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A New Program to Prevent Frailty

A raw egg is frail. Lace is frail. A new relationship can be frail. Each of these is delicate and easily damaged. An older adult can also be frail, diagnosed with conditions that greatly increase their chance of injury and even death. Once a person is identified as frail, it can be difficult to rehabilitate him or her out of frailty.

But there is hope. Before a person becomes frail, they are pre-frail, showing changes in physical and mental health,

socializing, and quality of life that make them likely to become frail, often within three to seven years. "If we can intervene at this point," said Heather Fritz, PhD, an assistant professor of occupational therapy (OT) and gerontology at the IOG, "we could possible delay the descent into frailty."

Dr. Fritz has won a \$256,000 grant from the Michigan Health Endowment Fund to



test an occupational therapy based intervention on 150 pre-frail African Americans. Her team is halfway through their two-year time frame and seeing positive results in the 75 people enrolled so far. "Patient satisfaction has been very high. They are telling us it is very useful," Dr. Fritz said. "Even when they don't do exactly what we

See FRAILTY page 2

When You're Worried about Your Memory...

Early signs of dementia or Alzheimer's can be hard to spot. Is forgetting your neighbor's name normal aging or something more serious? Is it okay to take



DR. KAVCIO

twice as long to balance your checkbook? Is your memory fog due to the stress of a recent illness or the start of a progressive deterioration?

New research at the IOG is testing whether brain waves could be the clue to distinguish serious memory loss from the occasional lapse. These brain waves can be measured through a safe, comfortable, non-invasive skull cap that produces an electroencephalogram, or EEG. At present only an expensive, high tech brain scan like an MRI can detect the subtle brain

See MEMORY page 6



April 29 & 30 Issues in Aging (6-12 CE's)

Don't miss the IOG's longest-running conference for health care professionals, service providers, administrators, social workers and researchers working with older adults.

TOPICS INCLUDE:

- Lighting Interventions in Alzheimer's
- Financial Exploitation & Cognitive Impairment
- Family Caregiving after Stroke
- Opioid Epidemic Among Older Adults
- Healthcare Utilization of Patients with Dementia



May 16 Art of Aging Successfully

This conference is organized by seniors for seniors. Workshops promote creative expression, social connection and information on ways to positively embrace all facets of aging. Seniors can submit their own visual and written work for display and publication. Submitting art is not required to participate in this inspiring event, but artists must register for the event if they would like to present art.

EVENTS FILL UP QUICKLY! To attend see Registration at www.iog.wayne.edu



SAFE COMMUNITY WORKSHOPS No RSVP Required

March 27, 1:30-2:30 pm *All About Credit*

St. Patrick's Senior Center 58 Parsons, Detroit 48201

March 28, 4 - 5:00 pm **Scams and Identity Theft** Wilder Public Library Block Club 7140 E. 7 Mile Rd., Detroit 48234



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Frailty from page 1

ask them to do, they seem to be receiving good benefit."

The Approach

Doctors at Detroit's Rosa Parks Clinic screen patients 55 and older for pre-frail symptoms. Potential enrollees learn about pre-frailty and why it's important to stave off frailty as long as possible. "Most of the people we talked to never heard about frailty before, never had a health care provider explain it to them," Dr. Fritz said. "They had no idea how serious it could be."

Once enrolled in the study, patients receive four visits from an OT over four months. Each visit "takes as long as it takes," according to Dr. Fritz. "We don't rush anyone. Many of our patients say, 'You guys actually take the time to talk to me.' We think that's the way it should be."

Visit #1 – A comprehensive OT evaluation that can take up to two hours, including medication management, activities of daily living, pain management, home safety and sexual satisfaction. The person's strength, balance and range of motion are tested. The OT notes any special home care equipment in use. The visit takes place in the clinic or in the home, whichever is more convenient for the patient.

Visits #2 and #3 – The focus is either physical activity or diet, as selected by the patient. If it's physical, the OT reviews any physical deficits uncovered in Visit #1 and prescribes a tailored home exercise program to alleviate them. If it's diet, to reduce cholesterol for example, the patient learns about food choices and substitutions. Recommendations are highly personalized to the person's abilities, needs and motivation.

