



The Duke University Center for the Study of Aging and Human Development and the Claude D. Pepper Older Americans Independence Center present



the Center Report

Commitment, Experience & Fresh Ideas: A New Leader

By Lisa P. Gwyther, MSW, LCSW

Last month Duke acknowledged my forty years of service to the Duke Center for Aging and Department of Psychiatry and Behavioral Sciences. The Duke Family Support Program's Caregiver newsletter and its Durham Evening Support Group qualify for about the same number of service years.

Now our Duke Family Support team, including myself and the invaluable Janeli McNeal, MSW and Natalie Leary, MSW, LCSWA, is thrilled to announce that Bobbi Matchar, MSW, MHA is the new Director of the Duke Family Support Program.

Our six-year old Early-Stage & Beyond Community set a new bar for program-



Lisa P. Gwyther (second from left) and program staff

Continued on page 2



EDITORIAL

Time To Fix Fiscal Social Security*

Alarm bells are ringing about “Social Security’s Fiscal Woes” because the annual report from the trustees of Social Security and Medicare shows that both programs are “racing toward the brick wall of insolvency”. Social security will spend more money this year than it takes in for the first time since 1983. Without changes, the Social Security Trust fund is now expected to be depleted by 2034.

Medicare’s Hospital Insurance Trust Fund (Medicare Part A) is projected to run out of money by 2026.

One simple fix would be to remove the cap on payroll taxes (currently set at \$128,400). This would not raise taxes for most people – just on the affluent who can most afford it. This cap is strange tax policy anyway: it eliminates taxes on those who least need tax relief. This is regressive taxation at its worse.

Another fix would be to allow more young immigrants into our country, which would increase revenues of Social Security and Medicare. We could also tweak some benefits without hurting most beneficiaries.

Whatever the fix, the time to do it is now, before the trust funds begin to run out of money. ■

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

Commitment, Experience & Fresh Ideas: A New Leader continued

ming under the visionary leadership of Bobbi Matchar, MSW, MHA in collaboration with our loyal community partner organizations. Memory Makers, the core entry point for all new programs, welcomes its 17th educational support group this fall; and What’s Next, Kinship support groups and Booster Club events are firmly established.

Bobbi’s foresight and broad experience created and expanded the reach of our Triangle-Area Monthly E-newsletter over the last three years. She revamped our communications and solidified our

four-year-old series of monthly programs with Duke’s Nasher Art Museum Reflections Program. The Alphas’ monthly Saturday lunches and spontaneous gatherings thrive with her steady presence after six years.

Three anonymous gifts totaling 3.1 million dollars and many new generous donors assure individuals living with cognitive decline and their families will have access to our lessons learned and a recently doubled team of Duke Family Support Program social workers. It is time for a new team leader.

We are seamlessly ready to roll with Bobbi’s innovations, strategizing, experience, unsurpassed knowledge base and commitment.

Some say “Change is Good – you do it.” I am eager to follow Bobbi’s lead as our program continues to focus on changing for the better the lived experience of people challenged by memory and thinking disorders. So look for me, just not as “Director”, as we commit to reach more individuals and families in meaningful ways in the years ahead. ■

SLOGAN FOR THE DAY:

You are never too old, and it’s never too late.



FEATURED RESEARCHER: Kenneth Lyles, MD*



Kenneth Lyles, MD

I am a Geriatrician Endocrinologist who has spent a career trying to better understand two metabolic bone diseases: Paget Disease of bone and osteoporosis. Both of these disorders increase in prevalence with aging. Equally important, these disorders are associated with significant functional impairments. Early in my career, my mentor, Harvey Jay Cohen, MD, advised me not to shy away from studying people with substantial disease burdens and impairments, so studying people with significant amounts of disease has been rewarding

Thirty years ago, few people were interested in Paget Disease of bone, a disease of abnormal bone remodeling in which bones become enlarged, deformed, and painful, leading to pain and functional impairments. Although therapies were available, many patients were not treated and were willing to be studied. Three colleagues, Deborah Gold, PhD, a sociologist, Kathy Shipp, PT, PhD, a physical therapist, and Carl

Pieper, PhD, a biostatistician, began a series of studies which demonstrated the pain and impaired quality of life these patients had. We worked together to develop measures to demonstrate and measure impairments in gait when the disease affected the bones of the leg, pelvis, and spine. About 25 years ago, a class of drugs known as bisphosphonates were being developed to treat osteoporosis. They were also effective in treating Paget Disease. One pharmaceutical company with an intravenous bisphosphonate, zoledronic acid, approached us to ask if we would help them design a clinical trial to test their drug's efficacy in treating Paget Disease. The drug, approved by the FDA in 2007, was successful in reducing pain and was the first bisphosphonate to improve quality of life in affected patients.

