

Medication Management, Sensory Loss, & Resources



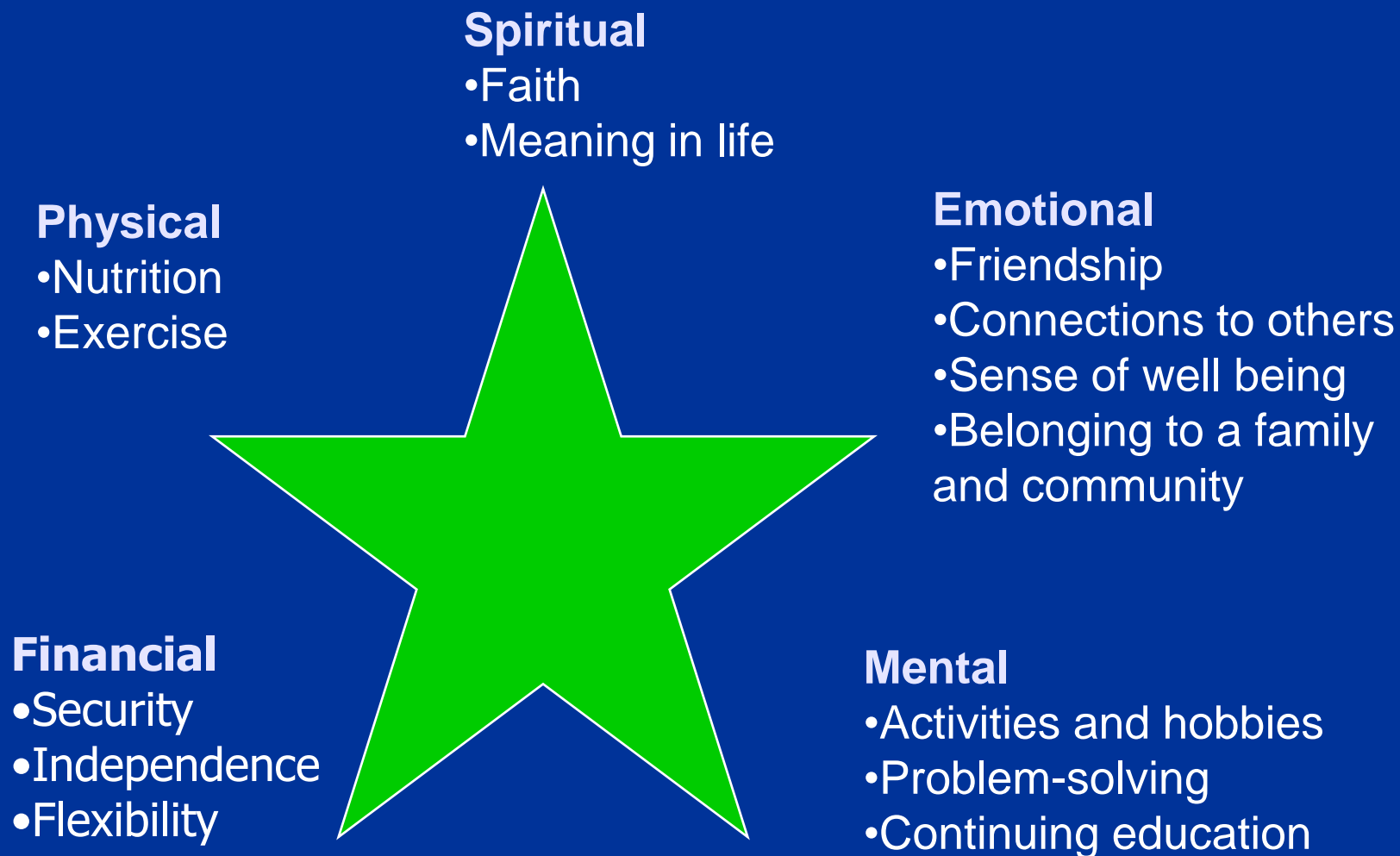
Learning Objectives

Through this session you will be able to

- Recognize the importance of healthy aging and healthy wellness habits
- Learn more about medication use and side effects
- Identify medications that may not be effective for older adults
- Use techniques for effectively managing medications
- Identify common sensory losses and ways to compensate for losses

