

# **Secrets To Successful Aging**

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# What I Am Going To Talk About Today (It May Surprise You)

- Many “non-medical” and “para-medical” factors trump diseases and diagnoses in conferring a long and healthy life
- Examples of Non-Medical Factors
  - The way you view aging
  - How you form social networks
  - Money: Making It, Using It, Sharing It
- Examples of “Para-Medical Factors”
  - How you interact with the health care system
  - How docile or proactive you are in your care
  - The home you live in and the products you use
- Many factors are modifiable, and there is scientific evidence

A Lucky few of us have *Longevity Genes*

People with *exceptional longevity (>95)*,  
often have one or more of several genes  
that confer long life *without disability*

## So What About the Rest Of Us “Mere Mortals”? It’s a “Bad News/Good News” Story

- The Bad News: Only a tiny % of the population has a gene
- The Good News: For the rest of us, genetics over-estimated
  - Nature (genes) about 20%
  - **Nurture (environment) about 80%**
- We Geriatricians Have Data About The “Environmental” Factors and These “Secrets” Are Lost on the General Public (What You’re Doctor Won’t Tell You About Getting Older)

**Seven Secrets Your Doctor Won't  
Tell You About Getting Older**

## Geriatrician's Secret #1: Money

- Money is, on average, one of the most compelling predictors of longevity (and quality longevity)
- Not just about money assuring access to more or better care, its also about how you got money
  - Discipline and Control over Life Course
  - Curiosity
  - Grit and Perseverance

*These habits and traits should persist as we age and even after sufficient wealth is acquired!*

## Too Much Care: How This Happens

- “Cookbook” Medicine
- The Over-screening of America
- Marketing tests directly to consumers
- Too many specialists
- A “supersize me” culture: more is better
- Direct to Consumer Drug Advertising

## What You can Do to Protect Yourself From Getting Too Much Care (Or Too Many Medicines)

- Understand the rationale for every medicine or test you get
- Subspecialty Care is wonderful, but there's a whole person attached to all those body parts and organs
- You need to take responsibility for your medical records, especially your medication list
- The Electronic Medical Record is a good thing in this regard, but we are not completely there yet
- The Most Important Primary Care Provider: You
- Partner with your trusted physician



## Geriatrician's Secret #3

### Ageism and Too Little Care as We Get Older

Study After Study Show Ageism in Medical Care Wherein Care is Withheld on the Basis of Age Rather Than Prognosis

- Healthy woman with early breast cancer not offered the most up to date or modern treatment “due to age”
- Older man with Coronary Artery Disease Not offered angioplasty or bypass because they are “too old”

*When you or a loved one is not offered a treatment simply because of age, ask the doctor to explain his or her rationale!*