While our group was working with Paget Disease of bone patients, Dr. Gold showed that osteoporosis, specifically vertebral fractures, impaired women's quality of life, as their body shape changed from their spine fractures. As a group we worked to develop measures to show how these spine fractures impaired back strength. Dr. Shipp developed and modified existing exercises to help with strengthening spine muscles, improve posture and help reduce pain. With an NIH grant Dr. Gold received, we tested whether an intervention of specific exercises and sessions to improve quality of life would help women with vertebral fracture in eight large Continuing Care Retirement Communities, and could improve back strength and quality of life measures. The trial was successful and some of the exercises that we tested are

recommended for patients with vertebral fractures by the National Osteoporosis Foundation.

In 1996 a Department of Medicine Resident, Cathleen Colon-Emeric MD, asked if we could work together to study osteoporosis in men. One of our first collaborative efforts discovered that men with low trauma hip fractures had a remarkable rate of subsequent fracture: 18%, in the two years after the successful surgical fracture repair. We knew that two companies were developing bisphosphonates that could be given intravenously and had therapeutic effects for up to twelve months. With our colleague Carl Pieper, PhD, we designed a clinical trial that would test whether such a drug would reduce the rate of subsequent fractures after a hip fracture. Novartis Pharmaceutical Corporation agreed to conduct such a trial. With exceptional support from the Duke Clinical Research Institute the trial was completed after

Continued on page 4

the Center Report

Vol. 37, No. 4, Fall 2018

Published quarterly by the Duke University Center for the Study of Aging and Human Development and the Claude D. Pepper Older Americans Independence Center.

Director: Harvey J. Cohen, MD
Editor: Erdman B. Palmore, PhD

Box 3003
Duke University Medical Center
Durham, NC 27710
(919-660-7500; karen.ray@duke.edu)

Designer: Regina Miles
Duke University Copy Center



FREQUENTLY ASKED QUESTIONS*

What causes Parkinson's Disease?

There are three main types of Parkinson's Disease: post encephalitic, arteriosclerotic, and idiopathic. Post encephalitic Parkinson's is caused by a history of encephalitis lethargica. Arteriosclerotic Parkinson's

is caused by multi-infarcts in the brain. About 85% of Parkinson patients have idiopathic causes – which simply means the causes are unknown.

Alzheimer's inevitable involves dementia while Parkinson patients

may escape this. On the other hand, Parkinson patients usually suffer years of tremors, rigidity, and eventual loss of ability to respond at all. ■

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

FEATURED RESEARCHER: Kenneth Lyles, MD continued

6 years. It showed that zoledronic acid given within 90 days of repair of a hip fracture reduced the subsequent rate of fractures by 35%. This was one of two clinical trials that led to FDA approval of zoledronic acid as a therapy for osteoporosis.

One unanticipated finding of the hip fracture treatment trial was a 28% reduction in all-cause mortality, a striking finding, since 15-25% of people with a hip fracture die within 12 months of their fracture. Other studies have documented that this positive effect on mortality is observed with other nitrogen-containing bisphosphonates: alendronate and risedronate. There is growing interest in understanding why such drugs have a promising non-skeletal effect.

One of my more recent efforts has been to work with colleagues Cathleen Colon-Emeric, and Richard Lee, MD, MPH to find ways to improve the use of effective osteoporosis medications since there remain unwarranted concerns about side effects of these drugs and this fear prevents their use by patients who would clearly benefit. Finally, with colleagues at the University of California, San Francisco, University of Pittsburg, and Duke University, we hope to receive NIH funding for a trial to treat patients over 65 years of age with Parkinson's Disease with zoledronic acid, given in their homes. We postulate that this therapy will reduce the 12-16% annual fracture rate in older affected patients.

In conclusion, I know that I have been fortunate to work as a member of the Duke University Aging Center, the Geriatrics Division, and Durham VA Medical Center because of my productive relationships with bright and creative collaborators. ■

*Kenneth Lyles, MD, is a consultant for Health Decisions in Durham, NC; on the Board of Trustees of the National Osteoporosis Foundation; Cofounder and Equity Owner of BisCardia, Inc.; and inventor or co-inventor of 4 patents using zoledronic acid.