The OT works with the patient to set small, achievable goals linked to an environmental trigger. If you want to replace butter with olive oil, you write it down and then take the butter off the counter and put a carafe of oil in its place. The same approach would apply to replacing salt with a salt-free seasoning mix. "We use the principals of habit formation: make specific changes to the environment to help support goals," Dr. Fritz said.

Visit #4 – The last session is a wrap-up to talk through goals that have not been achieved and create new goals if needed. Since patients are being asked to make lifestyle changes, the OT tries to establish a long-term maintenance plan. Small changes consistently enforced can improve health.

Three and six months after the last visit, the patient is evaluated for any decreases in their original indicators of pre-frailty. Two and three years later, Dr. Fritz's team will examine their medical records to see if they have moved into frailty. "It's hard to measure something not happening," Dr. Fritz said, "but pushing back the descent into frailty for a few years is a good start."

Is It Feasible?

Dr. Fritz wants to insure this approach is feasible not only with patients but also providers and insurers. Her team will analyze costs and benefits to determine whether the program's expenses can be reimbursed by insurance carriers to make it self-sustainable. She thinks the OT approach to frailty is a good fit. "OTs are trained to address issues of diet, physical activity, pain management, social interaction, balance, falls and safety – everything this plan requires. We could become the one-stop shop for preventing frailty."

Frailty is a significant cause of health-care use and personal suffering in later life and much harder to reverse than pre-frailty, yet almost no current programs target pre-frail persons. "Frailty can be slowed or reversed if we catch it soon enough and have the wherewithal to do something," Dr. Fritz said. "We must develop programs to prevent frailty progression on a national scale, because soon we won't have the resources to care for all our frail older adults. Let's help them now rather than pay for it ten-fold later."

AWARDS & HONORS



Acclaim for a Bright Future

DeAnnah Byrd, PhD, won the James Zimmer New Investigator Research Award for 2018 from the American Public Health Association. This award recognizes past excellence and the promise

of future excellence in research and leadership in new investigators within five years of completing their PhD.. Dr. Byrd submitted her manuscript *Black-White Cognitive Trajectories: What Ages Do Differences Emerge?* She is a postdoctoral scholar in Wayne State's Postdoc to Faculty Transition program.



The Spirit of Our IOG Community

IOG Outreach Director **Donna MacDonald** is a finalist in Wayne State's annual Spirit of Community award ceremony. Her high quality outreach



programs have grown exponentially to educate more than 10,000 older adults and professionals every year. Donna embodies this engagement with the metro Detroit community that Wayne State values. She insures that every touchpoint we have with a local resident is informed, respectful, helpful and honest. The winner will be announced at the April ceremony.



Most Downloaded of the Year

Cognitive neuroscience researcher Ana Daugherty, PhD, is first author on an article in the journal *Hippocampus* cited as one of the most downloaded in 2018. The paper explains the ongoing work of a

large international collaboration of more than 200 scientists from 15 countries to create methods of measuring subfields of the hippocampus through MRI. The work impacts memory development, aging and pathologies like Alzheimer's disease. IOG faculty members Naftali Raz, PhD and Noa Ofen, PhD, are co-authors.









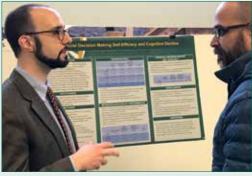
Travel on Us

Predoctoral trainees Caitlin Cassady, Lingfei Tang, Chaitali Anand and Qijing Yu won monetary awards to help cover their travel to March conferences to present research. Caitlin heads to Portland for the Society for Applied Anthropology meeting to present: Educating for Activism and Relevance: Learning through Anthropology and Social Work. Lingfei flies to San Francisco for the Cognitive Neuroscience Society meeting. He will discuss the reliability of functional MRI measures in characterizing memory development in children and adults. Chaitali will attend the same conference to discuss age differences in the hippocampus that affect learning and memory. Qijing visits the Society for Research in Child Development in Baltimore to talk about the role of the hippocampus and prefrontal cortex in young children. Congrats to all.









