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Healthy Aging Woman

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Objectives

1. Describe the normal aging processes and pathological changes that affect healthy aging in women
2. List strategies for optimizing healthy aging in women



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Outline

1. What is Healthy Aging
2. Healthy Body
3. Healthy Mind
4. Healthy Soul



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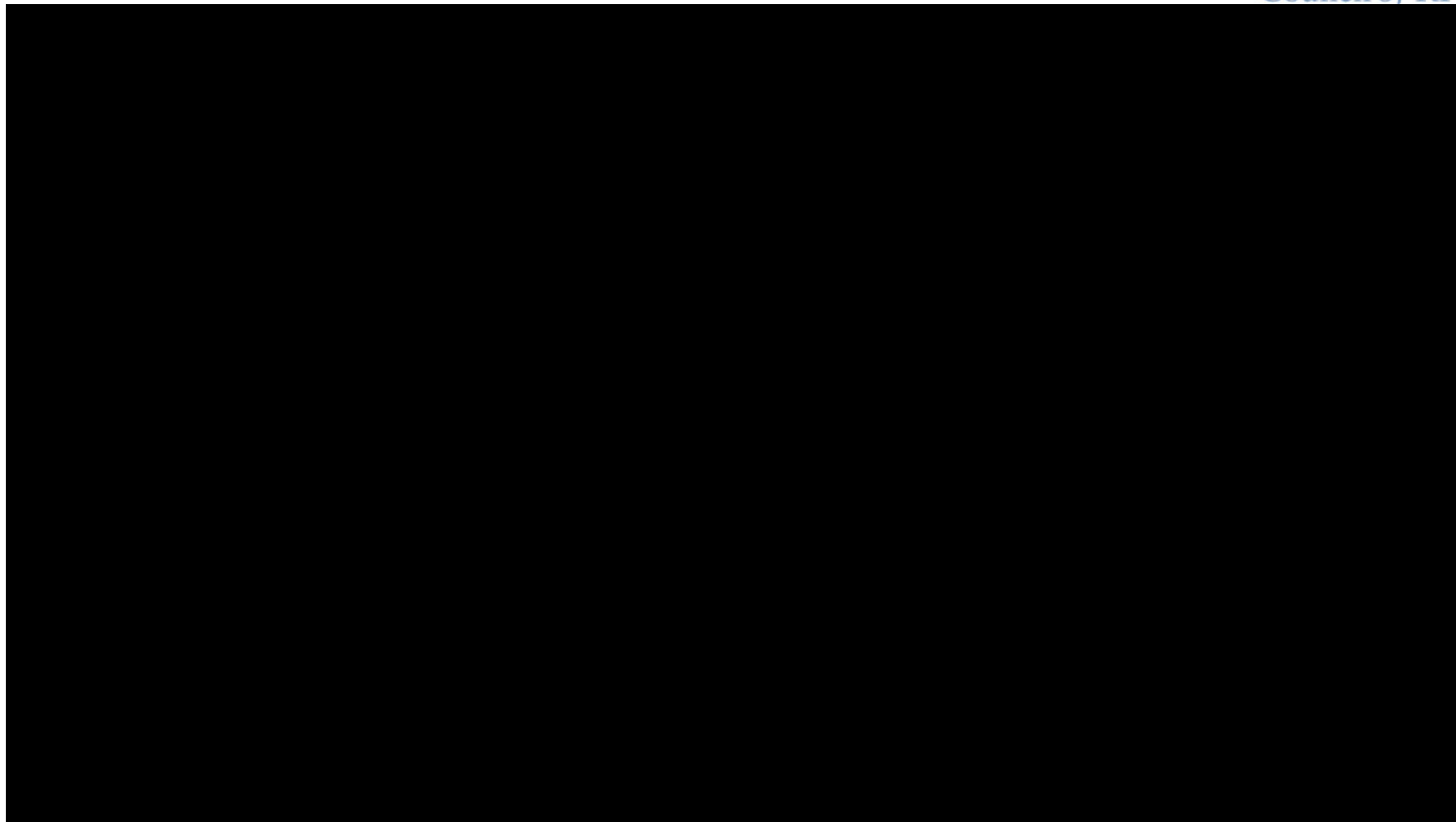


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Rhode Island By the Numbers

- 2016 Census Estimates
- 1,056,000 residents
- 149,755 aged >65
 - 14.4% of population
 - 8th in the nation
- 22,707 aged >85
 - 2.1% of population
 - 5th in the nation
- Newport County has oldest population 17% >65



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What is the goal of Health Aging?

