



# MAGEC

# MOMENTS!

A University of Miami MAGEC Publication • April 2008 • Edwin Olsen M.D., Director

The Miami Area Geriatric Education Center has been working diligently these past few months in order to enhance the geriatric knowledge and skills of health professionals by expanding and developing educational programs and activities in geriatrics.

## The Past Few Months...

### February

Partnering with the University of Miami, School of Law and the Elder Law Project, over fifty patients and staff of the Miami Veterans Administration were able to participate in a lecture providing information on available public benefits, such as Social Security, Medicare, Medicaid, Housing, and VA Benefits. The presentation explained what benefits are available, who is eligible for these benefits, and how to obtain them.

### March

Co-sponsoring the 16<sup>th</sup> Annual Gala Women and Reproductive Health Conference, "Breaking Barriers and Building Coalitions", MAGEC was able to reach out to a largely Haitian community regarding the impact of HIV/AIDS, breast, ovarian, and cervical cancer on women, young and old, and their families in communities of color.

## **INSIDE THIS ISSUE**

- 1. The Past Few Months**
- 2. Coming soon!**
- 3. In the News...**
- 4. Calendar of Events**

### March continued

In conjunction with the APA Committee on Ethnic Minority Elderly, MAGEC co-sponsored a didactic training at the American Association for Geriatric Psychiatry (AAGP) 2008 Annual Meeting. In attendance were approximately 40 geriatric psychiatry fellowship training directors from across the United States and Canada. Copies of the Cultural Competency Curriculum in Geriatric Psychiatry developed by the Committee on Ethnic Minority Elderly were distributed to all participants. The curriculum is available on the MAGEC website.

<http://www.miami.edu/magec>

*Copies of the Cultural Competency Curriculum on Geriatric Psychiatry are available on the MAGEC website!*

## The Past Few Months continued...

### March continued

MAGEC's Cultural Sensitivity Advisory Committee has been established. The new committee will be co-chaired by Martha Pelaez, Ph.D. and Martha Corvea Ph.D. and will include Lydia DeSantis, Ph.D., R.N., F.A.A.N. from University of Miami School of Nursing; J. Bryan Page, Ph.D. from University of Miami Office of Sociocultural Studies; and Laurinus Pierre, M.D., M.P.H. from the Center for Haitian Studies, Inc. MAGEC, serving Dade, Broward, and Palm Beach counties, provides educational services to a large number of providers who encounter a great deal of minority elderly. This group will be responsible for providing advice and approval of curriculum and educational materials. Updates on advisement by this committee will be included in future newsletters.

## Coming soon...

### 5<sup>th</sup> Annual Pain Awareness Week

March 31 – April 4, 2008

West Palm Beach VA

Coming soon, MAGEC will be co-sponsoring the West Palm Beach Veterans Administration 5<sup>th</sup> Annual Pain Awareness Week. Targeting VA physicians, nurse practitioners, physician assistants, pharmacists, RNs, and other interested clinical staff, the Pain Awareness Week will provide various continuing education credits and contact hours as well as stimulating lectures and presentations on topics such as spinal injection, nerve block therapies for back pain, pain management and palliative care, and medication management. For more information email [lisette.ronga@med.va.gov](mailto:lisette.ronga@med.va.gov).

## Coming soon....

### Florida Bioethics Conference

April 4, 2008

Miami Beach Resort and Spa

The Florida Bioethics Network's annual spring conference has been set for April 4<sup>th</sup> in Miami Beach. Department of Children and Families Secretary Bob Butterworth is a highlight on a program that will feature sessions on Joint Commission ethic requirements, aging, and pandemic preparedness. The program is in conjunction with the University of Miami Ethics Program's 16<sup>th</sup> annual "Florida Bioethics: Debates, Decisions, Solutions" conference. This program is regularly approved for continuing education credits for nurses, physicians, social workers, psychologists, guardians, and lawyers. For more information, visit <http://www.miami.edu/ethics> or email [ethics@miami.edu](mailto:ethics@miami.edu).

## In the news...

### As Population Grows Older, Geriatricians Grow Scarce

Officials, Schools Prod Doctors to Focus on Elderly Care

By Howard Kim

Special to The Washington Post

Tuesday, March 11, 2008; Page HE07

Mary Boland, 91, can consider herself fortunate. In 2006, the chronically ill former teacher from Cincinnati had a narrow brush with death when she came down with pneumonia. Within minutes, Boland's personal physician, Gregg Warshaw, was called.

"She was weak, confused and breathing abnormally," Warshaw recalls. "Her blood oxygen level was low, and she was suffering a low-grade fever."

## In the news continued....

In the elderly, pneumonia is often fatal. But instead of rushing Boland to the nearest hospital, as many family doctors might have done, Warshaw, a geriatrician, stabilized the condition and put his patient on antibiotics.

