Back Pain? Don’t Assume It’s a Disc.

A bulging disc is a common diagnosis, but it may not be the source of the pain.

Most people, about 80 percent according to the National Institutes of Health, will experience back pain at least once in their lives. The lower back (lumbar spine) is the most common site of soreness. And it’s an equal opportunity pain—affecting both men and women equally. It can occur suddenly, due to accident or injury. Or it can be a slowly brewing storm, taking years to develop. Age can be a risk factor, due to changes in bones, tissues and muscles of the spine.

But, whether you’re young or old, a bulging (herniated) disc is often blamed as the culprit, but just because an intervertebral disc is bulging does not necessarily mean it’s causing pain.

“As common as back pain is, it’s an elusive problem,” explains orthopaedic spine surgeon A.N. Shamie, MD, Professor & Chief, Orthopaedic Spine Surgery UCLA School of Medicine. “Wear and tear is ubiquitous on imaging, but imaging is not the holy grail. You have to treat the patient, not the MRI.”

Indeed, studies have shown that disc herniation is common in people who don’t have any pain symptoms. In one study, researchers performed MRIs on people who never had low back pain. Of those who were over age 60, about 57 percent of the scans revealed abnormalities (36 percent with herniated discs, and 21 percent with spinal stenosis). And yet, there was no pain reported by the study subjects.

This is not to say that disc herniation has nothing to do with back pain. But finding the actual source of pain is a challenge because the spine is, after all, the central meeting point of nerves, an intricate array of bones, and the home to the spinal cord. Though a typically strong and flexible assembly, the spinal column is constructed of many parts. The possibilities for malfunctions (and hence pain) are varied and numerous. Finding the cause of back pain is often a matter of exclusion, says Dr. Shamie, meaning that if it’s not the disc, it may be a joint or nerves. One method of identifying the source of pain is to inject a pain-relieving medication into the suspected joint and if that pain is relieved, the culprit may have been found.

Intervertebral Disc Degeneration

The spinal column, also known as your backbone, is a flexible structure consisting of vertebral bones that are linked by muscles, ligaments, and fluid-filled rubbery discs. These discs connect and cushion the bones, acting like shock absorbers as we walk, twist, side bend, and perform other physical movements. With age, the discs can start to dry out, making them less shock absorbent and less stabilizing of the vertebrae above and below. Trauma (e.g., vehicle collisions, sports injuries, falls) can also injure discs.

As discs degenerate and lose height, Continued on page 7
Antibiotics May Not Always be Appropriate for Seniors with UTIs

In a new research paper published in the Journal of the American Geriatrics Society, Thomas E. Finucane, MD, of the Johns Hopkins Geriatrics Center at Johns Hopkins in Baltimore, suggests that prescribing antibiotics for urinary tract infections (UTIs) may often be avoided among older adults. According to the paper, a UTI diagnosis can sometimes be applied to older adults who have vague symptoms, such as changes in the odor or color of urine. Antibiotics don’t usually benefit these patients. Dr. Finucane explains that microbiome studies, which examine the benefits and harms caused by the billions of organisms that naturally live in the human body, suggest that UTI treatment with antibiotics may be more harmful than we previously thought. Researchers now know that everyone’s urine contains bacteria and viruses, for example. These organisms are usually helpful for overall well-being. Disrupting the natural balance of organisms, as antibiotics do, can cause more harm than good. That doesn’t, however, eliminate the need for antibiotics in certain cases. For example, some people who have invasive bacterial diseases, and those who are about to undergo bladder or urinary tract surgery, very much need antibiotics. If you think you have a UTI, or if you’re currently using an antibiotic to treat a UTI, it’s important to speak with a healthcare professional before changing your care plan.