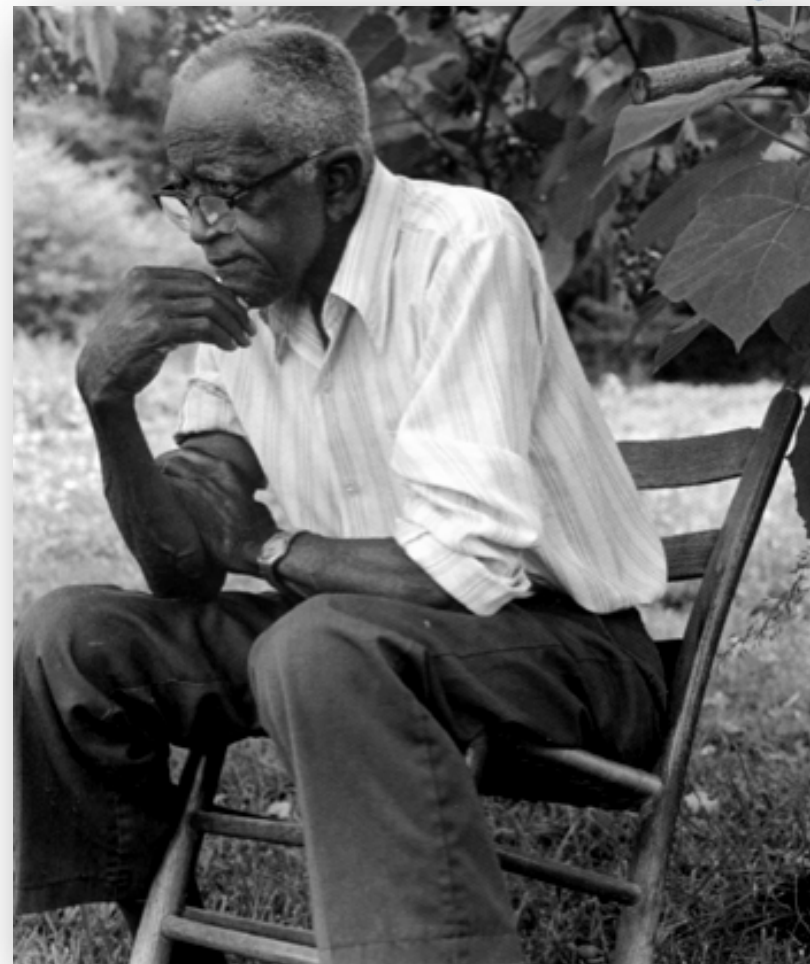
- To optimize every individual's vitality or quality of life or function over the life cycle?
- To enable individuals to live as long as possible?
- To enable each person to work as long as possible?
- To minimize health care utilization / costs?
- To plan services to match needs?
- All of the above?
- Other?



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What healthy aging is:

- WHO definition
- A state of complete physical, mental and social well-being and not merely the absence of disease or infirmity
- Allowing each individual to live their best lives possible at every stage

