



# ANXIETY, DEPRESSION, CANCER, AND POLYPHARMACY:

## MOVING BEYOND DENIAL TO CONSIDER OPTIONS FOR REDUCING FALLS RISK IN OLDER PATIENTS

**SATURDAY, SEPTEMBER 28, 2019**

**LOCATION** **McDowell Senior Center**  
100 Spaulding Rd. Marion, NC 28752

**DATE** **Saturday, September 28, 2019**  
**REGISTRATION PROGRAM** 7:45 am–8:30 am (*light breakfast provided*)  
8:30 am–4:30 pm (*lunch provided*)

### EARLY REGISTRATION FEES THRU SEPTEMBER 21, 2019

**PROGRAM FEE** **\$25.00** (\$40.00 after 9/21/19)  
**STUDENT RATE** **\$10.00** (\$25.00 after 9/21/19)  
must show student ID at check-in

[CLICK HERE TO REGISTER](#)

### OBJECTIVES

Upon completion of this knowledge based educational activity, participants will be able to:

- Discuss the multifactorial nature of falls risk to address the modifiable and non-modifiable risk factors
- Review the social determinants of health and determinants of quality of life as related to older adults and their falls risk factor
- Describe methods to screen and assess for anxiety and depression in the older adult population
- Discuss polypharmacy present in many older adults and cite the consequences of additional medications prescribed for mental health and oncology
- Describe evidence-based evaluation and assessment of balance in cancer patients and survivors
- Explain evidence-based interventions that can improve balance and reduce fall risk in cancer patients and survivors
- Review complications from medications for frequently diagnosed chronic medical conditions
- Implement patient education about medications to ensure positive outcomes
- Review mental health issues seen in older adults that can put them at risk for falls
- Utilizes exercise and other programs as an intervention to help manage mental health issues

### DESCRIPTION

September 21-28, 2019 is National Falls Prevention week. To address the serious and growing problem of falls among older adults, more health care providers need to examine the multifactorial nature of falls prevention and its impact on assessment and intervention. The program will review: the current data on falls risk through the lens of social determinants of health and determinants of quality of life indicators, the special balance considerations for cancer patients, how mental health and anxiety impact falls risk, and the role of polypharmacy in falls risk and prevention. Health care providers will explore different options for effective fall prevention intervention through didactic sessions and case study review. This program is offered in collaboration with the McDowell County Senior Center.

### AUDIENCE

PT, PTA, OT, OTA, RN, LPN, NP, Health Care Managers, Mental Health Providers, Pharmacists, and people who work in multiple settings including acute care, outpatient, assisted living, and skilled nursing facilities.

### DIRECTIONS

**McDowell Senior Center**  
100 Spaulding Rd. Marion, NC 28752

[CLICK HERE FOR DIRECTIONS](#)

**HAVE A QUESTION?**  
**Contact the Program Planner**

Lisa Roy, MSW  
[lisa.roy@mahec.net](mailto:lisa.roy@mahec.net) or 828-257-4491

 **Special Services**  
828-257-4468

**REGISTRATION INFORMATION** 828-257-4475

**FAX REGISTRATION** 828-257-4768

**ONLINE REGISTRATION** [www.mahec.net/cpd](http://www.mahec.net/cpd)

**EMAIL** [registration@mahec.net](mailto:registration@mahec.net)

**MAIL** MAHEC Registration  
121 Hendersonville Road, Asheville, NC 28803

### REGISTRATION

**Early registration deadline: September 21, 2019**

The registration fee for this program is \$25.00 or \$10.00 for students (must show student ID at check-in). These fees include administrative costs, educational materials, a light breakfast, and lunch. If your registration is received after the deadline, the total fee will be \$40.00 or \$25.00 for students.

MAHEC has a pay-up-front policy for all CE programs. The only exception is for pre-approved programs where an individual payment plan is appropriate. Registrations received without accompanying payment will not be processed and participants who have not paid the course fee will not be admitted into the program. Unless otherwise noted in course materials, the following cancellation policy applies to all programs:

- Cancellations must be in writing (via fax, email, or mail)
- Cancellations received more than 2 weeks prior to the event will receive 100% refund
- Cancellations received between two weeks and two full business days prior to the first day of the event are refunded at 70% of the registration fee subject to a minimum \$25 cancellation fee
- No refunds or credits will be given for cancellations received less than two full business days prior to the event
- No vouchers will be issued in lieu of a refund
- Transfers/substitute(s) are welcome (please notify us in advance of the program)

## SESSION DESCRIPTIONS

### **Social Determinants of Health and Determinants of Quality of Life that Impact Older Adults and Contribute to Falls**

— Deborah Constantine, PT, DPT, GCS, CEEAA

By looking at past data and current falls trends in older adults at the national, state and regional level, the need for effective falls prevention intervention becomes evident. The multifactorial nature of falls prevention makes assessment and intervention challenging to produce positive outcomes for those older adults at risk for falls. Considering critical social determinants of health and determinants of quality of life for patients/clients with anxiety, depression, cancer, and polypharmacy, health care providers will need to explore different options for an effective falls prevention intervention.

