



Reducing the Risk of Heart Attack

INTERVENTION

RISK REDUCTION

Quit smoking.

→ 70%

5 years after quitting, up to 70 percent lower risk compared to current smokers

Reduce blood cholesterol level.

→ 60%

2 to 3 percent decline in risk for each 1 percent reduction in blood cholesterol. Reductions in cholesterol average 10 percent with diet therapy and can exceed 20 percent with drug therapy.

Treat high blood pressure.

→ 60%

Combined diet and drug therapy can lower blood pressure substantially, leading to as much as a 60 percent risk reduction.

Maintain ideal weight.

→ 55%

Up to 55 percent lower risk for people who maintain ideal body weight compared to those who are obese

Exercise regularly.

→ 45%

45 percent lower risk for people who maintain an active rather than a sedentary lifestyle

Drink an occasional glass of wine or beer.^a

→ 45%

Up to 45 percent lower risk for people who consume small-to-moderate amounts of alcohol; believed to promote high-density lipoproteins, a form of “good cholesterol” that reduces “bad cholesterol”

Take low-dose aspirin.

→ 33%

Up to 33 percent lower risk for people who take 162 mg (½ tablet) daily or every other day; reduces the likelihood of blood clots (should be medically recommended; long-term use can have serious side effects)

Reduce hostility and other forms of psychological stress.

Extent of risk reduction not yet known.

Source: American Heart Association, 2002; Harpaz et al., 1996; Rimm, 1996.

^aRecall from Chapter 13 that heavy alcohol use increases the risk of cardiovascular disease.

Workplace

Assist students with young children in finding off-campus child care.
Value and encourage educational efforts.
Accommodate work time to class schedules.

confidence building and assertiveness, and help adjusting to styles of learning that are at odds with their cultural background. One Chinese returning student noted that she found criticizing ideas and arguing with her professors difficult because Chinese students are taught to respect, not to disagree with, their teachers.

The Caregiving Concerns table above suggests ways to facilitate adult reentry to college. When support systems are in place, most returning students reap great personal benefits and do well academically. They especially value forming new relationships, sharing opinions and experiences, and relating subject matter to their own lives. And their greater ability to integrate knowledge leads to an enhanced appreciation of classroom experiences and assignments. Yet another benefit of adult students in college classes is intergenerational contact. As younger students observe the capacities and talents of older individuals, unfavorable stereotypes of aging decline.

In previous chapters, we have seen that education transforms development. It continues to do so in middle adulthood. After finishing her degree, Anya secured a position as a parish nurse with creative opportunities to counsel members of a large congregation about health concerns. Education granted her new life options, financial rewards, and higher self-esteem as she reevaluated her own competencies (Redding & Dowling, 1992). Sometimes, the revised values and self-reliance forged by education spark change in other

spheres of life, such as a divorce or a new intimate partnership (Esterberg, Moen, & Dempster-McClain, 1994). In any way too, returning to school can powerfully reshape the course.

Ask Yourself

REVIEW

Considering the influence of vocational and educational experiences on midlife cognitive development, evaluate the saying “You can’t teach an old dog new tricks.”

APPLY

Marcella completed one year of college in her twenties. Now, at age 42, she has returned to earn a degree. Plan a set of experiences for Marcella’s first semester that will increase her chances of success.

CONNECT

Most high-level government and corporate positions are held by middle-aged and older adults rather than by young adults. What cognitive capacities enable mature adults to perform these jobs well?