Wellness is the Goal at All Ages

A Healthy Balance



Support Healthy Nutrition Practices

- Learn about nutrition
- Discuss the effect of medical conditions on one's diet with physician and/or dietitian
- People over 70 may require smaller portions of all groups except more of the milk, yogurt and cheese group
- Encourage drinking 64 ounces of water each day
- Encourage eating fresh fruits and vegetables
- Encourage using meals that can be frozen or quickly heated
- Arrange for Meals on Wheels or other community assistance, if eligible
- Discuss vitamins and other supplements with the physician
- Observe healthy nutrition habits yourself

New Dietary Guidelines

One size doesn't fit all
USDA's new MyPyramid symbolizes a personalized approach to healthy eating and physical activity. The symbol has been designed to be simple. It has been developed to remind consumers to make healthy food choices and to be active every day.



Support Wellness Habits

- **Become an active partner with the physician and other health care providers**
- **Encourage nutrition**
- **Encourage stretching and light exercise , if approved by physician and the person is able to participate:**
 - Walking
 - Exercise bicycle
 - Weight training using hand weights
 - Dancing
 - Stretching
 - Yoga or Tai Chi

Raising Awareness

Not Giving Medical Advice

- The information in this module is intended to be general in nature, and should not be considered medical advice
- Contact a doctor for help with diagnosing or treating a medical problem
- Build and maintain a partnership with health care providers for health care advice and treatment
- Go to internet websites and to community organizations and advocacy groups to obtain general information about specific illnesses

Experts suggest that education about the health issues of loved ones helps reduce the stress of aging and caregiving

Age and Illness

*Being an older adult
does not mean being ill!*

- Aging does not cause disease nor does disease cause aging
- Dizziness, confusion, forgetfulness and incontinence are not normal aging, but usually signs of a disease process
- Even if someone has a disease, symptoms may be corrected or relieved

Age Related Conditions

- Normal Aging: Declining vision, hearing, touch, taste and smell
- Disease Processes: Dementia and Alzheimer's disease, arthritis, hypertension, stroke, heart disease, diabetes, depression, osteoporosis, kidney and bladder problems, lung disease, prostate disease, cancer

Depression

- Depression is often misdiagnosed in older adults as dementia but is very different in that it is highly treatable
- As many as 65% of older adults may experience depression

Talk with the doctor about symptoms and treatment!

Possible Causes of Depression

- Stress and loss
- Physical Illness
- Medications
- Substance Abuse of alcohol, prescription and non-prescription drugs
- Lack of physical activity
- Lack of emotional and social outlets
- Poor stress management tools
- History of a major depression
- Family history of depression

Treatment

Don't accept that depression is normal as people grow older

- Get help! Talk to a physician:
 - Ask about possible side effects of medications
 - Talk about changes in how the person is feeling and changes in usual behavior and routines
 - Ask about a referral to a mental health professional who understands older adults
 - Most importantly, seek treatment promptly
- Medications prescribed by physician:
 - Serotonin uptake inhibitors (SSRIs): Lexipro, Zoloft, Paxil and other anti-depressants
- Use company employee assistance programs (EAP)
- Find support systems from friends, family, church and the community

Medications Use & Aging

- People ages 65 and older
 - consume more prescription and over-the-counter (OTC) medicines than any other age group, according to the National Institute on Aging
 - Buy 30 percent of all prescription drugs and 40 percent of all OTC drugs

Chronic Conditions

- Medications are often the difference in whether someone survives or is able to live independently
- Older people tend to have more long-term, chronic illnesses--such as arthritis, diabetes, high blood pressure and heart disease--than do younger people
- Older people tend to be more sensitive to drugs than younger people due to changes in organ function and loss of muscle tissue that can cause the drug to be more concentrated in the blood