"Luckily, the pneumonia wasn't grave enough to warrant hospitalization," Warshaw says.

Geriatricians have provided specialized care to the elderly for decades, and until recently their numbers have been growing. But despite countless attempts to convince the medical profession and the public of their worth, the number of practicing geriatricians in the United States

-- about 7,000 -- is falling seriously behind needed levels.

While the U.S. population age 55 and older is growing rapidly, according to a 2005 census report, the number of medical school grads going into geriatrics has been slow to keep up. According to one estimate, the nation's teaching hospitals are producing one or two geriatricians for every nine cardiologists or orthopedic surgeons.

Low reimbursements and the allure of higher-paying specialties have been largely responsible. Then, too, the prospect of working long hours treating severely ill patients in their homes or at a hospital or nursing facility can be a turnoff, some physicians say.

"These are hard patients to treat because they're usually burdened with multiple complex disorders like Alzheimer's, dementia and congestive heart failure, and are often at the end of life," says Pittsburgh geriatrician Judith Black. Geriatrics isn't sexy, Black says, "but it can be extremely rewarding."

The rewards, geriatricians say, come from caring for a vulnerable, often misunderstood patient population and the strong relationships geriatricians develop with their families.

"Yes, they do die in the end; we all do," Black says. "But the effort is to bring dignity to those later stages of their lives."

That's not to say that primary care doctors aren't qualified to provide the same care. They are, says Kevin Grumbach, chief of the Department of Family and Community Medicine at San Francisco General Hospital. "What geriatricians are good at," Grumbach says, "is their coordinated team approach."

So it's all the more worrisome that the looming dearth of geriatricians is happening alongside another trend: a shortage of primary care doctors.

Most geriatricians are certified by either the American Board of Family Medicine or the American Board of Internal Medicine. To stave off the predicted deficit in the field's number of practitioners, geriatricians have pushed hard to encourage family doctors to get extra training in caring for the elderly.

But fewer physicians are going into primary care these days, and many are dropping out, tired of the hassles of low reimbursements and managed care.

Nevertheless, the American Geriatrics Society has lobbied aggressively for government support and more medical training:

Last May, Sen. Blanche Lincoln (D-Ark.) introduced the Geriatric Assessment and Chronic Care Coordination Act of 2007, which codifies the coordinated team approach and requires that Medicare provide quality programs for older adults with multiple chronic illnesses.

On March 4, Sen. Barbara Boxer (D-Calif.) introduced the Caring for an Aging America Act, which allows young physicians, nurses and other providers to work off all or part of their medical training debt by obtaining additional training in geriatrics or gerontology (the study of the aging process) and by working full time with the elderly for at least two years.

In 2007, South Carolina established a loan-forgiveness program that offers physicians a free pass on their medical training if they go into geriatrics for five years. Five other states are looking at the plan.

Meanwhile:

More than 50 medical schools have added elder care to their medical programs. The David Geffen School of Medicine at the University of California at Los Angeles recently revamped its curriculum to include geriatrics, and the University of Oklahoma, College of Medicine in Oklahoma City requires a third-year rotation in geriatrics.

Since 2001, the Donald W. Reynolds Foundation in Las Vegas has given \$150 million to fund geriatrics training at 30 medical schools. The John A. Hartford Foundation in New York has doled out \$40 million to 27 schools.

"There's still a ways to go," says AGS President Todd Semla.

At the same time, though, critics such as retired bioethicist Daniel Callahan wonder whether the investment in geriatrics is worth the social cost. "Are we going to continue funding programs for the elderly at a time when so many people have no health coverage?" Callahan asks.

## Upcoming MAGEC events...

### April 29, 2008

Integrative Medicine Symposium and EXPO  
Medical Wellness Center  
11:00am – 6:30pm

MAGEC will be jointly hosting this one day symposium where there will be several panels on integrative medicine representing both national and local clinical practices. Additionally, there will be breakout sessions throughout the day that will include UMMSM researchers, clinicians and community organizations and clinicians involved in CAM or integrative medicine practice. Some of the breakout sessions will be experiential such as acupuncture demonstrations, tai chi, yoga, meditation, etc. Others will be research findings such as nutritional supplement research, acupuncture research, aromatherapy, and laser light research.

For more information visit:

<http://www.med.miami.edu/psychiatry/cam/>

### July 21, 22, 23, 2008

Geriatric Intensive Team Training  
Miami VA Auditorium  
8:00am – 4:30pm

The Geriatric Intensive Team Training is an important part of the MAGEC faculty development-training program. The goal of this program is to provide training in the delivery of efficient interdisciplinary team care in order to meet the health care needs of older adults. More information (including how to register, speakers, and fees) to come on the MAGEC website.

<http://www.miami.edu/magec>

**Next issue coming out in July, 2008!**

MILLER  
SCHOOL OF MEDICINE  
UNIVERSITY OF MIAMI