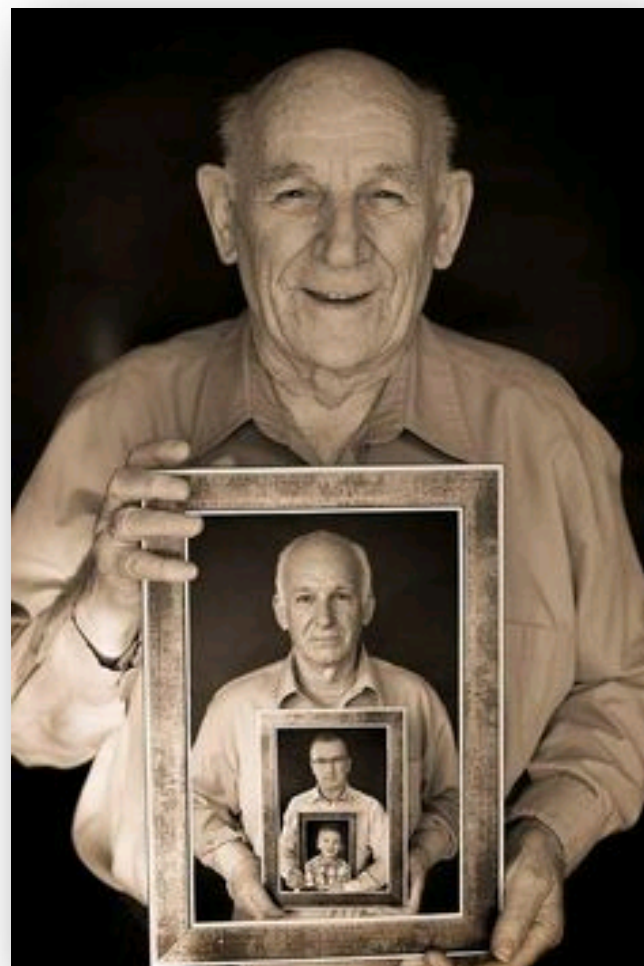




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Healthy Aging is not...

- A process of turning back the clock





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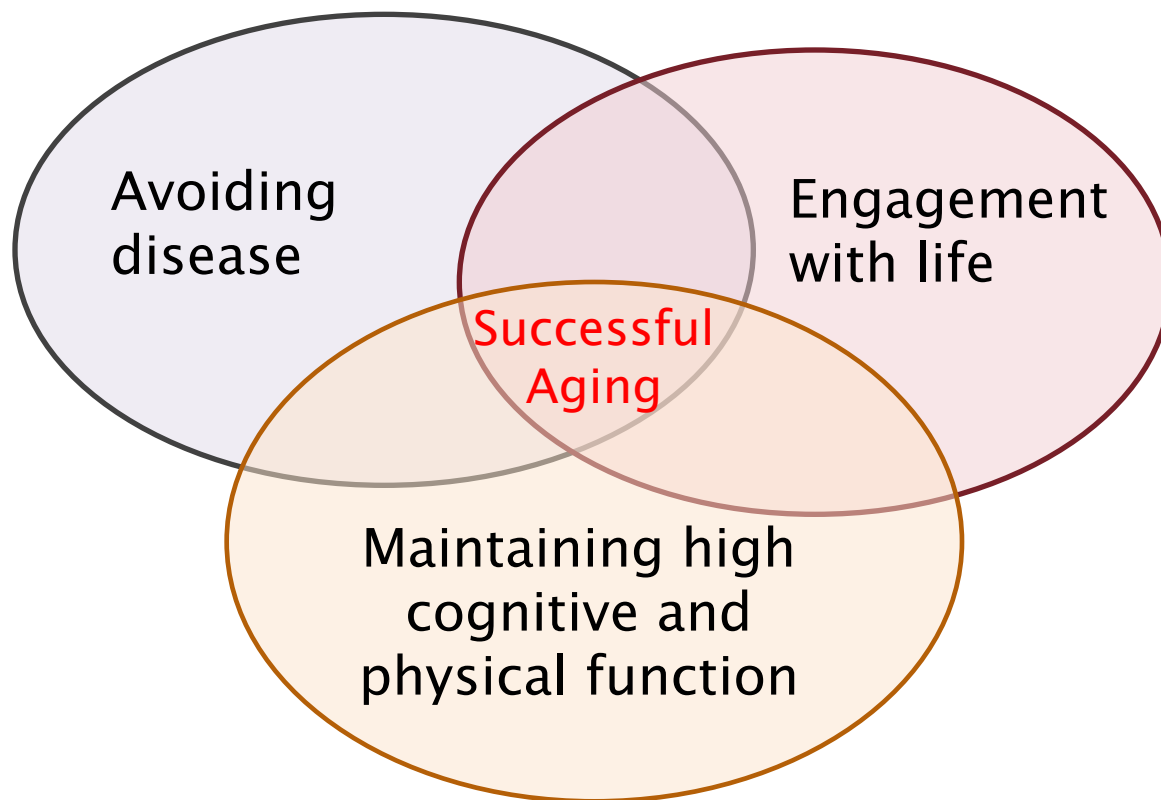
Figuring out a name

