

A Blurry Worldview

Understanding Myopia

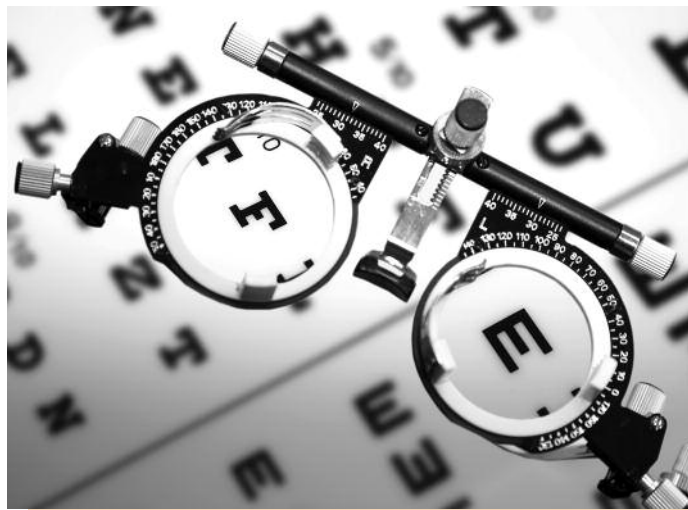
As a child in school, did you ever struggle to see what the teacher wrote on the board? Maybe you could easily read from a book, but things farther away – like highway signs – looked blurry. Blurry distant vision is the main symptom of myopia, a condition that affects about a third of American adults.

If you have myopia, you'll have trouble seeing things far away, but you'll be able to see nearby things clearly. This is why myopia is commonly called nearsightedness. Other symptoms of myopia include headaches, eyestrain, and squinting.

Myopia typically begins in childhood. In most cases, the amount of nearsightedness someone has stabilizes by the time they reach adulthood. Some people, however, may have myopia that continues to worsen with age.

"Myopia develops gradually," says Dr. Mary Frances Cotch of NIH's National Eye Institute. "Children often don't realize they are myopic because myopia develops gradually and they don't have any way of knowing that their blurry vision is different from others'."

When you look at an object, the light rays of that object pass through the cornea and the lens of the eye. These bend (refract) the light and focus it on the light-sensitive tissue at the back of the eye (the retina). If you have perfect vision, the rays focus directly on the surface of the retina. In a myopic eye, the eyeball is usually too long from front to back. This causes light rays to focus at a point in front of the retina, rather than directly on its surface. This makes distant objects blurry.



Myopia can also be the result of a cornea that is too curved or a lens that is too thick. For some, myopia may be caused by a combination of these problems.

What causes the eyeball to grow too long isn't completely known, but NIH-funded researchers are exploring several possibilities. For many people, myopia appears to be inherited, so if you have a parent with myopia, you're at increased risk for developing it yourself.

Myopia is becoming increasingly common, both in the U.S. and around the world. The problem is especially prominent among school-age children living in urban areas in some Asian countries. In a study published in 2008, NIH experts found that the number of Americans with myopia increased significantly from the 1970s to the early 2000s. The researchers estimated that at least 33% of Americans are nearsighted.

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A Blurry Worldview – cont.

Researchers are looking to see if and how myopia might be related to a person's sex, age, ethnicity, and environmental exposures – such as sunlight or the amount of time spent doing close-up work. In the past, experts thought that myopia might arise in children who spent too much time indoors reading and writing, which require close-up vision, or from reading in poorly lit rooms. Recent studies, however, suggest that increased myopia in children might instead be related to kids spending less time outdoors. Continued research into how myopia develops will begin to sort out the potential causes and influences.

If distant objects seem out of focus, talk with an eye care professional. He or she can diagnose myopia or other eye problems and recommend options to improve your vision.



References

Prevalence of refractive error in the United States, 1999-2004. Vitale S, Ellwein L, Cotch MF, Ferris FL 3rd, Sperduto R. *Arch Ophthalmol.* 2008 Aug;126(8):1111-9. doi: 10.1001/archophth.126.8.1111. PMID: 18695106.



My Association Saving Benefits Perks Program!

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4. **Connect:** Share your savings stories and ideas with us at [Facebook.com/Abenity](https://www.facebook.com/Abenity) and [Twitter.com/Abenity](https://twitter.com/Abenity) using **#LifeHasPerks**

NOTICE of ANNUAL MEETING of MEMBERS

The Annual Meeting of the Members of the Med-Sense Guaranteed Association will be held at 16476 Wild Horse Creek Road, Chesterfield, MO on Friday, December 2, 2016 at 2:00 pm CST (3:00 pm EST) for election of Directors and for the transaction of such other business as may properly come before the meeting of any adjournment thereof.

The above notice is given pursuant to the By-Laws of the Association.