Recent Publications

The following are recent publications of our faculty and fellows that are related to gerontology or geriatrics.

- Blay S, Fillenbaum G, Quintana I, Mari J, Mello M, Andreoli S, Bressan R. 12-month prevalence and concomitants of DSM-IV depression and anxiety disorders in two violence-prone cities in Brazil. *Journal of Affective Disorders*, 2018;232:204-211. doi: 10.1016/j.jad.2018.02.023. Epub 2018 Feb 17. PMID: 29499502 PMCID: PMC603911 <https://doi.org/10.1016/j.jad.2018.02.023>
- Soo Borson, Joshua Chodosh, Cyndy Cordell, Beth Kallmyer, Malaz Boustani, Anna Chodos, Jatin K. Dave, Lisa Gwyther, Susan Reed, David B. Reuben, Stephen Stabile, Monica Willis-Parker, William Thies. Innovation in care for individuals with cognitive impairment: Can reimbursement policy spread best practices? doi:10.1016/j.jalz.2017.09.001. *Alzheimer's & Dementia*. 13: (2017) 1168-1173.
- Cary MP Jr, Goode V, Crego N, Thornlow D, Colón-Emeric CS, Hoening HM, Baba K, Fellingham S, Merwin EI. Hospital Readmission in Total Hip Replacement Patients in 2009 and 2014. *Arch Phys Med Rehabil*. 2018 Jun;99(6):1213-1216.
- Cary MP Jr, Hall RK, Anderson AL, Burd A, McConnell ES, Anderson RA, Colón-Emeric CS. Management Team Perceptions of Risks and Strategies for Preventing Falls Among Short-Stay Patients in Nursing Homes. *Health Care Manag (Frederick)*. 2018 Jan/Mar;37(1):76-85. doi: 10.1097/HCM.000000000000192. PubMed PMID: 29266090; PubMed Central PMCID: PMC5777903
- Colón-Emeric CS, Corazzini KN, McConnell ES, Pan W, Toles MP, Hall R, Batchelor-Murphy M, Yap TL, Anderson AL, Burd A, Amarasekara S, Anderson RA. Resident Vignettes for Assessing Care Quality in Nursing Homes. *J Am Med Dir Assoc*. 2018 May;19(5):405-410. doi: 10.1016/j.jamda.2017.10.018. Epub 2017 Nov 22. PubMed PMID: 29174560; PubMed Central PMCID: PMC5924713.
- Falahati A, Sahaf R, Kamrani AAA, Momtaz YA, Rassafiani M, Fillenbaum GG. Validity and Reliability of OARS Multidimensional Functional Assessment Questionnaire in Iranian Older Adults *دین چ همدان شسرپ "ن ادن مل اس رد در کلم ع یب ای زرا ی دع ب Iranian Rehabilitation Journal* 2018;16(2):113-119.
- Hall, K.S., Morey, M.C., Beckham, J.C., Bosworth, H.B., Pebole, M.M., Pieper, C.F., Sloane, R. (2018). The Warrior Wellness Study: a randomized controlled exercise trial for older veterans with PTSD. *Translational Journal of the American College of Sports Medicine*, 3(6), 43-51.
- Hall, K.S., Cohen, H.J., Pieper, C.F., Fillenbaum, G.G., Kraus, W.E., Huffman, K.M., Cornish, M., Shiloh, A., Flynn, C., Sloane, R., Newby, L.K., Morey, M.C. Physical performance across the adult lifespan: correlates with age and physical activity. *Journals of Gerontology Series A: Biological Sciences and Medical Sciences*, 2017; 72 (4): 572-578. PMID: 27356977 DOI: <https://doi.org/10.1093/gerona/glw120>
- Hall RK, Luciano A, Pieper C, Colón-Emeric CS. Association of Kidney Disease Quality of Life (KDQOL-36) with mortality and hospitalization in older adults receiving hemodialysis. *BMC Nephrol*. 2018 Jan 15;19(1):11. doi: 10.1186/s12882-017-0801-5. PubMed PMID: 29334904; PubMed Central PMCID: PMC5769495
- Hall RK, Sloane R, Pieper C, Van Houtven C, LaFleur J, Adler R, Colón-Emeric C. Competing Risks of Fracture and Death in Older Adults with Chronic Kidney Disease. *J Am Geriatr Soc*. 2018 Mar;66(3):532-538. doi: 10.1111/jgs.15256. Epub 2018 Jan 10. PubMed PMID: 29319880; PubMed Central PMCID: PMC5849495.
- King, K.E., Fillenbaum, G.G., Cohen, H.J. A cumulative deficit laboratory test-based frailty index: personal and neighborhood associations. *J Am Geriatr Soc* 2017 Sep;65(9):1981-1987. PMCID: PMC5603383 DOI: 10.1111/jgs.14983