### **Frequently Unrecognized Falls Risks Among Older Adults — Appropriate Interventions to Reduce Falls Risks** — Allison Combs, DO, Internal Medicine Physician training as a Geriatric Fellow under Dr. Golnush Sharafsaleh, MD, MS, FAAFP

As we age, our risk for falls increase from such things that are obvious like muscle weakness, poor vision, balance disorders, and other sensory losses. Often not recognized are mental health issues like anxiety and depression that present frequently with aging but are often denied by the patient. Other co-morbidities such as cancer can also increase older adults' prevalence of anxiety and depression. Understanding and recognizing these risk factors early can assist health care professionals in screening, assessing, and intervening with appropriate referrals for medications and counseling to community based programs which can have a significant impact.

### **Cancer and Falls Risk: Identification and Prevention Strategies** — Brett MacLennan, DPT, PT, MS, OCS

While most health care professionals' role and knowledge in managing oncology patients has grown, often times this knowledge base is limited to oncology special teams treating patients with cancer, while the general practitioner is not confident in the common special needs of this population. This educational session will provide information on common concerns and impairments with a specific focus on balance and fall prevention in the oncology patient while also discussing advocacy opportunities within the profession for oncology patients.

### **Polypharmacy and Falls Risk: Consider Anxiety, Depression and Other Co-Morbidities in Geriatric Patients** — Tasha Michaels, PharmD, BCACP

With aging comes an increase need for medications for many different chronic diseases such as hypertension, diabetes, hypothyroidism, cardiopulmonary diseases, etc. Diagnoses such as anxiety, depression, and other mental health issues on top of other chronic diseases can make determining the correct dose and medication for the individual patient challenging. But reducing the risk of complications such as a falls for these patients requires consideration of options, patient education, and close monitoring for optimum outcome and improved quality of life.

### **Integrated Care: How Treating the “WHOLE” Person Can Produce Better Outcomes** — Terry Spencer, MSW, LCSW, LMBT; Jeffrey Dula, MSHS; Amy Penley, MA, LMFT

Historically, physical and psychological illnesses were treated in “silos” meaning that what was physical, could only have physical causation and what was psychological could only have psychological causation. Our understanding now is that most psychological illness has physical health contributors, and many physical health issues are preceded by emotional health disparities. One can be treated with disregard for the other, but data indicates that outcomes are much better and more sustaining when both (physical/psychological) are addressed and treated in unison. The geriatric mental health team will focus on how the most commonly diagnosed mental health conditions effect an individual's physical health with specific attention on increased fall risk. Dementia, delirium, depression, anxiety, and poly-pharmacology will be detailed while emphasizing adaptive interventions which promote desired sustainable outcomes.

## AGENDA

- 7:30–8:30** Registration and Breakfast (*provided*)
- 8:30** Welcome
- 8:30–9:15** **Social Determinants of Health and Determinants of Quality of Life that Impact Older Adults and Contribute to Falls**  
— Deborah Constantine, PT, DPT, GCS, CEEAA
- 9:15–10:00** **Frequently Unrecognized Falls Risks Among Older Adults – Appropriate Interventions to Reduce Falls Risks**  
— Allison Combs, DO, Internal Medicine Physician training as a Geriatric Fellow under Dr. Golnush Sharafsaleh, MD, MS, FAAFP
- 10:00–10:15** Break
- 10:15–11:15** **Cancer and Falls Risk: Identification and Prevention Strategies**  
— Brett MacLennan, DPT, PT, MS, OCS
- 11:15–12:15** **Polypharmacy and Falls Risk: Consider Anxiety, Depression and Other Co-Morbidities in Geriatric Patients**  
— Tasha Michaels, PharmD, BCACP
- 12:15–1:00** Lunch (*provided*)
- 1:00–3:00** **Integrated Care: How Treating the “WHOLE” Person Can Produce Better Outcomes**  
— TBD
- 3:00–3:15** Break
- 3:15–4:30** **Case Studies**
- 4:30** Closing

## CREDITS

**Psychologists:** MAHEC is recognized by the North Carolina Psychology Board as an approved Provider of Category A Continuing Education for North Carolina Licensed Psychologists. Approved for **6.75** hours Category A.

**Physical Therapy:** MAHEC, as part of the NC AHEC system, is a NCBPTE-approved provider of continuing competence for activities directly related to physical therapy. NCBPTE: **6.5** contact hours.



**Pharmacists:** The University of North Carolina Eshelman School of Pharmacy is accredited by the Accreditation Council for Pharmacy Education as a provider of continuing pharmacy education.

This program 0046-9999-19-300-L04-P will provide **6.75** Contact Hours of continuing education. No partial credit will be given.

Credit statements can be viewed and printed from CPE Monitor. In order to receive CE credit, attendance must be acknowledged at the registration desk upon arrival at the program. Participants will evaluate this program using a standard evaluation form.

**CEUs:** MAHEC designates this live continuing education activity as meeting the criteria for **0.7** CEUs as established by the National Task Force on the Continuing Education Unit.

**Contact Hours:** MAHEC designates this continuing education activity as meeting the criteria for **6.75** contact hours.

Occupational Therapists/Assistants: As of July 1, 2018, the NCBOT no longer accepts applications for pre-approval of CCAs. OT practitioners need to make sure they are completing activities that comply with Section .0800 of the NCBOT Rules. 6.75 CCAs

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