Heflin To Direct Center For Interprofessional Education and Care

Dean Marion Broome and Dean Mary Clotman announced that Mitchell T. Heflin, MD, D, MHS, Associate Professor of Medicine, has been named director of the Center for Interprofessional Education and Care effective July 1, 2019.

In 2018, the Schools of Medicine and Nursing signed a collaborative agreement to establish the Duke Health Center for Interprofessional Education and Care (IPEC). As a priority goal of the education pillar of the 2016 Duke Health Strategic Framework, the creation of the Center will provide an organizational home for this new initiative and will advance interprofessional education, research, and collaborative practice across Duke Health. The Center will have a governance structure comprised of Dr. Heflin, and representation from all health education schools and programs, and the broader Durham community.

Dr. Heflin earned his MD from the University of Virginia and completed his residency in internal medicine and fellowship in geriatrics at Duke University. He is a Senior Fellow in the Aging Center at Duke, serves as Medical Director of the Geriatric Evaluation and Treatment (GET) Clinic, and co-directs the Perioperative Optimization of Surgical Health (POSH) programs at Duke and Durham VA. He is also Program Director for the Geriatric Medicine Fellowship Program and co-director of the Duke Geriatric Workforce Enhancement Program (GWEP).

Please join us in congratulating Dr. Heflin on this new appointment.
The following is a list in alphabetical order of the first author of recent publications related to aging by Center faculty and Fellows.


Bowling CB, Whitson HE, Johnson T. The 5Ts: Preliminary development of a framework to support inclusion of older adults in research. Journal of the American Geriatrics Society. Accepted Nov 2018


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Most of the scientific studies agree that older people tend to be happier people, regardless of how happiness is measured. The question that remains is why? The objective situation of most older people would tend to make older people less happy: health tends to decline, friends and family pass away, income tends to decline, ageism tends to increase prejudice and discrimination against them, etc.

Jonathan Rauch in his recent book “The Happiness Curve: Why life gets better after 50” summarizes the several explanations for this paradox:

- **Expectations change.** Older people expect their health to decline, so when it happens it does not make them depressed.
- **Stress declines.** The stresses of raising children, earning a living, and trying to reach ambitious goals tend to recede.
- **They manage their emotions.** Older people respond more to positive emotions and tend to develop more gratitude for their blessings.
- **They cultivate the foundations of happiness:** strong family relations, a trusted community, and supportive friends.

Rauch argues that understanding this normal transition from the mid-life slump to a happier old age and looking forward to it, can help produce the upward swing of the “happiness curve.”

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

**Recent Publications (continued)**


Pavon J, Sloane R, Pieper C, Colon-Emeric C, Cohen H, Gallagher D, Morey M, McCarty M, Ortel T, Hastings S. Poor adherence to risk stratification guide-

NEW GERIATRIC FELLOWS

Thanks to a successful match in late November, we now look forward to welcoming another group of high achieving future geriatricians starting in July, 2019. They are:

- **Seetha Bhagavatula** – St. Elizabeth’s Med Center, MA
- **Kristin Hlebowitsh** – Boston University Med Center, MA
- **Yoon Hie Kim** – Univ. North Carolina Hospitals at Chapel Hill, NC
- **Alexandra Lee** – Jackson Memorial Hospital, FL
- **Lauren Mims** – Redmond Regional Medical Center, GA
- **Andrew Mrugala** – St. Joseph’s Regional Medical Center, IN

We welcome you all to the Center for the Study of Aging and Human Development!
FREQUENTLY ASKED QUESTIONS*
Are older people more likely to be mentally ill?

It is true that the prevalence of the dementing illnesses increases with age, but this is more than offset by the decreases in depression, schizophrenia, drug addiction, and other mental disorders. As a result, when all mental illnesses are considered together, older people are actually less likely to be mentally ill! This is one of the advantages of growing older: you are less likely to become mentally ill.

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

Recent Publications (continued)


SLOGAN FOR THE DAY:
Old Age Is the Consummation of Life.


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


July 14-18, 2019: Alzheimer’s Association International Conference in Los Angeles, CA, Convention Center. Contact: alz.org/AAIC.


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