog walkers most commonly suffered broken fingers, shoulder sprains, and traumatic brain injuries. The study authors urged dog walkers to use retractable or short leashes and, while walking, to pay close attention to their pets, stay aware of the surroundings, and avoid distractions for both themselves (such as texting) and their dogs (such as busy areas that might inspire a leashed pooch to take off running). ♥



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What's coming up:

- ▶ Is your home blood pressure monitor accurate?
- ▶ Tips to avoid “pickleball elbow”
- ▶ How to spot the signs of hoarding
- ▶ Group living options for people ages 60 or older