Continued on page 6



Recent Publications

- Bobbi G. Matchar, Lisa P. Gwyther, Elizabeth Galik, & Barbara Resnick
- Building Resilience in Persons with Early-Stage Dementia and Their Care Partners.
- In Resilience in Aging: Concepts, Research and Outcomes, 2nd Edition (Barbara Resnick, Lisa Gwyther and Karen Roberto, Eds) 2018 (In press). Springer International Publishing.
- Morey MC, Lee CC, Castle S, Valencia WM, Katzel L, Giffuni J, Kopp T, Cammarata H, McDonald M, Oursler KA, Wamsley T, Jain C, Bettger JP, Pearson MP, Intrator O, Veazie P, Sloane R, Li J, Parker D. Should structured exercise be promoted as a model of care? Dissemination of the VA Gerofit program. JAGS 66:1009-1016, 2018 (Feb 12. doi: 10.1111/jgs.15276. [Epub ahead of print]).
- Morey MC, Manning K, Guo S, McDonald S, Heflin M, Starr KP, Sloane R, Loyack NL. Physical activity trackers: Promising tools to promote resilience in older surgical patients? J Surg: JSUR-1156. DOI: 10.29011/2575-9760. 001156, Online version July 2018.
- Parker D.C., Sloane R, Pieper CF, et al. Age-Related Adverse Inflammatory and Metabolic Changes Begin Early in Adulthood. The Journals of Gerontology: Series A. (2018). doi:10.1093/gerona/gly121.
- Pavon JM, Sloane RJ, Pieper CF, Colón-Emeric CS, Cohen HJ, Gallagher D, Morey MC, McCarty M, Ortel TL, Hastings SN. Poor Adherence to Risk Stratification Guidelines Results in Overuse of Venous Thromboembolism Prophylaxis in Hospitalized Older Adults. J Hosp Med. 2018 Jun 1;13(6):403-404. doi: 10.12788/jhm.2916. Epub 2018 Feb 6. PubMed PMID: 29408946; PubMed Central PMCID: PMC5984140.
- Safeek, R., Hall, K.S., Lobelo, F., del Rio, C., Khoury, A., Wong, T., McKellar, M. (in press). Low physical activity among older persons living with HIV/AIDS is associated with poor physical function. AIDS Patient Care and STDs.
- Seaman, KL, Green, MA*, Shu, S, & Samanez-Larkin, GR (2018). Individual Differences in Loss Aversion and Preferences for Skewed Risks Across Adulthood. Psychology and Aging, 33, 654-659. doi: 10.1037/pag0000261
- Seaman, KL, Brooks, N*, Karrer, TM, Dang, L, Hsu, M, Zald, DH, Samanez-Larkin, GR. (2018). Neural subjective value representations across age and discount factors: Time delay, physical effort, and probability discounting. Social Cognitive and Affective Neuroscience, 13, 449-459. doi: 10.1093/scan/nsy021
- Seaman, KL, Leong, J, Wu, CC, Knutson, B, Samanez-Larkin, GR (2017). Individual differences in skewed financial risk taking. Cognitive, Affective, and Behavioral Neuroscience. doi: 10.3758/s13415-017-0545-5
- Philip D. Sloane, Christopher H Schifeling, Anna S. Beeber, Kimberly T Ward, David Reed, Lisa P. Gwyther, Bobbi Matchar and Sheryl Zimmerman. New or Worsening Symptoms and Signs in Community-Dwelling Persons with Dementia: Incidence and Relation to use of Acute Medical Services JAGS (April) 2018. doi: 10.1111/jgs.14672. 65:808-814.
- Smith, CT, Crawford, JL*, Dang, LC, Seaman, KL, San Juan, MD, Vijay, A, Katz, DT, Matuskey, D, Cowan, RL, Morris, ED, Zald, DH, and Samanez-Larkin, GR (2017). Partial-volume correction increases estimated dopamine D2-like receptor binding potential and reduces adult age differences. Journal of Cerebral Blood Flow and Metabolism. doi: 10.1177/0271678X17737693
- Toles M, Leeman J, Colón-Emeric C, Hanson LC. Implementing a Standardized Transition Care Plan in Skilled Nursing Facilities. J Appl Gerontol. 2018 Jun 1;733464818783689. doi: 10.1177/0733464818783689. [Epub ahead of print] PubMed PMID: 29944061.