When More Isn't Necessarily Better

- When prescribed and taken appropriately, drugs have many benefits: They treat diseases and infections, help manage symptoms of chronic conditions, and can contribute to an improved quality of life
- Medicines can also cause problems, and the medical and physical needs of older people can sometimes make being aware of potential problems especially important
- Be assertive and knowledgeable about the medications you take

Drugs & “Polypharmacy*”

- Studies vary but the average older person is taking more than four prescription medications at once plus two OTC medications
- It's often necessary to take drugs in combination
- When two or more drugs are mixed in the body, they may interact with each other and produce uncomfortable or even dangerous side effects
- Side effects especially a problem for older adults because they are much more likely to take more than one drug

*Polypharmacy – taking multiple medications

Multiple Drug Interactions - Examples

- High blood pressure is often treated with several different drugs
- Multiple cardiovascular risk factors--high blood pressure, diabetes, abnormal cholesterol--often needing multiple drugs to treat them
- Blood-thinning medication should not combine that with aspirin, which will thin the blood even more
- Antacids can interfere with absorption of certain drugs for Parkinson's disease, high blood pressure, and heart disease
- Diabetes can complicate other conditions and medication interactions

Drug Interaction & Side Effects

- Of all the problems older people face in taking medication, drug interactions are possibly the most dangerous
- Older adults may be more susceptible to certain side effects, such as a drop in blood pressure

***Call the doctor* when experiencing dizziness, constipation, upset stomach, sleep changes, diarrhea, incontinence, blurred vision, mood changes, a rash, or other symptoms after taking a drug**

Doctor Supervision

- Unless supervised by a doctor, taking a mixture of drugs can be dangerous
- Inform doctors of all prescription, over-the-counter, vitamins, and other supplements
- Carry a complete list of all drugs, over the counter, and supplements
 - Carry everything you take *in original containers* to all doctor appointments
 - If necessary to have more than one doctor with each prescribing different medicines, make sure to provide a list to all of them
- Identify all allergies

Doctor Supervision, 2

- Ask one doctor (such as an internist or general practitioner) to coordinate your drugs
- Ask the doctor, "When can I stop taking this drug?" and, "How do we know this drug is still working?"

Role of the Pharmacist and Pharmacy

- Pharmacists are not doctors and cannot prescribe medications
- Pharmacists are well trained in medications and know current medications on the market
- Get all prescriptions filled at one pharmacy
- Pharmacy can serve as a central point to maintain a list of all your medicines, and can screen for drug interactions to avoid harmful situations

Use one pharmacy;
develop partnership with pharmacist and staff

What to Ask the Doctor or Pharmacist

- Before you leave the doctor's office or pharmacy with a new prescription, make sure you fully understand how to take the drug correctly

What to Ask the Doctor or Pharmacist

- *Write down the responses in a notebook that you can keep to refer to, as needed:*
 - What is the name of this drug, and what is it designed to do?
 - Is this a generic or a name-brand product that might be less expensive?
 - Are samples available?
 - What side effects should I expect? What should I do if I experience these side effects?
 - What are possible interactions between drugs?
 - How do you take the drug properly?
 - When do I take it (called a 'dosing schedule')
 - How do I take it? (with or without food, before a meal, at bedtime, etc)
 - What should I do if I forget a dose?
 - How should I store this drug?

Medications Use & Aging

- Keep track of side effects
- New symptoms may not be from your age but from the drug
- Learn about the drugs by asking questions and reading the package inserts or online
- Arthritis, poor eyesight, and memory lapses can make it difficult for some older people to take their medications correctly

Special Needs

- Older people with serious memory impairments require assistance from family members or professionals.
- Adult day care, supervised living facilities, and home health nurses can provide assistance with drugs.