Best 3-Minute Thesis Competition (Tie)

Chaitali Anand (far left) Aging to Alzheimer's: The Search for Biomarkers

and

Evan Gross (bottom right, left side) Financial Decision-Making Self-Efficacy and Cognitive Decline

Best Podium Presentation Rebecca Campbell (top right) *Self-reported Sensory Impairment is Related to Better Memory Performance*

Best Poster Presentation John Lynn (top center)

T1 Mapping for the Characterization of the Cortex throughout the Lifespan

Learning that Closes the Generation Gap

Mix Wayne State undergraduate students with neighboring older adults for a few hours each week and what do you get? Friends.

"I didn't think I would create this bond with seniors," said Tia Talton, a sophomore studying kinesiology. "It's been three or four years since I've had much contact with older adults." The students visited Detroit's St. Patrick's Senior Center as part of their Developmental Psychology Service Learning Laboratory class. Taught by Professor Hilary Ratner, the class is a project based addendum to Developmental Psychology that looks at changes throughout the lifespan.

Students choose from service learning sites serving youth, adults or older adults.

Tia chose St. Pat's because, "I wanted to learn about older adults, share their wisdom. It was an even better experience than I thought it would be." The students write weekly reflections and observations of their experiences in the field, connect a journal article about developmental psychology with their service learning, and write a final summary paper. "It really makes my day to hear what the students had to say about their experiences in the community," Dr. Ratner said. "It's clear that their

conversations at St. Pat's were meaningful to them and will be important in their lives."

Dylan Johnson, a senior at Wayne State studying political science, enjoyed learning history from people who've been there. "My history classes taught about racism from a book. The seniors here talk about trauma and racism from their life. One woman couldn't attend the elementary school next to her house because it was for white kids







Charlotte shares family photos that trigger memories of growing up in Detroit. She visits St. Pat's several times a month.

only. It makes it real," he said.

The original mission of the students at St. Pat's was to help older adults write their life stories. After two visits, though, "we kept straying from writing individual stories," said psychology sophomore Isabella Leone. "It was more topic driven with everyone wanting to contribute. We had lots of openended discussion of the life story questions and not so much writing." Topics included

memories of war, sexism, racism, working in coal mines, and disciplining children.

"We're better than visiting a museum," said Gerald "Jerry" Dajnowicz, a regular visitor at St. Pat's. "The young people were in historic shock. They can't believe we used pay phones. That we talked on party lines we shared with other people. We also got into serious things, like Vietnam – I was there – and living in housing projects. Our discussions are lively."

Isabella chose St. Pat's because she worked with young children before and wanted something different. When the St. Pat's team met before their first visit, they shared fears of how it would go. "We thought the older adults would be intimidating, maybe even mean. We didn't know what to expect," Isabella said. "But no one here is mean. They're funny, passionate. Lots of energy, fire and honesty."

The experience was so positive that most of the team planned to continue volunteering at St. Pat's after the class ended. "It opened my eyes to getting older," Isabella said. "How similar we are and how different. They were so inspiring."

A New Way to Check on Financial Decision-Making

The IOG proudly announces the launch of OlderAdultNestEgg.com (OANE). The website provides free online training, screenings and interviews to assess the financial decision-making ability of older adults and identify exploitation risks. The tools are designed for easy use by a long list of professionals who work with older adults: bankers, estate planners, attorneys, social workers, insurance agents, law enforcement officials, and employees of Adult Protective Services. Coming soon is a Caregivers Section with resources and screening tools for non-professional caregivers to assess the financial decision making and vulnerability of the person in their care.

The tools on OlderAdultNestEgg.com can establish a baseline of decision making,

245 Adult Protective Service

Employees trained in Older Adult Nest Egg Screenings from

Michigan, California, Florida, Kansas, Missouri, New York, Pennsylvania, & Tennessee

PLUS

120

Professionals in:

Care Management Advocacy Financial Health Care Law Enforcement Legal Services Psychological Physician Services Nursing Rehabilitation Researchers Social Workers

OANE Trained & Certified

confirm decisional abilities before a major financial transaction, measure psychological vulnerability to exploitation or undue influence, and assess a client after suspected exploitation. A deficit in financial decision-making capacity can be the first harbinger of broad cognitive impairment. Assessments are computer scored for risk and suggest next steps to evaluate and protect.