New Biological “Battery” Could Lead to Longer-lasting Pacemakers

Researchers from UCLA and the University of Connecticut have designed a new bio-friendly energy storage system called a biological supercapacitor, which operates using charged particles, or ions, from fluids in the human body. The device could lead to longer-lasting cardiac pacemakers and other implantable medical devices. Pacemakers—which help regulate abnormal heart rhythms—and other implantable devices have saved countless lives. But they’re powered by traditional batteries that eventually run out of power and must be replaced, meaning another painful surgery and the accompanying risk of infection. Also, batteries contain toxic materials that could endanger the patient if the batteries leaked. The researchers propose storing energy in those devices without a battery. The supercapacitor they invented is charged by using electrolytes from biological fluids like blood serum and urine, and it would work with another device called an energy harvester, which converts heat and motion from the human body into electricity—in much the same way that self-winding watches are powered by the wearer’s body movements. The electricity the body produces is then captured by the supercapacitor. “Combining energy harvesters with supercapacitors can provide endless power for lifelong implantable devices that may never need to be replaced,” says Maher El-Kady, a UCLA postdoctoral researcher and a co-author of the study. The research was supported by the National Institutes of Health’s National Institute of Biomedical Imaging and Bioengineering, and the NIH’s National Institute of Environmental Health Sciences.

Walk Test as Possible Early Predictor of Dementia

Walking while performing a cognitively demanding task may predict progression to dementia and eventually lead to earlier diagnosis, new research suggests. Geriatrician Manuel Montero-Odasso, MD, a scientist at St. Joseph’s Health Care London, led the “Gait and Brain Study.” The study included more than 100 seniors with mild cognitive impairment (MCI). Participants were followed for six years and were assessed bi-annually. Researchers asked participants to walk while simultaneously performing a cognitively demanding task, such as counting backwards or naming animals. Those individuals with MCI that slow down more than 20 percent while performing a cognitively demanding task are at a higher risk of progressing to dementia, according to the researchers. “While walking has long been considered an automatic motor task, emerging evidence suggests cognitive function plays a key role in the control of walking, avoidance of obstacles, and maintenance of navigation,” says Dr. Montero-Odasso. “We believe that gait, as a complex brain-motor task, provides a golden window of opportunity to see brain function.” Researchers hope to combine this early detection method with promising new medications to slow or halt the progression of MCI to dementia.
Losing driving privileges can be devastating. But a dementia diagnosis does not inherently mean a person must give up the car keys immediately. In the very early stages, some people will be able to continue driving without problems. As time goes on, however, changes in the brain can make driving dangerous.

“Dementia is a neurodegenerative disease, so it affects several abilities,” explains Zaldy Tan, MD, medical director of the UCLA Alzheimer’s and Dementia Care Program. “These patients also may have reduced awareness of their own driving safety.”

A person with dementia may become disoriented and forget how to navigate to familiar places, such as a nearby grocery store, senior center, and home. GPS systems aren’t typically helpful because of the complications in using them. The disease also affects visual-spatial abilities, making it difficult to discern distances from other vehicles, pedestrians, and objects along the roadside.

“A driving assessment can provide objective information on a patient’s safety behind the wheel,” says Dr. Tan. “It can provide assurance that the person is safe to drive or an imperative to stop driving for the patient’s and public’s safety.”

Assessing Driver Ability

Driving assessments should be conducted by trained staff at a state motor vehicle department. Physicians can help family members and caregivers decide when to begin the assessment process. A physician should evaluate the patient’s physical condition, cognitive skills, and medication use, and take a thorough driving history, including:

- how often the patient drives, where, when, and why
- types of roads used and familiarity with them
- types of traffic conditions
- caregivers’ observations of driving skills
- accidents, near misses, traffic tickets

According to the American Academy of Neurology, patients and their families should be informed when dementia advances to a point where crash rates are known to increase. That is the time to stop driving. If dementia impairments are still slight, driver safety problems can and do exist and a referral to a trained examiner for evaluation of driver skills should be considered. Re-evaluation every six months is recommended.

Virtually all states have established policies for the identification of drivers with physical or mental impairments. Most states provide only for voluntary physician reporting, but a few states have mandatory reporting laws. For example, Delaware, New Jersey, and Nevada require reporting for epilepsy. California and Utah also mandate reporting of dementia and other cognitive impairments.

“A driving assessment should be performed whenever there is concern for a person’s driving ability,” says Dr. Tan “The earlier it is done, the more time a loved one will have to convince the person to give up the car keys and prepare for alternative transportation.”