- Healthy aging
- Successful aging
- Active aging
- Aging well
- Optimal aging
- Active and healthy aging
- Robust aging
- Positive aging
- Effective aging
- Productive aging

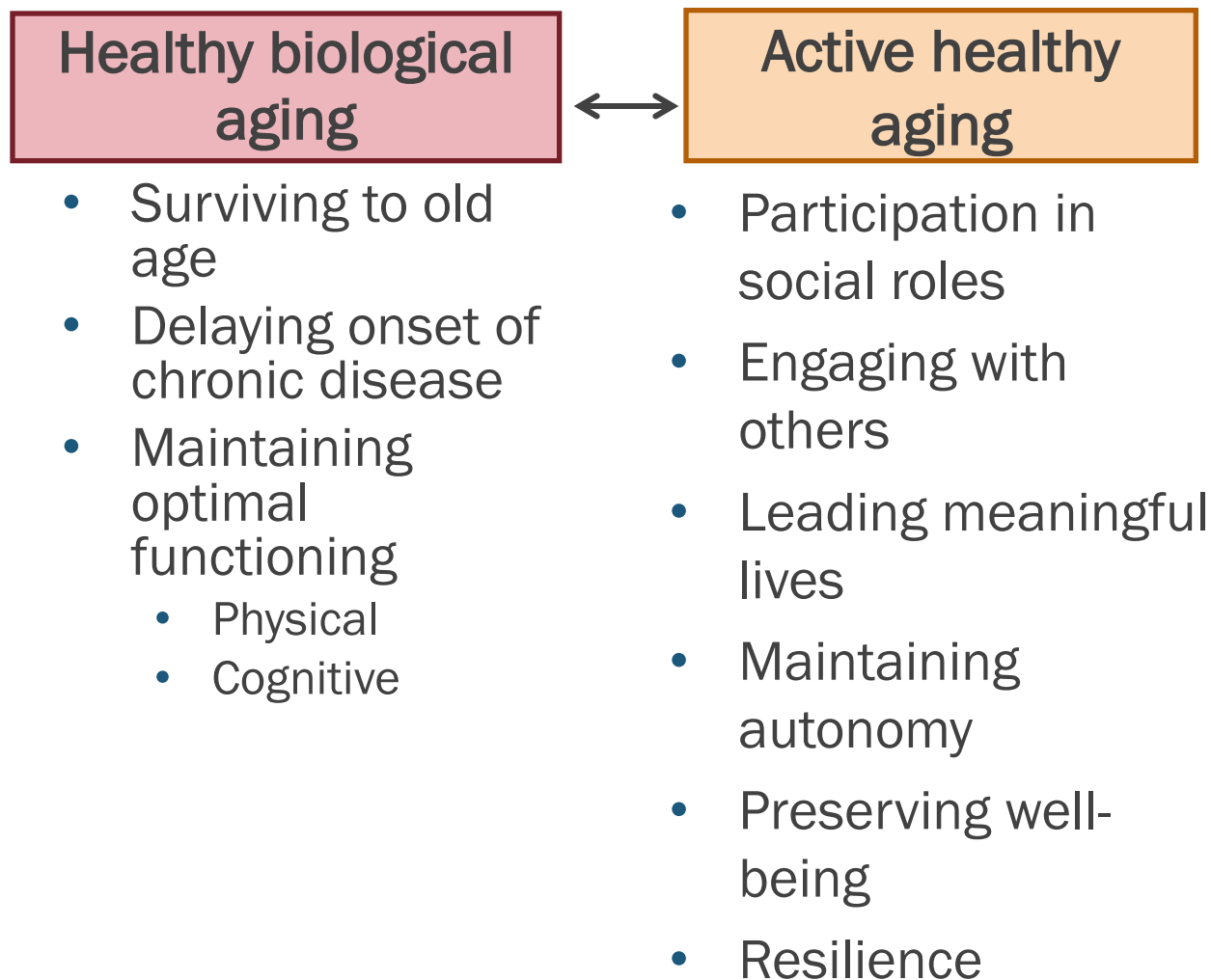


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“Successful” aging



Rowe and Kahn, Successful Aging, 1998





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Starting with an individual

- **Ask questions**
 - What is most important to you as you age?
 - What are you willing to do to achieve that goal?
- **Know about resources**
 - Financial
 - Social