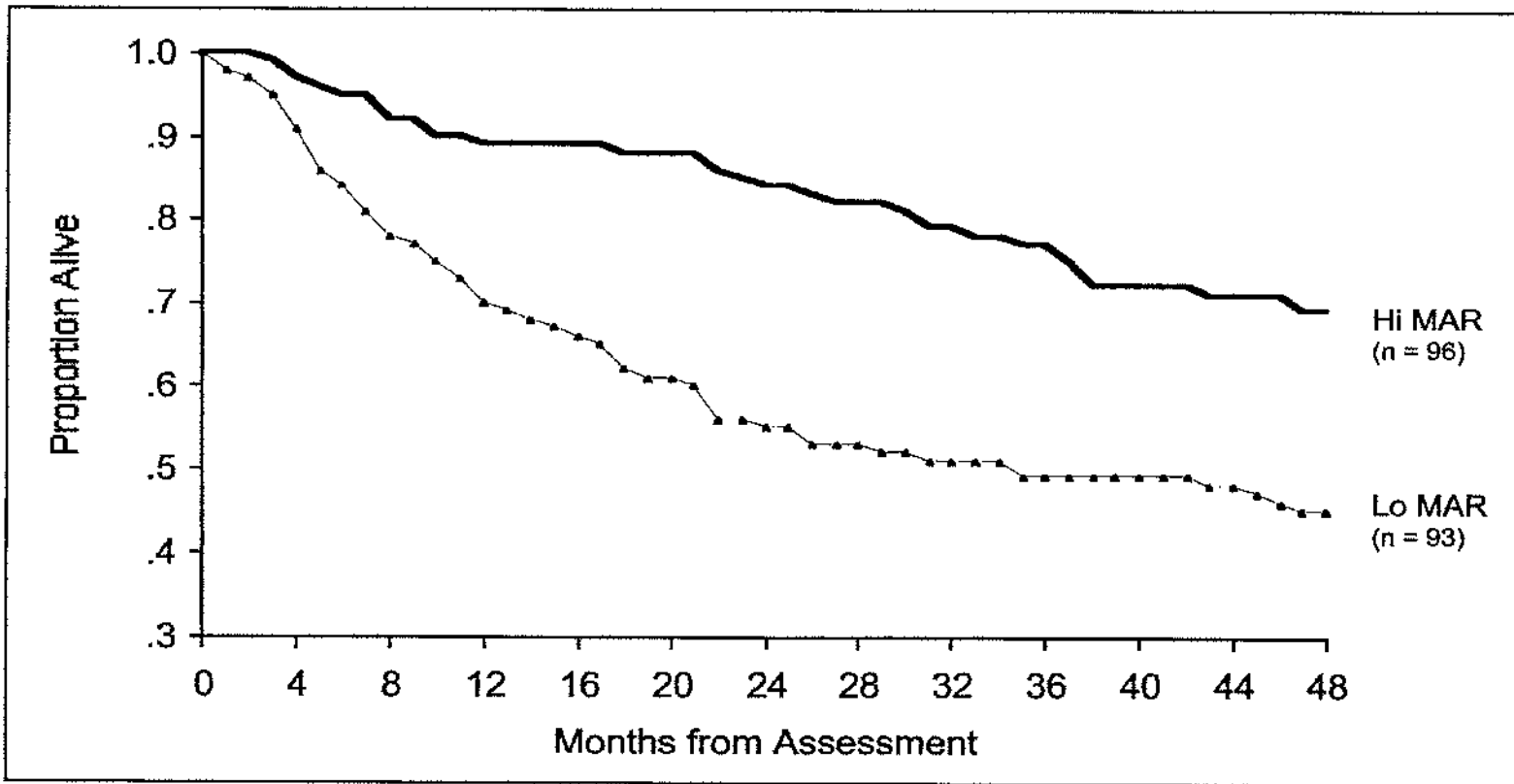
## Geriatrician's Secret # 4

### Size and Quality of Social Networks

- Shrinking social networks predict bad things
- Robust social networks are quality of life sustaining
- The data is quantitative, not “soft” social science



# Survival of Patients with Heart Failure Based on Marital Quality



## Geriatrician's Tip #4

### Build Substantive Social Networks And Relationships

Be the annoying guy (or gal) who is always trying to get together.  
You'll live longer and better.



## Geriatrician's Secret # 5

### Your Perceptions About Aging Influence Longevity

- Attitudinal questionnaires about aging have been scientifically validated and given annually to boomers for decades
- Sample Questions:
  - As you become older you become less useful
  - It is normal to become disabled as you age
  - Things keep getting worse as I get older
- Followed “half glass full” and “glass half empty” subjects of all ages after controlling for medical problems...