Transportation Resources

There are resources that can help a person with dementia get what they need and where they want to go. Food delivery services such as Meals on Wheels, Peapod, and some local grocers provide home food delivery. Family, friends, and other caregivers can organize a schedule to take a loved one to and from social events and other appointments. In addition to taxi services, there are special transportation services for older adults, and some may be offered through a local senior community center. Find more transportation options at this Alzheimer’s Association web page http://www.communityresourcefinder.org

“The risk of motor vehicle crashes in people with dementia is up to eight times greater compared to people who don’t have dementia,” says Dr. Tan. Assessing driving ability early and periodically, and knowing transportation options can go a long way toward your loved one’s acceptance of a new lifestyle.
Discover the Unique Flavors of Ancient Grains

These easy-to-incorporate gluten-free grains transform ordinary dishes into highly nutritious and exotic dining experiences.

Ancient grains have steadily been making their way into crackers, breads, and other commercially-made products. Unlike corn, wheat, and rice, which have been selectively bred and modified, these grains remain unchanged for the thousands of years they have been around, and many are gluten-free. Their nutrient value is high: containing protein, calcium, iron, B vitamins, fiber and other vitalizing micronutrients, such as copper, phosphorus, and magnesium. Their flavor profiles offer an exciting opportunity to transform tried-and-true dishes into culinary adventures.

As with other grains, using the whole grain provides the most nutrition. These versatile grains can be used in a variety of dishes. Gluten-free buckwheat (actually a seed), has a slightly peppery flavor and can be an interesting substitute for rice.

“Buckwheat is nutty, chewy and packed with fiber and protein,” says senior dietitian Dana Hunnes, RD, PhD, UCLA Medical Center. “It’s really good when boiled in vegetable broth, and makes soups very creamy.”

Many grocers offer ancient grains as flours and whole grains. Experiment with a variety of them to expand your culinary palate as well as your nutritional intake.

The Goodness Inside

Quinoa originated in Central America, where it was a staple of the Incas. Technically a seed, gluten-free quinoa is a complete protein, as well as a source of iron, zinc, phytoneutrients, and omega-3 fatty acids. Preparation is fast and easy: Rinse quinoa thoroughly, bring a 2-to-1 ratio of liquid to quinoa to a boil, and simmer for 15 minutes. Turn off the heat, fluff with a fork, and leave covered on the stove for 5 to 10 minutes, until excess water is absorbed. The finished product should be fluffy and slightly translucent. White quinoa is the most mild-tasting, while red and black quinos have a more pronounced, earthy flavor.

Amaranth was eaten in Central and South America for several millennia—the Aztecs included it in their religious ceremonies. Similar to ground cornmeal in texture and grain size, amaranth has a sweet flavor and becomes slightly gelatinous when prepared. Add a few tablespoons of amaranth to thicken soup or stew, or use it to make a satisfying breakfast porridge (see recipe). Amaranth is an excellent source of calcium, providing three times that of other grains. It also contains potassium and phosphorus.

Teff hails from Ethiopia and is used to make their spongy bread called injera. “The benefit of teff is that it is high in protein, iron, and fiber,” says Hunnes. “When fermented to make injera, it has a sourdough-like flavor.” Unfermented, the flavor is mild and slightly sweet. Teff flour can be used for breads, cookies, and other baked goods.

Fiber-Rich Grains

Enjoy experimenting with these ancient grains, and know that they add to your daily dose of fiber as well as other important nutrients. The Institute of Medicine of the National Academies recommends that total fiber intake for adults older than 50 should be at least 30 grams per day for men and 21 grams for women. Fiber-rich foods can prevent constipation, and lower your risk of heart disease and diabetes. They also help you feel fuller longer, which can help you lose excess weight.

AMARANTH BREAKFAST BOWL

Ingredients:
- ½ cup dry amaranth
- 1 cup almond milk or coconut milk
- 1 cup water
- 2 Tbsp chopped walnuts, almonds, sunflower seeds, or pecans
- ½ cup diced pear or plum, or pomegranate seeds
- Dash of cinnamon, nutmeg, cloves, or ginger

Steps:
1. Combine amaranth with milk and water in a medium saucepan over medium-high heat; stir occasionally as it comes to a boil, then reduce heat and simmer for 20 to 25 minutes.
2. Add additional water as needed until amaranth resembles porridge.
3. Remove saucepan from heat and allow to stand, covered, for an additional 5 to 10 minutes.
4. Top with any combination of nuts, fruit, and spices desired.