 - Clinical
- **Provide perspective**



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Heath Promotion

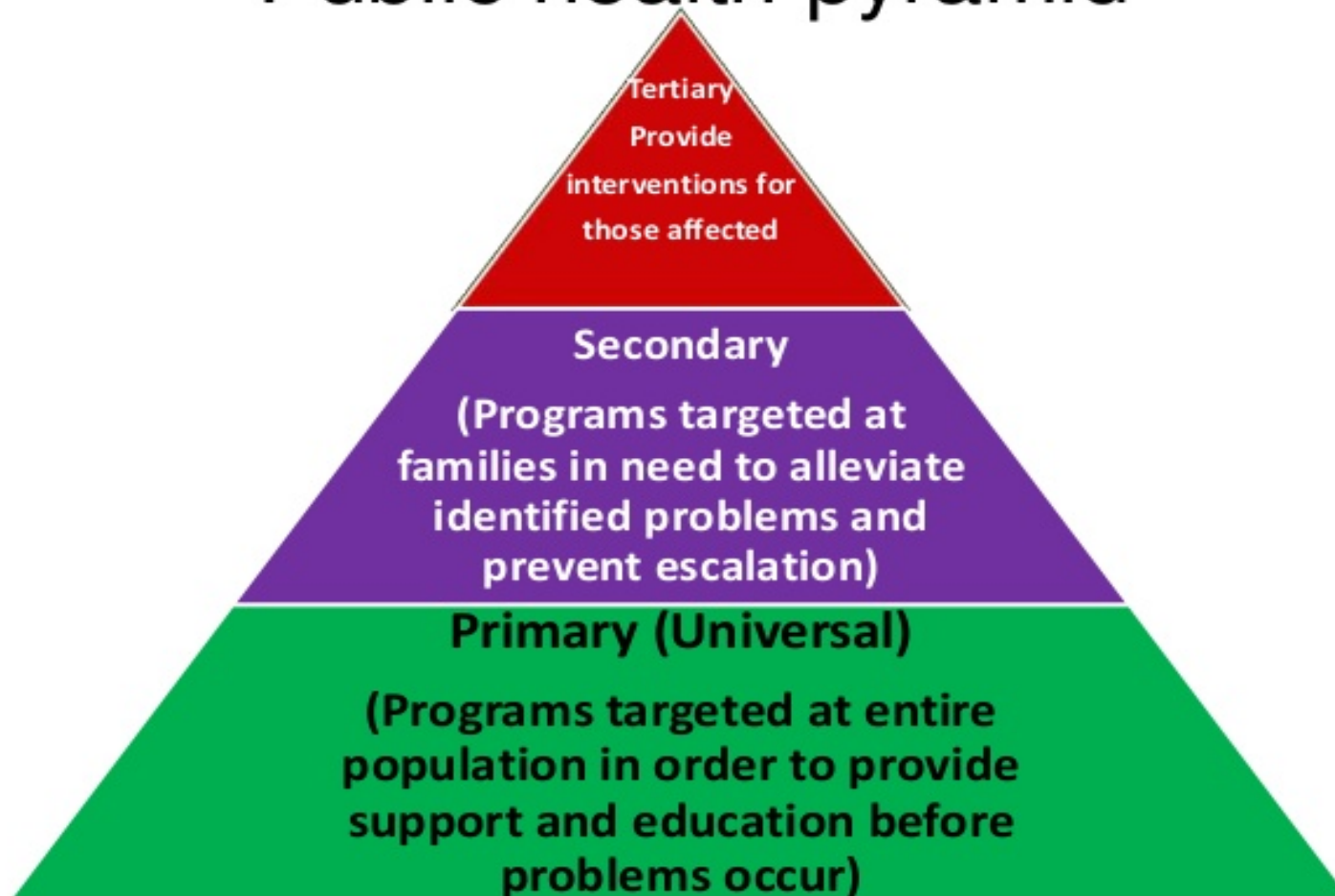
- “Process of enabling people to increase control over the health determinants and thereby improve their health”
- Translate our current knowledge on health promotion into refining, implementing and sustaining healthy aging interventions
 - Application at individual and community level
 - Support health throughout the aging continuum
- Use the Levels of Prevention Model (Leavell and Clark in 1975) as an approach to promote healthy aging



