Faculty present research at American Geriatrics Society Meetings

C. Colon-Emeric, R. Adler, K. Lyles, J. LaFleur, C. VanHoutven, and C. Pieper presented a paper on “Determinants of Osteoporosis Screening in Men” at the annual meeting of the American Geriatrics Society Meetings in Long Beach, California on May 19-21. They concluded that screening for osteoporosis in men is affected by fracture risk factors, co-morbidities, and access to care but not always in expected directions. Greater clarity around osteoporosis screening guidelines is needed.

Rasheeda K. Hall, Richard Sloane, Carl Pieper, and Cathleen Colón-Emeric presented a paper on “Kidney Function and Fracture Risk among Older Male Veterans.” They concluded that among older male Veterans, estimated glomerular filtration rate (eGFR) of < 30 increases fracture risk beyond known fracture risk factors. Older Veterans with mild reductions in eGFR (30-59) may not experience an increase in fracture risk.

Heather Whitson led a session called “Making Sense of Care Options for Sensory Impairment”.

FIRST ANNUAL RESEARCH & EDUCATION RETREAT ANNOUNCED

The first annual Center for the Study of Aging and Human Development Research and Education retreat will be held September 30, 2016 in the Great Hall of the Mary Duke Biddle Trent Semans Center for Health Education from 12:00 PM – 5:00 PM. It will feature three keynote talks on a spectrum of age-related research, but most of the time will be devoted to a poster session where investigators and educators whose work relates to gerontology and geriatrics will have the opportunity to share their work with colleagues. The purpose of the retreat is to promote awareness of aging-related work at Duke and to encourage potential collaborations. This will be done in an informal setting with refreshments available.
I began my career in medical education 21 years ago at Michigan State University (MSU) while still completing my PhD degree in Adult and Continuing Education. My introduction to medical education started with a graduate assistantship where I was given the task to develop an evaluation plan for a Primary Care Faculty Development Program grant. I knew very little about the medical education system but was excited to learn about the profession and how physicians were trained. After the completion of this evaluation plan, I was invited to teach in the program and eventually became a faculty member at the MSU College of Osteopathic Medicine.

As a faculty member, I taught a variety of workshops in the area of teaching and learning in medicine, mentored clinical faculty, and provided feedback to the faculty based on observation of their clinical teaching practice. This experience gave me a great opportunity to learn about the context of medical education and to begin to apply my education expertise in curriculum development, instruction, adult learning, evaluation, and faculty development to academic medicine.

After teaching at MSU for seven and a half years I joined the faculty at The University of North Carolina at Chapel Hill (UNC) in 2012 where I continued similar work as a medical educator in the Office of Educational Development. At UNC I directed a faculty development program for the School of Medicine, chaired/directed the Teaching and Learning branch of the Department of Medicine Federal funded Faculty Development Fellowship Program, and served as a faculty member in the School of Medicine Education Scholars’ Program and as a member of the School of Medicine Curriculum Committee.

In 2005 I joined Duke University as a Medical Educator in the Office of Graduate Medical Education (GME) and Assistant Professor in the Department of Medicine, Division of Geriatrics. As a Medical Educator in the GME office, I directed faculty development programs for Program Directors and mentored and guided them in improving the quality of education and evaluation of Duke ACGME programs. This one-on-one mentoring consisted of assisting Program Directors to assess their programs in order to ensure that they were following ACGME guidelines/requirements and that the programs were providing effective learning experiences for trainees.

GEORGE SELECTED FOR FEW-GLASSON ALUMNI SOCIETY

I am very pleased to announce that our own Linda George has been selected as one of three inaugural inductees into the Duke Graduate School’s Few-Glasson Alumni Society. The society was established this year in celebration of The Graduate School’s 90th anniversary (https://gradschool.duke.edu/few-glasson).
EDITORIAL*
Quack Cures For Arthritis

Half of all people over 65 have some form of arthritis. There are over 100 different forms of arthritis and many different symptoms. The symptoms may go away by themselves but then come back weeks, months, or years later.

This may be why many people with arthritis try quack cures or remedies that have not been proven to be effective. Some of these “remedies” may actually be dangerous or harmful, such as snake venom. Others such as copper bracelets and WD-40 are harmless but also useless. The safety of many quack cures is unknown.