PROXY

Med-Sense Guaranteed Association December 2, 2016 Annual Meeting of Members THIS PROXY IS SOLICITED ON BEHALF OF MED-SENSE GUARANTEED ASSOCIATION

The undersigned member of the Med-Sense Guaranteed Association does hereby constitute and appoint the Secretary of the Med-Sense Guaranteed Association, the true and lawful attorney(s) of the undersigned with full power of substitution, to appear and act as the proxy or proxies of the undersigned at the Annual Meeting of the Members of the Med-Sense Guaranteed Association and at any and all adjournments thereof, and to vote for and in the name, place and stead of the undersigned, as fully as the undersigned might or could do if personally present, as set forth below:

- (1) FOR (), or to () WITHHOLD AUTHORITY to vote for, the following nominees for Board of Directors: Don Breckenridge Jr., Bart Bouchein, and John Clark.
- (2) In their discretion, the proxies are authorized to vote upon such other business as may properly come before the Meeting.

This proxy when properly executed will be voted in the manner directed by the undersigned member. If no direction is made, this proxy will be voted for the election of directors and officers.

DATED: _____, 2016.

Signature _____

Name (please print) _____

Please date and sign and return promptly to MSGA, 16476 Wild Horse Creek Road, Chesterfield, Missouri 63017 whether or not you expect to attend this meeting. The Proxy is revocable and will not affect your right to vote in person in the event that you attend the meeting.

Chesterfield, Missouri

October 31, 2016

Date

MSGA Nursing Scholarship Program

The Board of Directors of the Med-Sense Guaranteed Association has selected the St. John's Hospital School of Nursing as the recipient of its 2016 Nursing Scholarship Program Award. The St. John's Hospital School of Nursing was selected to receive scholarship funds of \$25,000 to provide scholarships to nursing students in their final year of study in the nursing program.

This nursing scholarship program helps in multiple ways; firstly, it provides students the ability to graduate when they have exhausted other avenues of receiving financial assistance. Second, the surrounding communities gain licensed medical professionals to help address the health and medical needs of the area.

The Association will be looking to provide an additional Nursing Program Scholarship in 2017 to a school which meets certain criteria, and is located in a medically underserved region or economically challenged area. If you have suggestions or recommendations, please email your comments to the Association at info@medsensemembers.com. Watch for updates on this program in upcoming months, as well as updates on individuals who have been positively affected by this scholarship program. The Association will continue to provide member scholarships to students in need of assistance.

Individual Scholarship Recipients

In addition to the Nursing Scholarship Program Award, Med-Sense Guaranteed Association has awarded 44 individual scholarships to the following 2016 recipients:

NAME	SCHOOL	NAME	SCHOOL
Rebecca Ann Alby	Ashford University	Jazmine Nairn	Concord University
Sharon Alston	Walden University	Emily Nasett	Columbia College of Nursing
Jamie Ballard	Western Governors University	Eric Niyokwizera	Richland College
Mark Berman	University of Pittsburgh	Jenifer Orndorff	Bluffton University
Torian Burns	University of Central Arkansas	Christine L. Perkumas	Metropolitan Community College
Chetan Dhir	University of Texas at Austin	Julianne Persa	University of Central Oklahoma
Chaz Dominguez	DePaul University	Chelsa Powers	Sinclair Community College
Alexandra Emery	Indiana State University	Paul Murianki Ragwa	Concordia Theological Seminary, Fort Wayne, Indiana
Feroz Manuel Quirino Fernandes	DePaul University	Suzette Ryan	College of Staten Island
Monicka Fosnocht	Bastyr University, California	Dustin Chad Sampson	East Central University
Brandon Geppert	California University of Pennsylvania	Lauren Smith	Texas A&M University-Commerce
Alyssa Gift	Stephen F. Austin State University	Terri Smith	North Central University
Kristen Gilchrest	Cape Cod Community College	Noel Struening	Mesa Community College
Chase Hampson	Lindenwood University-Belleville	Anna Sullivan	Houston Community College
Paris N. Hickman	Virginia State University	Brooke Tokes	Bowling Green State University
Uriel Smith-Jackson	Coastal Carolina University	Justin M. Tokes	Kent State University
Qjonte Johnson	Arizona State University	Troy Lawrence Trinidad	Navarro College
Daniel Lavelle	Johns Hopkins University – School of Education	Ahofolau Uhatafe	Galen College Of Nursing
Isaiah Lawrence	Aiken Technical University	Anna Elizabeth Wehr	Truman State University
Carlos A. Lopez	Arizona Western College	Hana Weldesenbet	University of Maryland, Baltimore
Melissa Lopez	Arizona Western College	Edward J. Williams III	University of Florida
Josie Martinez	Jersey College School of Nursing	Haley A. Wollmuth	South Dakota State University

Focusing on Fibromyalgia

A Puzzling and Painful Condition

You've probably heard of fibromyalgia, but you may not know what it is. Fibromyalgia is a long-term (chronic) pain condition that affects 5 million or more Americans ages 18 and older. For unknown reasons, most people diagnosed with fibromyalgia are women, although men and children also can be affected. People with certain disorders, such as rheumatoid arthritis or lupus, may also have fibromyalgia, which can affect their disease course and treatment.