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Levels of Prevention Model

Public health pyramid



Prevention Strategies

- Maintain efforts (US Preventive Services Task Force) for disease prevention
- Some Examples:
 - Immunization, Motor Vehicle Safety, Cancer Screening, Smoking Screening and Cessation Counseling, Alcohol Use Screening and Counseling, Bone Health Counseling and Screening, Hyperlipidemia , Diabetes Screening and Management

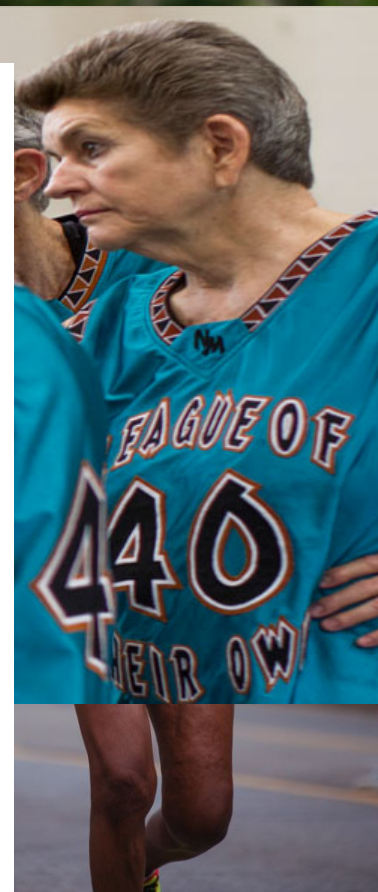


Longevity Studies

- **Genetic Studies** – no specific or group of genes have been found to promote longevity. APOE4 gene is noted to decrease longevity. (Murabuti et al J of Geron)
- **Boston U Centenarian Study** – Dr. Perls has been studying centenarians and their siblings for 2 decades
 - Strong genetic component
 - Disability is compressed till mid- to late 90's
 - Found 281 genetic markers that predict 61%
 - Older mothers have a longevity benefit
 - A relaxed, resilient and positive attitude permeates most centenarians



2. Healthy Body



- Senior Olympics



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<https://player.vimeo.com/video/24026838>



Cardiorespiratory Fitness - Primary

- **Healthy lifestyle behaviors**
 - physical activity, nutrition, ideal body weight, avoid tobacco and excess alcohol
- ***Example: Physical Activity***
 - Physical activity has benefits into the 8th decade
 - 30% reduction of mortality
 - 20%-35% lower risk for CVD and stroke
 - 30%-40% lower risk for type 2 diabetes
- **Limitations : Optimal balance and intensity**



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Cardiorespiratory Fitness - Secondary