Continued on page 7



Recent Publications

- Toles M, Colón-Emeric C, Naylor MD, Asafu-Adjei J, Hanson LC. Connect-Home: Transitional Care of Skilled Nursing Facility Patients and their Caregivers. *J Am Geriatr Soc.* 2017 Oct;65(10):2322-2328. doi: 10.1111/jgs.15015. Epub 2017 Aug 16. PubMed PMID: 28815552; PubMed Central PMCID: PMC5666578.
- Wang V, Allen K, Van Houtven CH, Coffman C, Sperber N, Mahanna EP, Colón-Emeric C, Hoenig H, Jackson GL, Damush TM, Price E, Hastings SN. Supporting teams to optimize function and independence in Veterans: a multi-study program and mixed methods protocol. *Implement Sci.* 2018 Apr 20;13(1):58. doi: 10.1186/s13012-018-0748-3. PubMed PMID: 29678137; PubMed Central PMCID: PMC5910600.
- Whitson HE, Cohen HJ, Schmader KE, Morey MC, Kuchel G, Colon-Emeric CS. Physical Resilience: Not Simply the Opposite of Frailty. *J Am Geriatr Soc.* 2018 Mar 25. doi: 10.1111/jgs.15233. [Epub ahead of print] PubMed PMID: 29577234.
- Yap TL, Kennerly SM, Horn SD, Bergstrom N, Datta S, Colon-Emeric C. TEAM-UP for quality: a cluster randomized controlled trial protocol focused on preventing pressure ulcers through repositioning frequency and precipitating factors. *BMC Geriatr.* 2018 Feb 20;18(1):54. doi: 10.1186/s12877-018-0744-0. PubMed PMID: 29463211; PubMed Central PMCID: PMC5820803.
- Zietlow, KE; SR McDonald, R Sloane, J Browndyke, S Lagoo-Deenadayalan, MT Heflin. 2017. Preoperative Cognitive Impairment as a Predictor of Postoperative Outcomes in a Collaborative Care Model. *J Am Geriatr Soc.* (Accepted for publication).
- Zietlow, KE; L Charalambous, I Ng, S Gagrani, M Mihovilovic, S Luo, DL Rock, A Saunders, AD Roses, WK Gottschalk. 2017. The biological foundation of the genetic association of TOMM40 with late-onset Alzheimer's disease. *BBA Molecular Basis of Disease.* 1863(11):2973-86.
- Zimmerman S, Sloane PD, Ward K, Beeber A, Reed D, Lathren C, Matchar B, Gwyther L. Helping Dementia Caregivers Manage Medical Problems: Benefits of an Educational Resource. *Am J Alzheimers Dis Other Demen.* 2018 May;33(3):176-183. doi: 10.1177/1533317517749466. Epub 2018 Jan 5. PMID: 29301414.
- Zuo X, Luciano A, Pieper CF, Bain JR, Kraus VB, Kraus WE, Morey MC, Cohen HJ. Combined inflammatory and metabolic indices of robust and impaired physical function in older adults. *JAGS* epub ahead of print 6:2018. DOI: 10.1111/jgs.15393.



COMING EVENTS



November 14-18, 2018: Annual Scientific Meeting of the Gerontological Society of America. Theme: "The Purpose of Longer Lives." Boston, MA. Contact: geron.org/meetings-events.

The Center for the Study of Aging and Human Development 3rd Annual Research and Education Retreat will be held on Friday, November 30, 2018 from 12:00–5:00pm in the Trent Semans Building, Great Hall - Lower Level, O. Please see the Center's website for more details. <https://sites.duke.edu/centerforaging/>

May 1-4, 2019: Annual Scientific Meeting of the American Geriatrics Society in Portland, OR. Contact 212-308-1414 or nlundebjerg@americangeriatricsociety.org.

November 13-17, 2019: Annual Scientific Meeting of the Gerontological Society (including AGHE meeting). Austin, TX. Contact: Membership@geron.org.