Taking Medications

Studies have shown that between 40 percent and 75 percent of older people don't take their medications at the right time or in the right amount

Taking a Drug

- Never take a drug in the dark
- Re-check the label before each use; Could be taking the wrong
- Tell the doctor about any unexpected new symptoms experienced while taking medicine
- A change of medicine or a dose adjustment may be needed and drugs may frequently change according to the health condition

Storage

- Keep all medicine out of children's reach
- Store drugs in a cool dry place such as a kitchen cabinet or bedroom
- Avoid medicine cabinets in the bathroom (medicine gets too moist and warm)
- Keep medicine in its original container and tightly closed until taken or until divided out in a pill divider
- If using a pill divider, measure out medications by time of the day and day of the week for no more than one week at a time
- Do not remove the label
- Use a 'sharpie' or other large tip pen to clearly mark and label medications for people with limited vision
- If the directions call for refrigeration do not freeze

Helping a Person Remember to Take Medications

- Understand why it is necessary to take the medication
- Ask pharmacies to place larger, more legible labels on bottles
- If taking multiple medications, purchase a pill divider and set up each week; ask for help from family or home health aides
 - Use same system for vitamins and supplements, if taken
- Make sure a readable clock is visible

Medication abbreviations

BID 2 times per day

TID 3 times per day

QID 4 times per day

HS hour of sleep

Tips to Remember to Take Medications

- Draw a large clock and put color codes on it, if necessary
- Create a chart and check-off system
- Use a color coding system to distinguish different medications and different medication times
- Post reminders and/or place medicines in visible locations

Storing and Handling Medication

- Use a commercial drug divider to portion out medications for each day or each medication time
- Refills: Think ahead and have refills approved and filled before medications are gone
- Discarding: Check expiration dates periodically and throw out old medications
 - Double bag and throw in the trash; do *not* flush down the toilet

The Five Rights:
The goal is
the right drug for
the right patient in
the right dose by
the right route at
the right time



Cutting Costs

- For a new prescription, ask the doctor for samples
- Is there another drug that can be substituted?
- Can you get less amount filled?
 - You may have side effects from the medication and have to switch
- Ask for generic brands of the drug, if available. Not all medications are in generic brands yet
- For ongoing conditions, buy medications in the largest quantities you can
- Call around for the lowest price; pharmacy prices can vary greatly with generic drugs at the lowest rates
- Is there a senior citizen discount?
- If you find a drug cheaper elsewhere, ask your regular pharmacist if he or she can match the price

Cutting Drug Costs

- Check your health care policy carefully
- Buy store-brand or discount brand over-the-counter products. Ask the pharmacist for recommendations.
- Find out about drug discount or assistance programs. Check out the [list on the AARP Web site](#) or ask your local chapter of national disease-related organizations (American Diabetes Association, etc.)
- **Call the Area Agency on Aging that serves your community and talk to a Benefits Counselor**
 - Public programs, pharmacy programs and other information and referral