How can you tell if a “remedy” is unproven or fraudulent? Here are some warning signs that should make one suspicious or wary:

- Claims that the treatment works for all types of arthritis and other diseases too.
- The main support for the claims are from testimonials.
- The “scientific” support comes from only one research study.
- The label has no directions for use.
- The label has no warnings about side effects.

For more information go to www.arthritis.org or consult your health provider.

*The opinions in this editorial are those of the editor and do not necessarily reflect Center policy.

Music and Memory in the Aging Brain

Heidi White, M.D., Associate Professor of Medicine and Senior Fellow in our Center, led a Bass Connections Project Team who studied Music and Memory in the Aging Brain. The team examined the effectiveness of daily music listening on the behavioral symptoms of patients with dementia and the perceptions of caregiver burden before and after the personalized music intervention. The team worked with five pairs of patients and caregivers who live together at home in Durham. Study findings showed a reduction in Caregiver Burden Inventory scores in three of the five caregivers. Some caregivers reported that their loved ones were less agitated immediately after listening to the music, and some said they found the intervention enriching and that it improved quality of life by helping to increase interaction.

Bass Connections provides both graduate and undergraduate students with greater exposure to inquiry across the disciplines, partnership with unlikely fellow thinkers, sustained mentorship in teams and the chance to experience the intersections of the academy and the broader world. For more information go to bassconnections.duke.edu.

SLOGAN FOR THE DAY:
It’s never too late to learn!
As a faculty member in the Department of Medicine, Division of Geriatrics, I have been involved in a variety of educational activities including: designing curricula with fellows and faculty, directing faculty development programs, teaching and mentoring interprofessional faculty and fellows on curriculum development, teaching, evaluation, and educational research, serving as a faculty member in the Education Scholar branch of the Department of Medicine Faculty Academy, and conducting educational research. In this role, I have also served as Education Director for two major education grants including the Donald W. Reynolds Faculty Development Fellowship Program to Advance Geriatrics Education (FD-AGE) (http://careinaging.duke.edu/facultydevelopment) and the Duke Geriatrics Education Center (http://geriatrics.duke.edu/). As part of the Reynolds Program, I have designed, implemented, and evaluated mini-fellowship programs in Medical Student Education in Geriatrics, Long-Term Care Education, Palliative Care Education, Subspecialties Education in Geriatrics (cardiology, oncology, infectious diseases and gastroenterology), Graduate Medical Education in Geriatrics, and Leadership and Scholarship in Geriatrics Education, for over 200 educators from institutions and programs across the US. I also mentored participants/scholars and collaborated with several of them in scholarly activities, including conference presentations and publications. Evaluation data of the Duke FD-AGE program has recently been summarized in an article published in the Journal of the American Geriatrics Society (J Am Geriatr Soc. 2015 Dec;63(12): 2580-2587). The Reynolds grant also supported the establishment of a monthly faculty development program, which I direct in the Division of Geriatrics, entitled the Geriatrics Excellence in Teaching Series (GETS), (J Am Geriatr Soc. 2008 Apr;56(4):750-6.) Through GETS, I have introduced our faculty and fellows to innovative teaching and learning strategies and concepts in adult learning, education principles, and professional development. This program is now in its 12th year.

As the Education Director of the Geriatric Education Center, I worked with interprofessional faculty in the design of an interprofessional course entitled “Improving Quality in Transitions of Care for the Elderly,” for medical, physical therapy, physician assistant, nursing, and pharmacy students. My role in the course design was to ensure the incorporation of interactive/active learning teaching strategies, such as interactive lectures, small group exercises, video clip reviews, case discussion, practical clinical experiences, and mentoring of the learner. I also led the development of the course evaluation process, which included designing the instruments for evaluation of the course, as well as the processes used for data collection, data analysis, and reporting. With the renewal of this grant in 2010, our interprofessional faculty developed a three part Workshop Series on Improving Care through Interprofessional Collaborative Practice, for health care teams. These workshops are based on the Core Competencies for Interprofessional Collaborative Practice published by the Interprofessional Education Collaborative (IPEC). The workshops focused on four key domains of teamwork function: ethics and values, roles and responsibilities, communication, and teamwork. I had the opportunity to be involved in the design, teaching, and evaluation of these workshops.