Fibromyalgia can take a powerful toll on health, well-being, and quality of life. "People with fibromyalgia suffer from severe, daily pain that is widespread throughout the body," says Dr. Leslie J. Crofford, an NIH-supported researcher at Vanderbilt University. "Their pain is typically accompanied by debilitating fatigue, sleep that does not refresh them, and problems with thinking and memory."

People with fibromyalgia often see many doctors before finally receiving a diagnosis. The main symptoms – pain and fatigue – overlap with those of many other conditions, which can complicate the diagnosis.

"To make things more challenging, there are no blood tests or X-rays that are abnormal in people with the disorder," says Crofford. With no specific diagnostic test, some doctors may question whether a patient's pain is real. "Even friends, family, and coworkers may have a difficult time understanding the person's symptoms," Crofford says.

A doctor familiar with fibromyalgia can make a diagnosis based on the criteria established by the American College of Rheumatology. Diagnostic symptoms include a history of widespread pain lasting more than 3 months and other symptoms such as fatigue. In making the diagnosis, doctors consider the number of areas throughout the body where the patient had pain in the past week, and they rule out other causes of disease.

What causes fibromyalgia isn't fully understood. Many factors likely contribute. "We know that people with fibromyalgia have changes in the communication between the body and the brain," Crofford says. These changes may lead the brain to interpret certain sensations as painful that might not be bothersome to people without the disorder.

Researchers have found several genes that may affect a person's risk of developing fibromyalgia. Stressful life events may also play a role.

Fibromyalgia isn't a progressive disease, so it doesn't get worse over time and may even improve. It's never fatal, and it won't harm the joints, muscles, or internal organs.

Medications may help relieve some – but not all – symptoms of fibromyalgia. "Drug treatments by themselves don't result in remission or cure of fibromyalgia," says Crofford. "We've learned that exercise may work as well as or better than medications. In addition, therapies such as tai chi, yoga, and cognitive behavior therapy can also help to reduce symptoms."

People with fibromyalgia often have the best results when treated with multiple therapies. "It's critically important for health care providers to help patients develop an



understanding of fibromyalgia, and to provide realistic information about treatments, with an emphasis on using exercise and other physical therapies in conjunction with medications," Crofford says.

Crofford and her colleagues are exploring whether a treatment called TENS (transcutaneous electrical nerve stimulation) can help people with fibromyalgia exercise more comfortably and reduce pain. She and other NIH-funded teams are also seeking markers of fibromyalgia in the blood that might ultimately lead to more targeted and effective treatments.

See "Feeling Better With Fibromyalgia" on the back page...

SAFETY

Beware Winter's Hidden Perils



In the winter months, some safety hazards are more obvious than others. Be on the lookout for these dangerous conditions:

- Carbon monoxide poisoning can often be mistaken for the flu – achiness, headache, and nausea. The gas is odorless and colorless and can affect children before it affects adults. Check your furnace and other gas-, coal-, oil-, or wood-burning appliances to make sure they aren't threatening your safety.
- Wear bright or reflective clothing when outside, and be careful when walking near snow piles and drifts that may obscure your view or the view of a vehicle. Sliding and skidding vehicles may not be able to avoid hitting someone.
- Frostbite can strike in a very short time, especially with children. That's because they lose body heat quickly, sometimes in as little as 20 minutes. Dress kids warmly, but don't overbundle. That can cause sweating, which speeds the loss of body heat. Also, discourage kids from eating snow, because it lowers body temperature, which can decrease resistance to frostbite.

FINANCE



Teach Your Children Money Management

One of the reasons parents give children allowances is to help them learn how to manage money. But for it to be a truly effective teaching tool, parents need to spell out what the allowance will cover, how it can be spent, the consequences of overspending, and how much should be saved or given to charity.

Encourage planning. When deciding how much allowance should be, give enough to encourage saving or charitable giving. But be careful not to give too much. If the kids can buy anything they want, the allowance fails to teach them how to prioritize and set goals.

Set up a payday. Try choosing a day early in the week to encourage kids to plan ahead for weekend expenses.

Set limitations and guidelines. If you don't want them to buy certain things, require that they consult you before making purchases over a specific amount, like \$15.

Expect mistakes. Children will probably overspend at first. Don't get angry. Help the child correct mistakes and learn from them.

Don't link the allowance to chores. If allowance is "payment" for chores, children can too easily decide to skip their chores and accept not getting any allowance, which defeats the purpose.



Membership Services Office
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For more information, visit: www.newsinfo.nih.gov*

Feeling Better with Fibromyalgia

- **Get enough sleep.** Getting the right kind of sleep can help ease pain and fatigue. Discuss any sleep problems with your doctor.
- **Exercise.** Research has shown that regular exercise is one of the most effective treatments for fibromyalgia.
- **Try a complimentary health approach.** Practices such as tai chi, qi gong, yoga, massage therapy, and acupuncture may help relieve some symptoms.
- **Consider medicine.** Talk to your health care provider about an approved medication for treating fibromyalgia.

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