# Longevity in People With High Versus Low Perceptions About Aging

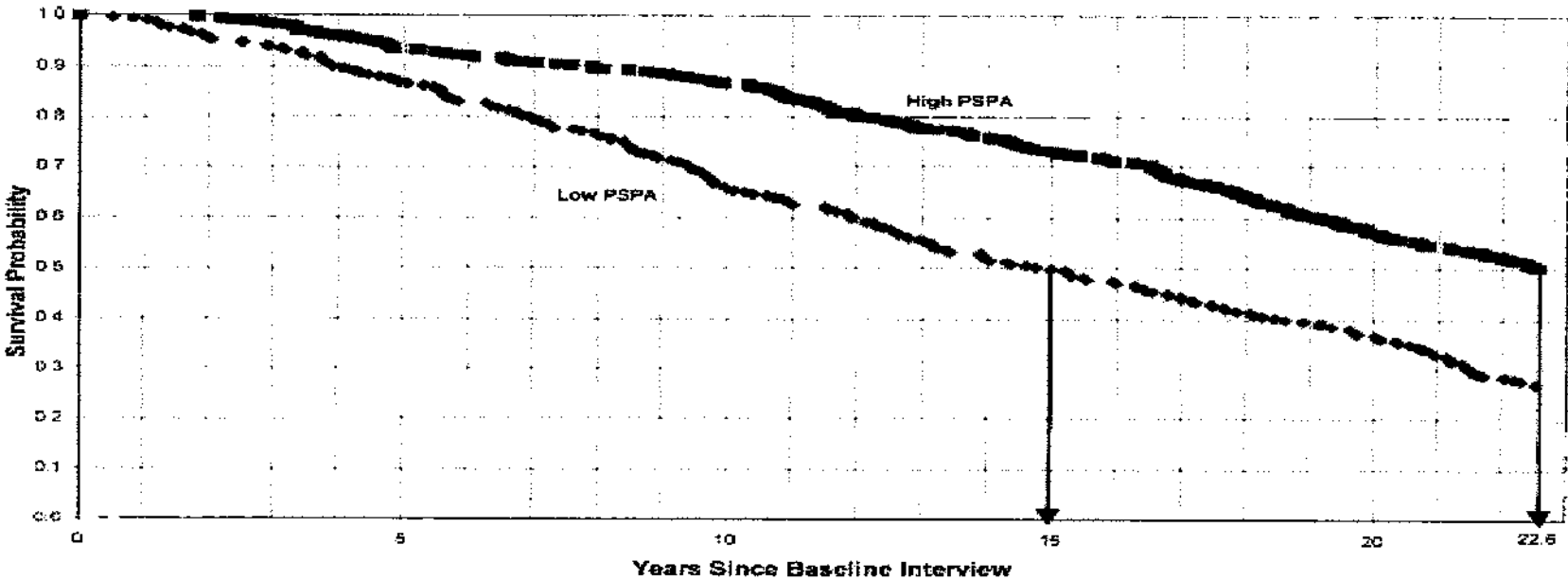
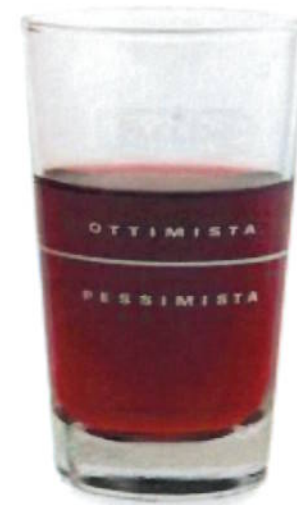


Figure 1. Influence of positive self-perceptions of aging (PSPA) on survival. Arrow indicates median survival.

## Geriatrician's Secret # 5: Your Perceptions About Aging Influence How Long and Well You will Live

If you think your beliefs about aging have no bearing on what the rest of your life will be like, you might want to adjust your attitude



## Geriatrician's Secret #6

### Your Home Can Put You At Risk or Promote Longevity

- Your home and what's in it can make you "seem" sick
- I'm not talking about radon or mold
- Most dwellings and furnishings in existence today were created for people in their 20's by people in their 20's
- "Excess Disability" results from these design problems
- There are many simple fixes that I will describe by room

[www.thiscaringhome.org](http://www.thiscaringhome.org)

Is a great resource



# Your Bathroom

- The most dangerous room in the home
  - Wet, hard surfaces
  - Nothing but your birthday suit and the tile
  - No telephone if you get into trouble
- Some things to consider
  - Stylish grab bars
  - A tub chair and hand held shower hose
  - Anti-scald devices

## Lighting

- Low lighting is a major cause of falls
- You may need brighter bulbs
- Make sure they're safe for the fixture
- Concentrate on path lighting too
- Automatic motion sensors

## Flooring Surfaces

- Try to use the same or similar surfaces throughout
- Surface transitions are where falls often occur
- Secure rugs using double sided carpet tape
- Deep carpeting is a bad idea
- Avoid shiny surfaces, especially with eye issues
- Vinyl has more “give” easier to stand on

## Furnishings

- Contrast seating and floor surfaces with different colors
- Chairs should have arms
- Sofas should not be too deep or low
- Rather than buy new furniture replace cushions and coverings

## The Kitchen

- Use ergonomically designed utensils like can openers and peelers if you have dexterity issues
- For patients with memory problems label cabinets with the items inside to promote safe cooking
- Stoves that auto extinguish fire or won't work without a pot sitting on them

## Other Cool Technologies

- Doorbells that vary lighting when someone rings for patients with hearing impairment
- Alarm clocks that rattle your pillow
- Wrist watches and apps that remind you when to take your medications
- Medication dispensers that tell you (and your doctor) when you've missed a dose
- Unobscured home monitoring systems that keep you safe with dignity and privacy