Recently I have joined the faculty in the Duke Physician Assistant Program, where I serve as Senior Education Specialist. In this role I collaborate with the PA faculty in enhancing the PA Program curriculum, its implementation and evaluation, and the development of education scholarship. Since joining the program, Karen Hills (PA Program Director) and I have been awarded a HRSA Training Enhancement Grant of approximately $2.3 million. The five-year project, “Transforming Health Care through Enhanced Clinical Team Training” aims to “engage learners and faculty in collaborative projects to improve population health through practice- and community-based interprofessional quality improvement (QI).” Medical doctor (MD), nurse practitioner (NP), and physician assistant (PA) student triads will work with clinical preceptors and program faculty on QI projects in an innovative team-based clinical learning model that addresses the crisis in access to clinical learning. Didactic curricula will address population health, QI, cultural competence, health information technology, and community engagement.

I am currently an Associate Professor in the Department of Medicine and Senior Fellow at the Duke Center for Aging and Human Development. I completed my graduate studies (MA and PhD) in education at Michigan State University. My journey as an educator in medical education has been one of the best learning experiences of my life. I never imagined that a graduate assistantship would lead me into a career in medical education. However, I am glad that it did and I look forward to continue learning, growing, teaching, and equipping clinician educators to train the next generation of health care providers.
FREQUENTLY ASKED QUESTIONS*
Can old people still enjoy sex?

“I’m not as good as I once was, but I am still good once as I was.”
– Anonymous

The majority of people past age 65 continue to have both interest in and capacity for sexual intercourse and masturbation. Most report that sex after age 65 is as satisfying or more satisfying than when they were younger. This may be because they no longer fear pregnancy (“Over the hill and off the pill”), have more time for leisurely love making, are not worried about interruptions from children, are not worried about their career, have learned how to be better lovers, etc. Frequency of sexual intercourse is mainly controlled by the availability of a partner, but many of those without a partner continue to have orgasms through masturbation. Furthermore, cuddling and caressing can continue to be delightful, with or without intercourse.

*Adapted from Palmore, Older Can Be Bolder (Amazon, 2011).

LONG TERM SERVICE AWARDS
The following members of the Center on Aging were presented with awards on July 15th for their long term service.

Liza Genao, MD ................. 5 Years  
Shelly MacDonald, MD ............. 5 Years  
Bobbi Matcher, MSW, MHA ....... 5 years  
Sue Doyle ........................... 10 Years

Carl Pieper, D.P.H. ............. 25 years  
Kenneth Schmader, MD ........ 30 Years  
Harvey Jay Cohen, MD ......... 45 Years

Congratulations to all and thank you for your years of dedicated service!

IN THE NEWS
Miriam Morey, PhD, Professor of Medicine and Senior Fellow at our Center, was quoted by the Wall Street Journal on August 30 as saying, “We should consider measuring these things (balance and chair tests) over the full life span and not assume that these are problems of the aged, but rather a problem of aging.” She was referring to the findings of a physical performance study published in the July issue of the Journal of Gerontology: Medical Sciences, which studied 775 people from their 30s to over 90. The participants took five functional tests measuring strength, balance, and endurance. The researchers were surprised to find a marked decline in performance on the balance and chair test starting when participants were in their 50s. Lower-body, core and postural strength are especially critical, said Katherine S. Hall, assistant professor of medicine at Duke and first author of the study. “The earlier you start an exercise program the better.”

The study was titled “Physical Performance across the Adult Life Span Correlates with Age and Physical Activity.” The authors were K. Hall, H. Cohan, C. Pieper, G. Fillenbaum, W. Kraus, K. Huffman, M. Cornish, A. Shiloh, C. Flynn, R. Sloan, L. Newby, and M. Morey.
Welcome New Postdoctoral Researchers

We have six new postdoctoral research fellows starting this summer.

Noah Snyder-Mackler, Ph.D., comes to the Duke Aging Center from the University of Pennsylvania where he earned his Ph.D. in Psychology. His dissertation research examined the social and genetic factors that are associated with affiliative social behaviors (i.e., “friendships”) in a wild nonhuman primate. More recently, he has been a postdoctoral researcher under Dr. Jenny Tung at Duke, where he studies how social adversity “gets under the skin” to negatively impact health. His mentors during the fellowship are Professor Harvey J. Cohen, Director of the Aging Center, and Professor Jenny Tung of Evolutionary Anthropology. In his research, Dr. Snyder-Mackler will use animal models to understand how strong social relationships might improve individual’s reserve and resilience to stressors in old age.