Mail Order and Online

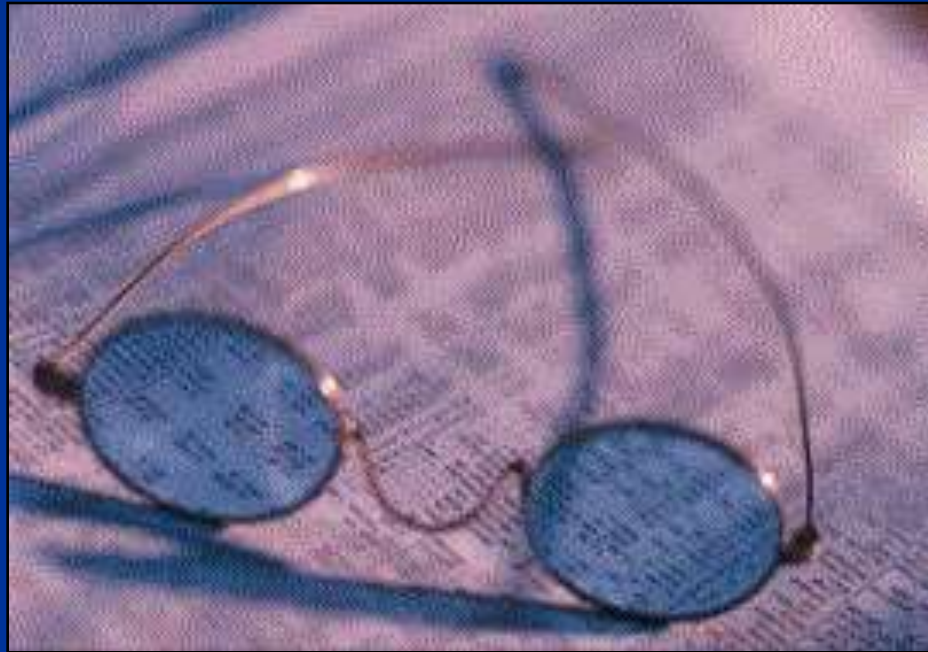
- Mail order from a reputable pharmacy
 - Bulk medications at discount prices
 - Use this service only for long-term drug therapy because it takes a few weeks for delivery
- Online can save money. However, be a wise consumer.
 - [The Verified Internet Pharmacy Practice Sites \(VIPPS\) Web site](#) will help you find a reputable site

Sensory Loss

Signs and Symptoms Suggesting Vision Loss

- Inability to see well in dim light
- More easily blinded by glare
- Difficulty in refocusing quickly from near to far
- Difficulty adjusting from bright areas to dimmer areas
- Difficulty seeing differences in color, contrast or in three dimensional surfaces (i.e., stairs)
- Difficulty in seeing moving objects (i.e., cars on the highway)

Diseases of the Eye



Cataracts

Source: National Eye Institute

■ Symptoms:

- Cloudy or blurry vision
- Problems with light Headlights seem too bright at night, glare from lamps or very bright sunlight, or a halo around lights
- Colors seem faded
- Poor night vision
- Double or multiple vision (this symptom often goes away as the cataract grows)
- Treatment:
 - Surgery to remove the diseased lens is the only effective treatment for cataract
 - Diseased tissue is replaced with an artificial device known as an intraocular lens implant in the majority of cases

Lens becomes cloudy and light cannot pass to the retina properly.

Requires frequent changes in eyeglasses or contact lenses.

Over half the people over age 65 have some degree of cataract development

Glaucoma

Source: Glaucoma Foundation

Pattern of optic nerve damage and visual field loss caused by a number of different eye diseases.

■ Symptoms

- Intense pain, which may result in nausea and vomiting
- Red eye(s)
- Swollen or cloudy cornea(s)
- Halos around lights (rainbow-colored rings around lights)
- Recurrent blurry vision
- Morning headaches
- Pain around eyes after watching TV or leaving a dark theater
- Diagnosed through elevated intraocular pressure, which is not the disease itself

The person with glaucoma is usually unaware of it until serious loss of vision has occurred. Damage from glaucoma cannot be reversed.

Glaucoma

Source: Glaucoma Foundation

- Risk factors:
 - Over age 45
 - Family history of glaucoma
 - Abnormally high intraocular pressure
 - African descent
 - Diabetes
 - Myopia (nearsightedness)
 - Regular, long-term steroid/cortisone use
 - Previous eye injury

Macular Degeneration

Macular Degeneration Foundation

Historical name given to a group of diseases.

Sight-sensing cells in the macular zone of the retina malfunction or lose function.

■ Symptoms

- Results in debilitating loss of central or detail vision
- Sometimes only one eye loses vision while the other eye continues to see well for many years
- Condition may be hardly noticeable in its early stages
- When both eyes are affected, reading and close up work can become difficult

www.eyesight.org

Affects individuals over the age of 55 years

May have a major genetic component

Diabetic Retinopathy

**Source: Diabetic Retinopathy
Foundation**

Leading cause of
blindness.