IOG Director Peter Lichtenberg, PhD, ABPP, is one of the country's leading experts in the prevention of financial exploitation in older adults. "We've heard from dozens of professionals grateful to have a way to evaluate these types of decisions in their clients," Dr. Lichtenberg said. "Nothing like this exists, especially in a user-friendly form and targeting financial decisions." He released the tools after more than five years of research and validation:

- 1. Financial Decision Tracker a 10-item interview with the older adult about a recent significant financial decision.
- Financial Vulnerability Assessment a
 deeper interview to assess the older

66

Forty-eight million US adults are 65 or older and worth billions of dollars in income and assets.

The pursuit of these **nest eggs** is one of the fastest growing consumer fraud issues today."



- Dr. Lichtenberg

adult's cognitive functioning, awareness and psychological vulnerability related to a financial decision.

3. Family & Friends Interview – a brief interview with an older adult's trusted relative or friend about the older adult's financial decision-making, designed to complement the Decision Tracker or Vulnerability Assessment.

Learn more by visiting **OlderAdultNestegg.com**.

Open an account, take the streamlined training and start using the assessment. Your account de-identifies and securely stores interviews for easy reporting and tracking.

Older Adult Nest Egg is one arm of the IOG's grant funded *Successful Aging through Financial Empowerment (SAFE)* program. SAFE includes financial literacy workshops, education about scams and fraud and, of critical importance, one-on-one counseling sessions with older adults and caregivers to help restore financial health. "Once a person learns their identity has been stolen or they have been a victim of a scam, the work really begins," said SAFE Director LaToya Hall. "We help people file police reports and consumer complaints, freeze credit reports, and do whatever else is necessary for their financial health to be restored. And it's all free."



SAFE recently added **Caregiver Empowerment** to their menu of services: one-on-one counseling for caregivers of older adults to help them manage someone else's money as well as their own. A Caregiver Empowerment counselor can meet in your home, at the IOG, or in a community setting. Assistance is safe, confidential and free. Contact LaToya to learn more at I.hall@wayne.edu or 313-664-2608.

$Memory \ \, \text{from page 1}$

changes of early Alzheimer's or dementia. Early diagnosis of brain changes is the gold standard, giving more time for lifestyle and medical interventions to slow or perhaps one day stop the further loss of memory and function.

Dr. Voyko Kavcic, a faculty member of the IOG, heads the \$3.3 million grant from the National Institutes of Health. It will evaluate community-based screening with EEG and simple computer-based cognitive tests to differentiate persons with and without mild cognitive problems or even dementia. Over the next five years, his team will study 500 older African American men and women who are complaining of memory loss but have not been diagnosed in clinical assessments. African Americans are twice as likely to develop dementia as their Caucasian counterparts.

Dr. Kavcic is collaborating closely with Dr. Bruno Giordani of the University of Michigan. Together, they will co-enroll all participants in the NIH-funded Alzheimer's Disease Research Center at U-M (part of the Michigan Alzheimer's Disease Center). This will allow all participants to receive medical and neurological screening and some basic tests of cognitive ability to confirm the diagnosis found through Dr. Voyko's tests. This will be a doublecheck on whether the participant has no impairment, mild cognitive impairment, or something more serious.

Recruits must be at least 65 years of age, live independently (either in their own home or senior housing) in the Detroit area, and believe their memory or some other aspect of thinking isn't working as well as it used to. The first visit, which can be done at the IOG lab or at a community setting, takes 4-6 hours and includes paper/pencil tests of cognitive performance and a physical and neurological exam. If tests show mild cognitive impairment, the person is sent to the U-M team for additional tests to confirm the diagnosis. Patients without impairment receive a second visit, about three months later, for more computerized test-

If this approach works, we will have developed a low-cost, easy-to-administer method for early identification of person's whose memory concerns may be the first signs of a continued decline in memory."

- Dr. Kavcic

Dr. Kavcic and research assistant Austin Elluru, a WSU graduate student in psychology, adjust the EEG cap of a potential participant.

ing and the actual EEG. They receive a \$100 gift card for completing both visits. Tests are repeated twice a year for three years.