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# Geriatrician's Secret #7

## Meaning and Purpose in Life Promote Longevity

### The Life Meaning and Purpose Questionnaire

1. I feel good when I think of what I've done in the past and what I hope to do in the future
2. I live life one day at a time and don't really think about the future.
3. I tend to focus on the present, because the future nearly always brings me problems.
4. I have a sense of direction and purpose in life.
5. My daily activities often seem trivial and unimportant to me.
6. I used to set goals for myself, but that now seems like a waste of time.
7. I enjoy making plans for the future and working them to a reality.
8. I am an active person in carrying out the plans I set for myself.
9. Some people wander aimlessly through life, but I am not one of them.
10. I sometimes feel as if I've done all there is to do in life.

## Geriatrician's Secret #7

### Meaning and Purpose in Life Promote Longevity

Virtually every “successful ager” I take care of has one, two, or three things that gives their life meaning:

- Art or Music (Their own or others)
- Philanthropy or Not For Profit Work
- Religion
- Grandchildren
- Travel and/or World Events
- Business



# What Your Doctor Won't Tell You About Getting Older (And What You Can Do About It)

1. Continue to stoke the attributes that brought you success
2. Don't be a victim of medical ageism and under-treatment
3. Also recognize that "more can be less" with regard to medicine as we age; question the rationale for, and safety of, every treatment and medication you are offered by anyone
4. Build and maintain robust social networks – it takes effort
5. If your attitude about aging is poor, adjust it before it becomes a self-fulfilling prophecy
6. Modify your home and its contents to avoid excess disability
7. Cultivate at least one thing that gives your life meaning and purpose; it extends quality longevity

# Accepting Assistance

- Resistance is the Rule, Not the Exception
- Many Reasons
  - I don't want someone in my home
  - Fear of losing control
  - My adult children are meddling
  - This is the first step on a slippery slope

# The Truth Is

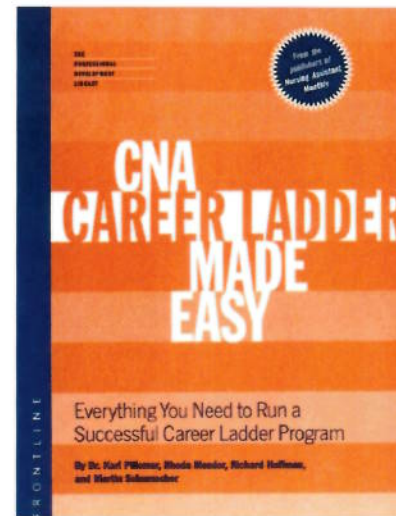
- By accepting a little assistance you are more likely to stay in your own home as opposed to having to leave
- “Titrated” Assistance prevents catastrophes
- Such assistance can ameliorate social isolation
- There is a way to do this with dignity and respect

# The Problem

- Technology is great, but it will never completely replace the need for a human being with direct skills; its an augmentation
- There is a profound workforce crisis involving direct care workers in long term care
  - Poor wages, No benefits, no job security
  - Little or no regulation
  - Competing industries hire the potential workforce
  - Kids are cute (ageism)
- Disastrous results wherein untrained people are dealing with the most vulernable members of society
- “McDonalds for Everybody”

# Cornell Related Programs Aimed At Trying to Fix this Problem

- Better Training
- Career Pathways for Non College Bound High School Seniors
- Improving Wages and Benefits
- Teaching Hard and Soft Skills
- Increasing Professionalism
- The Nursing Assistant Monthly
- Books and Training Materials
- A New Company



# CompassCare

- Analogous to “Concierge Medicine ”Movement
- Founded by Cornell Gerontologists and Other Faculty
  - Medical School Mark Lachs MD MPH
  - Hotel School Judi Brownell PhD
  - Human Ecology Karl Pillemer PhD, Rhoda Meador PhD
- Evidenced Base Practice All these Areas
- Paying People a Proper Wage for a Meaningful Career
- Highest Levels of Customer Service and Accountability
- Customized Care Respectful of an Older Person’s Wishes



## Some Unusual Features

- Extraordinary low ratio of interviewees:hires
- Exceptionally comprehensive training “hard and soft skills”
- Zero percent no show rates
- Physician and Nursing Leadership unheard of in the industry
- HIPPA complaint electronic communication with families
- Specifically tailored activities
- “The answer is yes, what’s the question?”
- “Matching” clients and caregivers culturally and intellectually