Yield: 2 servings
Nutritional information per serving (including walnuts and pear): 253 calories, 7 g total fat, 1 g saturated fat, 9 g protein, 41 g carbohydrate, 9 g fiber, 5 g sugar, 90 mg sodium
Massage Therapy Can Relieve Pain and Improve Mood

Here’s how to find a good therapist, and get the most from your session.

There is no doubt that a massage feels good and helps you relax. But did you know that there is an abundance of clinical research that shows that massage does more than pamper? It is, in fact, helpful for a wide variety of health issues.

“I recommend massage for both health maintenance and therapeutically to address pain symptoms,” says internal medicine physician Justin Laube, MD, UCLA Center for East-West Medicine. “Massage is also a good option to support stress management, muscle relaxation and improve sleep.”

Many studies, including those from the National Institutes of Health, state that massage can be helpful. Findings show that massage can help relieve chronic low-back pain, neck pain, headache, and osteoarthritis of the knee; it may promote relaxation, and boost mood for cancer patients; and massage is also helpful in improving circulation of the hands, arms, legs, and feet (peripheral circulation) for those with diabetes.

Types of Massage

Some types of massage may be more appropriate for older adults than others. “I recommend that my elderly patients avoid more intense forms of massage, such as deep tissue and Thai massage, unless the provider has worked with elderly patients regularly,” says Dr. Laube. “Some elderly patients are more sensitive to these deeper styles and can have issues from massaging areas with open wounds, osteoporosis, or low muscle mass.”

Therapists often incorporate a variety of techniques into a session, depending on client need. Most will use an unscented cream or oil to help their hands glide across skin. Below are a few of the more common massage modalities.

- **Swedish.** This technique is hallmark by long sweeping strokes and muscle kneading. To help release a tight muscle, slightly more pressure might be applied with fingers, knuckles or elbows. This is typically a lighter pressure massage and good for relaxation and stress reduction.

- **Deep Tissue/Trigger Point Therapy.** Therapists apply deep pressure to “trigger points,” more commonly known as muscle knots. These knots can cause what’s called referred pain to other parts of the body. For example, a knot in your neck can make your arm feel achy. Though a bit painful during treatment, deep tissue and trigger point therapy can release bound-up muscle, bringing relief.

- **Sports Massage.** This modality typically involves deeper pressure as well as pulling the arms and legs to increase flexibility. The session focuses on athletic needs, such as areas of the body that are stressed from repetitive use. It is most useful for those who exercise vigorously and participate in sports regularly.

- **Shiatsu.** This type of bodywork from Japan activates and balances the body’s energy (chi) by encouraging circulation through “meridians,” which are pathways through which energy flows through the body, according to traditional Japanese medicine. Therapists apply gentle pressure to specific points on the body, using their hands, feet, and elbows. Assisted stretching, joint manipulation, kneading and tapping on the body may be part of a session. Unlike the other modalities, shiatsu is administered while wearing light clothing.

Getting the Most from Your Massage

A massage is meant to feel good. Breathing slowly and deeply at the beginning of a session can help you relax more. Communication is a must. A skillful therapist can sense just how much pressure is enough, but should also ask you how it feels. Sometimes it may be a bit uncomfortable until a muscle relaxes, but it should never be teeth-grindingly painful. Tell your therapist if you would like a different pressure, room temperature, or the music changed.

You might be a little sore after a session. Try not to schedule anything that requires much physical or mental exertion afterward. You want to stay in that relaxed state for as long as possible.

In addition to the pain and stress-relieving benefits, massage is an excellent way to get to know, appreciate, and take care of your body. Ask your healthcare provider if massage is right for you.
Move Gracefully and Confidently

Good balance can make everyday activities easier to do. These exercises strengthen and maintain muscles essential for balance.

Which muscles do you need to condition for good balance? Well, all of them. You stand on your legs, and use your arms to maintain balance as you walk. Some exercises, however, are more efficient at building the muscles that maintain good balance because they include the all-important core. “A strong core provides a foundation from which all movement occurs,” explains physical therapist Ellen Wilson, director of therapy services, UCLA Department of Rehabilitation. “If the core isn’t strong, it doesn’t matter how strong the arms and legs are.”