Sehwon Koh, Ph.D. came to Duke University from North Carolina State University where he earned his Ph.D. in Genomics. He was mentored there by Dr. Jorge A. Piedrahita, a director of the comparative medicine institute. His primary mentor during his Duke fellowship is Cagla Eroglu, Ph.D., associate professor of cell biology, and his co-mentor is Dr. Harvey J. Cohen, Director of the Duke Aging Center. The goals of Dr. Koh’s research are to understand the cellular and molecular mechanisms that drive age-dependent neurodegeneration and to develop regenerative strategies that target these diseases.

Marianne Chanti-Ketterl, M.D., Ph.D., M.S.P.H. comes to the Duke Aging Center from the University of South Florida where she earned her Ph.D. in Aging Studies. Her dissertation was entitled, “Lipoproteins and Health Outcomes: Cognitive and Physical Function in Older Adults.” Prior to this, Dr. Chanti-Ketterl earned an M.D. from Universidad Internacional de las Americas in Costa Rica and an MSPH (concentration in epidemiology) from the University of South Florida. Her primary mentor is Professor Brenda Plassman, Ph.D. Her secondary mentor is Professor Deborah T. Gold. Both hold appointments in the Department of Psychiatry & Behavioral Sciences. Dr. Chanti-Ketterl’s research will focus on the association between environmental factors and Alzheimer’s disease using data from the Agricultural Health Study of Memory and Aging.
Welcome New Postdoctoral Researchers

Kezia Scales, Ph.D., earned her Ph.D. in Sociology from the University of Nottingham and an M.Sc. in Social Policy from the University of Oxford. Her research interest is long-term care for older people, with a special interest in unlicensed nursing staff and dementia care. Prior to joining the Aging Center, Dr. Scales conducted postdoctoral research at the School of Nursing at Duke University (2015-16). Dr. Kirsten Corazzini, Associate Professor in the Duke University School of Nursing, is her primary mentor in the Aging Center. Dr. Scales will conduct a preliminary study of short-term neuropsychiatric symptom trajectories of nursing home residents with dementia.

Candace S. Brown, Ph.D., M.A.G., M.Ed. comes to the Duke Aging Center from Virginia Commonwealth University where she earned her doctorate in Health Related Science with a concentration in Gerontology. Her dissertation, entitled, “Motives for Participation in Triathlons among Midlife to Older Black Women: A Mixed Method Study,” was inspired by her own journey as a triathlete. Dr. Brown’s primary mentor is Dr. Miriam Morey who founded and directs the GeroFit Program. Dr. Deborah T. Gold, Professor of Medical Sociology, will be her secondary mentor. Dr. Brown’s three part, mixed methods study will seek to understand the motives for long term exercise maintenance among veterans who participate in the exercise program, GeroFit.

Grace A. Noppert, Ph.D., comes to the Duke Aging Center from the University of Michigan where she completed her Ph.D. in Epidemiologic Science. Her dissertation research investigated social patterning of tuberculosis in Michigan. Her mentors during her Aging Center fellowship will be Angela O’Rand, Ph.D., Professor of Sociology and Director of the Duke University Population Research Institute, and Harvey J. Cohen, M.D., Director of the Duke Aging Center. Dr. Noppert’s research will focus on advancing our understanding of persistent infections across the life course as a potential cause of health disparities in aging.
COMING EVENTS

September 30: First Annual Research and Education Retreat at the Duke Center on Aging. Great Hall, Siemans Center. Contact: harvey.cohen@Duke.edu.


November 10: Aging and the Environment. Mini-Conference at NC State University, Raleigh, NC. Contact: go.ncsu.edu/aging_environment.


March 7–12, 2017: 43rd Annual Meeting of Association for Gerontology in Higher Education. Miami, FL. Contact: meeting@aghe.org.


April 6-9, 2017: Annual Conference of the Southern Gerontological Society, Ashville, NC. Contact: www.southerngerontologicalsociety.org