Progressive disease that
destroys capillaries
by depositing an
abnormal material along
the walls of the retina

■ Symptoms:

- Blurred vision
- Blindness follows

- Treatment - The condition can be treated with laser 'photocoagulation,' if it is detected early
- The longer a person has diabetes the greater his/her chances of developing retinopathy
- Regular eye examinations are necessary

Blepharitis

Non-specific term for infection of the eyelids Bacteria grow at the tear glands and infect the eyelids

- Symptoms:
 - Redness, itching, burning, and generalized irritation
 - Discharge (especially in the mornings)
 - Scratchy sensation
 - Tearing
 - Temporary blurred vision
 - Can lead to stye formation
 - People with the skin condition known as "rosacea" tend to have blepharitis and dysfunction of these oil glands
- Treatment – see the doctor

www.neinivh.gov/health/blepharitis/index.asp

Vision - *Changes in the Home*

- 👁️ Brighten the home
- 👁️ Decrease glare (I.e., sheer draperies to let in light but cut glare)
- 👁️ Evenly distribute light using two lights when possible
- 👁️ Use diffused light
- 👁️ Use sunglasses with 100% UV protection
- 👁️ Use night lights in the bedroom, hallways and bathroom
- 👁️ Place reflective or colored tape on the edges of steps

Assistive Devices

- 👁️ Magnifying glasses
- 👁️ Large number calculator, Clocks, telephones
- 👁️ Dialing aids for the phone
- 👁️ Large print books, catalogues, bills and newsletters
- 👁️ Voice activated computers

For other tips and devices go to:

www.familycaregiversonline.com/assistive.html

Written Materials

- 📄 Written materials must be printed clearly
- 📄 Use at least a 12 point font size
- 📄 Use bright colors: red, yellow, orange
- 📄 Encourage the reader to increase the lighting if necessary

Confirm that the individual can read the information, i.e., :“Let me know if you have trouble reading this I find these forms are hard to read”

Hearing

- 1/3 of people over 60 experience significant hearing loss
- Lose clarity more than volume
- High pitched sounds become fuzzy Difficulty hearing some women's voices
- Difficult to distinguish one consonant from another



Signs and Symptoms Suggesting Hearing Loss

- Turns up the volume on the TV or radio
- Often asks to have information in a conversation repeated
- Misunderstands what others say
- Conversation becomes difficult

Impact of Hearing Loss

- Psychological/behavioral: may neglect to do something important because they did not hear it
- Social: may withdraw
- Emotional: may become irritable or depressed

Consult:

Certified audiologist, licensed hearing aid dealer or otolaryngologist

Hearing Aids

Period of Adjustment for hearing aids

- Few people who need hear aids wear them
 - Perceived stigma
 - Various levels of quality and fit for each person
 - Small adjustment knobs on smaller ones difficult for people with stiff fingers
 - Takes time to get used to them
 - Sounds can be overwhelming, distorted and chaotic
 - Might not be able to identify once familiar sounds
- Success rate improves for those who wear their hearing aids through the first 3 to 6 months
 - Nearly 1/4 of the people who get hearing aids end up not using them

Assistive Devices for Hearing

- Devices on the phone to amplify sounds
- Headphones for the television or radio
- Vibrating alarm clocks
- Doorbells and telephones that flash instead of ring
- Cell phone ear pieces

For other tips and devices go to:

www.familycaregiversonline.com/assistive.html



Making Conversations Easier *when you know about a hearing impairment*

- 👂 Use simple, direct sentences
- 👂 Speak clearly at a steady, normal pace
- 👂 Speak slightly louder than normal
- 👂 Reduce confusion by turning down the TV or reducing other background noise
- 👂 Make eye contact or get the person's attention in some other way
- 👂 Stand near the person when talking
- 👂 Face the individual if possible

Making Conversations Easier *when you know about a hearing impairment, 2*

- 👂 Use gestures and facial expressions
- 👂 Speak at a normal volume if the person wears a hearing aid
- 👂 Speak clearly, but don't exaggerate lip movements
- 👂 Rephrase comments if asked to repeat something
- 👂 Introduce the topic before talking about it in detail ("Mom, about your doctor's appointment on Tuesday...")