Functional balance is about moving gracefully and confidently in daily life. Simple activities like walking on unstable surfaces such as grass and gravel, or reaching up into a cupboard with ease are among those that require both core strength and balance.

Before Each Exercise
Pull your belly muscles in before you do each exercise. It should feel like a corset wrapping around your body. Another helpful image is to contract your belly as if zipping up a tight pair of pants. You want to hold those muscles in while performing the exercises. It is helpful to exhale at the more difficult part of the exercise, but avoid holding your breath. Also, drawing in holding your breath. Also, drawing in

Quadruped Lift: This exercise is best done on a thick mat or carpeting to provide cushion for the knees. In the quadruped position, align your shoulders over your wrists and your knees under your hips. Knees should also be about six inches apart. Feel all connection points on the floor—hands, knees, shins and feet. Align your neck in a neutral position so that your head is neither hanging down nor arched up toward the ceiling.

The benefits of balance exercises include good posture and coordination (you need the whole body to come together to get the job done). Practice these exercises at least three times per week and you’ll find that your balance will improve in just a few weeks. You may find that your mind is calmer, and more focused, too.

EASY EXERCISES TO HELP STRENGTHEN YOUR CORE MUSCLES FOR BETTER BALANCE ...

QUADRUPED LIFT
- Begin from an all-fours position on the floor.
- Slowly lift your left arm and right leg, hold for five seconds, then return to the starting position.
- Now slowly lift your right arm and left leg, hold for five seconds, then return to the starting position to complete one rep.
- Repeat eight to 10 times, rest, and complete a second set of eight to 10.

SINGLE LEG STAND
- Stand with your feet slightly apart. Keep your left hand on your left hip and hold on to a sturdy chair with your right hand.
- Lift your left leg off the floor, hold for 5 seconds, and then lower your foot to the starting position; repeat 8–12 times.
- Repeat the exercise 8–12 times with your right leg.
- Gradually increase the length of time standing on one leg.

STABILITY BALL ARM/KNEE LIFTS
- Start from a seated position on a stability ball, feet at hip width, arms at sides.
- Lift your right arm upward at the same time you lift your left knee upward.
- Hold for 2–3 seconds; repeat 1–3 times.
- Rest, then perform the same exercise with the left arm and right knee upward.
- Work up to 8–10 lifts, 2–3 sets.
the surrounding bony structures can change positions. This can lead to greater joint compression, which can also cause a disc to bulge. Either of those situations—joint compression or bulging disc—can pinch a nerve, causing pain.

Reducing Disc Degeneration
“The disc is like a car tire: The heavier the car, the more quickly the tire will wear out,” explains Dr. Shamie. “It’s the same with intervertebral discs. Maintaining a healthy body weight, or losing weight if you’re overweight, can reduce pressure on the discs. Also, lifting objects with proper body mechanics can reduce wear and tear.”

In contrast, poor posture, such as when driving, working at the computer or being seated for a long period of time, can all be destructive to discs and joints. Dr. Shamie recommends lumbar support while sitting for long periods to maintain a proper arch in the lower back, as that can relieve the load on the discs. Without the arch, there’s more force and more wear on the lower back discs and joints.

Ergonomics is an applied science that deals with designing and arranging objects and environments to make them align better to the human body. Ergonomic principles can be applied to computer work stations, chairs, as well as how you use your body, such as when lifting heavy objects or opening doors.

Treating Back Pain
There is a lot of research around rehydrating discs with solutions and bioactive materials, and according to Dr. Shamie, some animal studies have shown promise, but none of these treatments have been shown to be clinically viable. “There has been a lot of press about using PRP (platelet-rich plasma) and stem cells, but no data show that these injections will rehydrate the disc,” he says. “I caution patients about doing this because putting a needle in a disc can damage it and its contents.”

Most of the time back pain will resolve on its own with simple at-home treatments such as anti-inflammatory pain relievers, and heat and ice treatments. Soaking in a hot tub with Epsom salts can also be helpful. These salts contain magnesium, which is a natural muscle relaxant. Some gentle stretches, massage or an easy yoga class might bring relief.

