Older Adults Not Seeking Help for Finding Lower-Cost Medications

According to the new University of Michigan National Poll on Healthy Aging, most Americans older than 50 take two or more prescription medicines to prevent or treat health problems, and many say the cost weighs on their budget. The new data revealed that many older adults are not getting—or asking for—as much help as they could from their physicians and pharmacists to find lower-cost options.

The nationally representative sample included 2,131 individuals, split approximately equally between those ages 50 to 64 and 65 to 80. The online poll asked a range of prescription drug–related questions to try to understand how prescription-related issues affect those in the pre-Medicare and Medicare age range.

Twenty-seven percent of respondents said their prescription drug costs posed a financial burden. One in six respondents reported what the researchers call a “high complexity” of prescription management (i.e., taking six or more prescriptions and seeing more than one physician); they were more likely to say their drug costs were a problem. Among those who said their drug costs posed a burden, 49% had not talked to their physicians and pharmacists for help.

Although addressing the broader concern of drug costs will require shifts in policy, patients can take immediate steps by asking their physicians and pharmacists for help.

Exercise Program Helps Frail Older Adults Perform Activities of Daily Living

An exercise program comprised of gentle exercises and taught by home care aides can help frail older adults perform basic daily activities, according to a new study in The Gerontologist. The program, called Healthy Moves for Aging Well, includes three low-risk, gentle exercises: a seated step-in-place, arm curls, and an ankle point-and-flex. Aides remind clients of their health goals and provide motivation to complete the exercises daily during regular visits.

Researchers examined the outcomes of 54 clients ages 63 to 101 living in Chicago who participated in the program in a Medicaid and state-funded home care setting for 4 months. They saw improvement in the ability to perform basic activities (e.g., getting to the toilet, pouring a drink from a carton) and light daily tasks (e.g., preparing meals, doing laundry).

Ninety-eight percent of clients reported high levels of satisfaction.

Rate of Death from Alzheimer’s Disease Increased >50% in Past 15 Years

The rate of death from Alzheimer’s disease (AD) in the United States increased by more than 50% in the past 15 years, according to new data from the Centers for Disease Control and Prevention. The increase is in part because Americans are living longer, but it is also because medical professionals can identify risk factors, recognize symptoms, and diagnose the disease sooner.

AD is now the sixth leading cause of death nationwide. It is estimated that 1 in every 10 Americans 65 and older has Alzheimer’s dementia. Guidelines for diagnosing AD were updated in 2012 to include use of biomarkers or genes to determine risk for the disease, in addition to family report, physician judgment, and neurological and cognitive examination.

The problem is finally being recognized by local and state governments, which are forming plans to care for an aging population and an estimated tripling in the cases of AD in the next 30 years.

Leisure Activities Reduce Blood Pressure in Caregivers of Spouses With Alzheimer’s Disease

Going for a walk outside, reading, listening to music—these and other enjoyable activities can reduce blood pressure for older adult caregivers of spouses with Alzheimer’s disease (AD), suggests a study in *Psychosomatic Medicine*. The study included 126 caregivers enrolled in the University of California San Diego Alzheimer’s Caregiver Study, a follow-up study evaluating associations among stress, coping, and cardiovascular risk in AD caregivers. Participants included 89 women and 37 men (average age = 74 years) providing in-home care for a spouse with AD. As part of annual interviews over 5 years, caregivers provided information on how often they engaged in various leisure activities. These ratings were analyzed for association with blood pressure over time, with adjustment for demographic and health factors.

Caregivers reported high levels of enjoyable activities—most said they spent time outdoors, laughing, watching TV, listening to music, and reading or listening to stories. Approximately one half of caregivers said they exercised frequently. Caregivers who more frequently engaged in leisure activities had lower mean arterial blood pressure. In follow-up analyses, these activities were associated with a significant reduction in diastolic pressure, although not in systolic pressure.

Researchers have been conducting a clinical trial to examine the effect of a therapy to increase leisure activities.

New 7-Step Video Aims to Reduce Falls in Older Adults

Approximately one third of older adults will be involved in an accidental fall this year that diminishes their quality of life. That number increases with age. Emergency physicians have created a video (i.e., “7 Step Fall Challenge”) designed to provide older adults who have fallen in the past easy steps to avoid future falls:

• Step 1: Strength and Balance. Focus on improving strength and...
balance by exercising regularly. Options include tai chi, yoga, and other exercises that improve flexibility and endurance.

• Step 2: Home Safety. More than one half of falls occur in homes. Remove trip hazards (e.g., boxes, furniture) from heavy traffic areas. Create a wide pathway between rooms.

• Step 3: Medication. Many medications can cause lightheadedness, dizziness, or sleepiness, which can increase risk of falling. If these side effects occur, work with a physician or pharmacist to find other options that might be available.

• Step 4: Vision. Have eyes examined every year.

• Step 5: Dehydration. Unless told otherwise, try to drink six to eight glasses of water per day.

• Step 6: Feet and Footwear. Poor-fitting shoes, clogs, flip-flops, and heels increase risk of falling. Wear supportive and comfortable shoes while walking. Talk to a physician about seeing a podiatrist.

• Step 7: What to Do If You Fall. Relax the body to reduce impact. Stay calm and do not try to stand too quickly. Keep a mobile or cordless phone with emergency numbers within easy reach.


Poor Sleep May Be Linked to Risk of Alzheimer’s Disease

Poor sleep may be a sign that individuals who are otherwise healthy may be more at risk of developing Alzheimer’s disease (AD) later in life than those who do not have sleep problems, according to a new study in Neurology.

Researchers recruited 101 individuals (average age = 63 years) who had normal thinking and memory skills but who were considered at risk of developing AD (either having a parent with the disease or being a carrier of a gene that increases the risk for AD). Participants were surveyed about sleep quality. They also provided spinal fluid samples that were tested for biological markers of AD. Researchers found that those who reported worse sleep quality, more sleep problems, and daytime sleepiness had more biological markers for AD in their spinal fluid than those who did not have sleep problems. Those biological markers included signs of amyloid, tau, and brain cell damage and inflammation. There was no link between biological markers in spinal fluid and obstructive sleep apnea.