- Optimizing chronic risk factor and effective disease management
 - Hypertension, hyperlipidemia, diabetes mellitus, proactive medication management
 - Healthy lifestyle behaviors



Cardiorespiratory Fitness - Secondary

- ***Example: Hypertension Management***
 - BP (<150/90 mm Hg) substantially reduces CVD and strokes in adults 60+ years (Weiss, Freeman, Low, & et al., 2017)
 - Limited evidence that lower treatment targets (<140/85 mm Hg) has benefits
- Limited understanding of benefits and harms for institutionalized, significant multimorbidity, frail and dementia patients



Cardiorespiratory Fitness – Tertiary

- Rehabilitation approaches, adaptive equipment, palliative care
- ***Example: Cardiac Rehabilitation***
 - Older patients with CVD have high prevalence of frailty and associated with worse outcomes
 - Exercise training demonstrate improvement in inflammatory/metabolic parameters of CVD, functional status, exercise tolerance and QOL
- Limited understanding on long-term impact and whether alteration in the course of frailty



Benefits of regular Physical Activity

- Promotes mental and cognitive health – Prevents dementia
- Increases physical strength
- Helps maintain a healthy weight
- Restores restful sleep
- Reduces arthritic disability
- Maintains or improves heart health
- Improves blood sugar control
- Keeps bones strong
- Improves sexual health



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How often should Older People Exercise and For How Long?

- Ideally, older adults should do at least 30 minutes of aerobic activity at least 5 days each week, and muscle-strengthening and balance training for 10 minutes at least 2 days each week. It may take months to reach these goals.
- But the most important goal is to avoid inactivity. You should do the amount that is possible according to your ability, and work toward increasing that amount gradually.



3. Healthy Mind

- Use It or Lose It
- Apps – Lumosity, Sudoku, Crossword puzzles
- Reading
- Newspapers
- Reminiscing
- Socialization
- Exercise - walking



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Cognitive & Physical Function - Primary

- **Healthy lifestyle behaviors**
 - Lifelong learning and intellectual engagement
physical activity, ideal body weight, nutritional
calcium and vitamin D intake, avoid excess
noise, oral health care
- ***Example: Lifelong Learning***
 - # of years of formal education associated
with increased cognitive function in old age.
 - Greater literacy have a lower risk for dementia
than those with fewer years of formal
education.



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Cognitive & Physical Function - Primary

- Institute of Medicine report emphasizes both early life education and maintaining intellectual engagement over the life span
- Limited understanding of the underlying mechanisms and the specific activities, duration of efforts, and other factors that influence cognitive outcomes



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Cognitive & Physical Function - Secondary

- Fall prevention, osteoporosis screening and management, osteoarthritis management, early detection of sensory impairments, lifelong learning, caregiver education
- ***Example: Fall Prevention***
 - Falls are common and increases risk of morbidity, mortality, loss of independence and poor QOL



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Cognitive & Physical Function - Secondary

- AGS / BGS Clinical Practice Guideline for Prevention of Falls in Older Persons
- Effective fall prevention requires a multifactorial approach to reduce or eliminate risk factors
- Targeted medication reduction and development of a patient centered exercise program
- Limitations in translation into clinical practice – dissemination science to provide expertise and infrastructure



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Cognitive & Physical Function - Tertiary

- Rehabilitation, adaptive equipment, communities and environment modification to increase support for vulnerable adults
 - Maintain independence, dignity, live least restrictively, adjust to adversity
- ***Example: Age Friendly Communities***
 - Social support & autonomy associated with better physical and cognitive functioning
 - Important determinant for enabling and restraining healthy aging

Cognitive & Physical Function - Tertiary

- WHO: with services, settings, and policies support and enable older adults to age actively

Essential features of Age-Friendly Communities

- Promote access and engagement (homes, parks, streets, and walkways)
- Accessible transportation and key services, affordable housing, civic and social participation, inclusion and respect



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Cognitive & Physical Function - Tertiary