"Our pilot study showed that older African Americans accepted the computer testing and EEG very well," Dr. Kavcic said. "The EEG is not painful, but we do use sensors on the scalp. Thick braids can interfere with the sensors, so we try to schedule the visit during a time when braids and other tight hairstyles can be undone to accommodate the cap."

The study's goal is to determine which EEG and computer-based measures work best to predict the direction of brain function over three years:

- 1. Normal to normal
- 2. Normal to mild cognitive impairment,
- 3. Normal to dementia or Alzheimer's

"If this approach works, we will have developed a low-cost, easy-to-administer method for early identification of person's whose memory concerns may be the first sign of a continued decline in memory or in other cognitive areas that continue to advance," Dr. Kavcic said. Such an advance could buy extra years of interventions for persons at high risk of dementia.

Right now there is no effective pharmacological treatment for dementia or Alzheimer's. "But research has shown that a healthy lifestyle and certain cognitive training can build cognitive reserve and help strengthen the brain against dementia," Dr. Kavcic said. "If you have two persons with mild cognitive impairment, the one with a stronger more conditioned brain is likely to live longer without impairment that affects daily functioning."



To volunteer for this study or learn more, contact Dr. Voyko's research lab at the Electra Study at 313-577-1692 or voyko@wayne.edu

Participants must be African American, at least 65, and believe their memory is failing even though they have no diagnosis of memory problems from a healthcare provider.

"Outstanding Value" of the IOG

Every six years, an advisory committee reviews the IOG and decides whether to recommend it for re-charter. Last fall, the team

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Dr. Lichtenberg and trainee Caitlin Cassady discuss Caitlin's research into how decisions are made as people near end-of-life.

of four professors from across the university unanimously recommended to approve, citing Dr. Lichtenberg's "exemplary leader-

ship," and the "outstanding value" the institute provides to faculty, students and the greater Detroit community. They were also impressed with the IOG Endowment established in 2018 and now at nearly \$1.2 million, our community outreach, and the 22 years of continuous NIH grant funding for our research to reduce health disparities in older African Americans and

increase minority scholarship in aging.

Other strengths cited in the report include funds and mentoring to support junior faculty as their research matures, a novel and successful fund-raising model, and the IOG's widespread interdisciplinary approach in grants, publications, research, training programs and outreach.

"The advisory committee did an intensive review of every aspect of the IOG including interviewing staff, faculty, students and volunteers," Dr. Lichtenberg said. "We are pleased the result is a resounding acknowledgement of the value we provide. The IOG is well positioned to make the next six years even better than the last."

PARTNERSHIP CORNER

An Older Adult Community Built on Empowerment

Henry Ford Village is home to hundreds of happy older adults. As Adam Sterling, residential life director at the 35-acre Dearborn campus likes to say, "This isn't senior living. This is *really* living. Interests and passions are created, grow and deepen." Seniors help run the town-like community, from seats on the

board to determining activities, every area is a reflection of senior needs and wants. "Residents share their experiences and everyone benefits," Adam said. "After all, this is their house."

Exceptional programming helped Henry Ford Village win the 2018 Pinnacle Award from NuStep for the senior living community with the best whole-person wellness and lifestyle programs and culture. Judges cited the extraordinary level of empower-

ment enjoyed by residents as they create and lead 150 different programs.

The Village's partnership with the IOG

HENRY FORD VILLAGE
Independent Living | Assisted Living | Health & Rehabilitation
A continuing care retirement community.



includes continuing education lectures chosen by residents and staff and the year-long BrainStorm workshops for residents to teach brain health and memory preservation. Residents attended a sample BrainStorm class last year and enjoyed the fun-filled activities. "They begged for more, so we made it hap-

pen," Adam said.

Bruce Blalock, executive director and CEO of Henry Ford Village recognizes the value of a university-based partner dedicated to research and education on aging issues. "The IOG is a tremendous resource to us." he said. "As we strive to provide the very best lifestyle and programs to our older adults, the IOG's academic and professional insights contribute to our vision and program creation."



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Donate to the IOG Endowment . Our goal of \$1.5 million by 2022 will generate more than \$60,000 each year for IOG projects and programs while preserving the endowment's principal. We've raised more than \$1.1 million so far. With your generosity, we can raise more – and do more – to help older adults everywhere.	
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Would you like to support research into critical issues impacting aging?