If back pain persists for more than a few weeks or gets worse over time, see your doctor. Though many people may fear surgery, it may be the right choice in some circumstances. “Surgery can reduce pain and suffering and improve life,” says Dr. Shamie. He advises consulting with specialists, getting referrals, and obtaining a second opinion. He cautions against big promises and quick-fix laser clinics that guarantee outcomes on the internet and on television and radio commercials. Also, beware of surgeons who use an MRI as the sole rationale for surgery. “Most patients with back pain get better on their own in a few months,” he says.

Exercise to Prevent Back Pain
Back pain is more common among people who are not physically fit. Weak back and abdominal muscles cannot properly support the spine. “Weekend warriors”—people who go out and exercise a lot after being inactive all week—are more likely to suffer painful back injuries than people who make moderate physical activity a daily habit. Low-impact aerobic exercise is especially beneficial for maintaining the integrity of intervertebral discs. If you haven’t exercised in a while, start with just a few minutes of easy walking or swimming. A physical therapist can help you develop a custom plan and ensure you’re doing exercises correctly.
Q Is it true that eating certain foods can reduce the risk of cancer?

A While outcomes about food choices have been correlated to cancer risk, researchers can’t say for sure if it’s only the food that has made the difference—it could, for example, be that the person who eats more healthfully makes other healthy choices (e.g., maintaining normal body weight, exercising, and not smoking). That said, eating fewer processed red meats, especially charred meats, may reduce cancer risk. The chemicals that form when charring or cooking at temperatures above 300 degrees are capable of damaging DNA, which may increase cancer risk. On the flip side, eating more vegetables, especially cruciferous veggies, can help protect cells from DNA damage. These veggies also have anti-inflammatory effects and inhibit tumor blood cell formation, according to some studies. Cruciferous veggies include arugula, broccoli, Brussels sprouts, cauliflower, kale and collard greens. Specific foods aside, obesity is associated with increased risk for several cancers, such as endometrial, esophageal adenocarcinoma, liver, pancreatic, and kidney cancer. Choosing low-calorie whole foods over processed high-calorie ones can help maintain a healthy body weight and reduce risk of cancer and other diseases.

Q We are taking several road trips in the months ahead. Do you have any tips for staying active while traveling?

A Whether traveling by car, train, or plane, it’s important to move your legs periodically. Prolonged sitting can lead to deep vein thrombosis (DVT). These blood clots tend to form in the lower legs, and being stationary allows blood to pool below the knee. DVT can affect otherwise healthy people, so it’s important for everyone to stretch their legs every hour or so. Map out a scenic driving route, if possible, and take frequent breaks to get out and walk around. It’s good for circulation and can help you stay more alert while driving. At your destination, try to maintain your usual fitness routine as much as possible. For example, the National Institute on Aging recommends that if you’re a morning person, do some exercise before going out for the day. If lunchtime is your typical workout time, try to fit in an activity before your meal. Otherwise, unwind with a workout late in the afternoon or early evening. Avoid exercising too close to bedtime, as that can interrupt sleep. Be sure to pack your workout wear, including shoes, clothes, swimsuit, and a refillable water bottle. A separate bag for these items makes it easier to access and use them. Also, props such as flat bands and flexible tubing take up very little space and enable you to do quick stretching and strengthening exercises in your hotel room. When possible, choose walking tours instead of the motorized versions. Place fitness on your daily travel itinerary, and you will be more likely to do it. For 13 easy-to-follow exercises, go to the National Institute on Aging’s webpage: go4life.nia.nih.gov/workout-to-go.

Q I’ve been taking multiple medications for years. Sometimes I just skip a dose and frankly I feel fine, but I suppose this isn’t really wise. I don’t want to insult my doctor, but I’m not sure I really need all these pills.

A It’s best to have an open and honest conversation with your doctor, who is there to help you, not judge you. Many people are overwhelmed by medication management. It’s possible that you may not need all those medications or there may be some better choices that combine several medications into one pill. Take all your pill bottles with you and have a talk. Write down any questions you have and take the list with you. Here are a few questions you might like to ask: Why am I taking this medication, and do I still need it? Is there any way I can simplify my drug regimen? How long do I need to take the medication? What happens if I skip a dose? Your physician should be able to answer these questions and help you determine which, if any, medications can be replaced or eliminated.

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