- 100+ communities across the US joined the AARP Network of Age-Friendly Communities
- Actively work toward making their town, city or county a great place for people of *all* ages
- **Limitations:** need tools, resources and best practices



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4. Healthy Soul



96-Year-Old Yogi Tao Porchon-Lynch at the Taj Mahal



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Emotional & Mental Health- Primary

- Adequate sleep, physical activity, avoid substance abuse, meaningful social engagement, meaningful work purpose, stress management
- *Example: **Meaningful Social Engagement***
 - Lower social engagement increases depressive symptoms
 - Interventions focused on social engagement can promote mental wellbeing

Emotional & Mental Health- Primary

- Interventions that offer social activity where older adults are active participants or shared activity appear to be effective
 - Retired and Senior Volunteer Program, Experience Corps (volunteers experienced improvement in their emotional well being)
- **Limitation:** lack of high quality research to evaluate interventions that can be easily implemented into the community, sustainability

Emotional & Mental Health- Secondary and Tertiary

- Accessible mental health services, mgmt of mental health disorders, reduce mental health stigma, elder abuse screening, accessible family & social support, senior safety services
- ***Example: Accessible Mental Health Services***
 - Mental health disorders predictor for negative outcomes
 - High treatment gap for mental health disorders
 - estimated globally at 55%



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Emotional & Mental Health- Secondary and Tertiary

- Barriers to mental health care access: stigmatization, insufficient resources, inadequate health policies
- Interventions focused on increasing knowledge and changing stigmatizing attitudes can modestly reduce stigmatizing attitudes and behaviors
- **Limitations:** long-term impact; lack of high quality research



Social and Spiritual Health- Primary

- **Lifelong meaningful relationships with people** who share similar interests, civic engagement and meaningful retirement role, help seniors meet basic needs (financial and housing security, personal safety)
- ***Example: Lifelong Meaningful Relationships***
 - Stronger social network of family, friends; community involvement is significantly associated with psychosocial wellbeing
 - Blue Zone experience → aging in context of family, preserving relationships and purpose promotes social and spiritual health
- **Limited understanding of social mechanisms** (social regulation/control, stress reduction, coping mechanisms) that confers the benefits



Social and Spiritual Health- Secondary & Tertiary

- Education and Prescriptive planning to create social networking opportunities, adaptive equipment, accessible and safe environments, empowered community outreach
- ***Example: Prescriptive Planning Social Engagement***
 - Interventions that offer education on social network facilitation and enhancement can reduce social isolation
- Limited understanding of specific social activities, duration, intensity of efforts, and other factors that can influence social health



QUESTIONS?

program MaineHealth
Agency
well activity clinical patients
Grand asking hospice every relationships Center
based change prevention residents
eating Part Coalition centers adults
patient skills project meditation screening physical food
role promote many assistant seniors model now give
provide want yr clinic help community called hold topic
like see increase Toolkit appropriate speaker activities day Social
able risk fall older care
Through new Falls healthy etc
dementia years participants about Medicare daily
Education Senior Balance plan utilization County
incremental exercise discussions caregivers assessment most
practice programs health Aging
medication

Resources

- AGS health in aging website: tools and resources for older people and caregivers
 - <http://www.healthinaging.org/>
- YMCA Senior Exercise Programs
- Silversneakers – gym membership across US for seniors
- NIA Healthy Eating and Exercise and Physical Activity Go4Life campaign website and free videos
 - <https://www.nia.nih.gov/health/exercise-physical-activity>
- Rhode Island Division of Elderly Affairs –
 - 2016 Pocket Manual for Elder Services – available to download online
 - The Point Network Program
 - Divided into 6 regions
 - Important referral center for information and resources for RI seniors

Resources

- **Centers for Disease Control**
 - Healthy Brain Initiative
- **National Prevention, Health Promotion and Public Health Council**
 - Healthy Aging in Action
- **National Council on Aging**
 - Tell us how you #AgeOutLoud!
 - Aging Mastery
- <https://www.livingto100.com/>
- <http://www.bumc.bu.edu/centenarian/>

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