On the Telephone

- 👂 Cup your hand around the mouthpiece, especially when there is background noise
- 👂 Keep sentences simple and short
- 👂 Keep the topic of the conversation clear
- 👂 Avoid chewing, eating or covering your mouth
- 👂 Verify that you and the person are understanding one another
- 👂 Try saying the same thing in different words
- 👂 Check for understanding
- 👂 Give instructions slowly and ask him/her to repeat, when necessary

Touch, Taste and Smell

- Taste
 - Most people over 60 have lost 50% of their taste buds
 - Most people in their 70s have 1/6 of the taste buds of a 20-year-old
- Loss of the sense of smell may interfere with the sense of taste
- Loss of smell affects the ability to smell body or household odors and to appreciate fragrances

Signs and Symptoms Suggesting Loss of Touch

- Avoids touching or being touched
- Unable to sense pain or overly-sensitive to touch or pressure
- No response to being touched

Signs and Symptoms Suggesting Loss of Taste

- Reduced or increased appetite
- Complaints about food not tasting right
- Uses excessive seasoning, especially salt

Signs and Symptoms Suggesting Loss of Smell

- Lack of reaction to odors
-
- Nasal congestion
- Increased body odor
- Comments about lost sensation

Dealing with Sensory Loss

- Ask doctors for referrals and testing
- Ensure home and environment safety
- Recognize changes in daily routines and habits and take action to help the person compensate for the loss
- Suggest options:
 - If the person overly salts, suggest use low salt spices, herbs, and seasonings
 - Help identify foods that the person can enjoy
 - Purchase bath oils and soaps as gifts to encourage bathing
 - Recommend the use of gloves to protect the person who has lost the sense of touch to protect the hands and footwear to protect the feet

Communicating More Effectively with Health Care Providers

Partnering with Medical Providers

- Make a consultation appointment with the doctor if you have several questions and concerns
- Learn the routine of the doctor's office
- Get to know the nurse and office staff
- Ask if you can contact the nurse directly with questions
- Find out if the physician will see patients in a nursing facility
- Find out how the doctor feels about end of life issues

Techniques for Communicating Effectively with Health Care Providers

1. Show respect and expect respect
2. Breathe deeply
3. Make eye contact
4. Stay in the moment
5. Establish rapport
6. Maintain a strong sense of self
7. Be prepared
8. Clearly state your purpose
9. Stay focused on the current problems, issues, treatments, and follow-up
10. Offer relevant Information
11. Ask questions
12. Be assertive

Adapted from
*Communicating with
Health Care Professionals*
training of National Family
Caregivers Association

Resources

■ Call:

- 2-1-1 throughout Texas Provides health and human service information for people of all ages
- 1-800-252-9240 to get connected with the Texas Area Agency on Aging for your community
- 1-800-677-1116 Elder Care Locator to find help in another part of the state or another state

■ Online:

- www.benefitscheckup.org - Helps determine what benefit programs are available

To find this and other information quickly,

go online to: **www.familycaregiversonline.net**

You will find online education, resources, links, FAQs

What Assistance is Available through the Area Agency on Aging (AAA)?

Caregiver Services

- Information and Referral
- Caregiver Education and Training
- Caregiver Respite
- Caregiver Support Coordination
- Case Management
- Transportation

Services for persons age 60 and older

- Benefits Counseling
- Ombudsman (advocacy for those who live in a nursing home or assisted living facilities)
- Home Delivered Meals
- Congregate Meals
- Light Housekeeping

Note: Not all services are available in all counties. Call the Area Agency on Aging for information about a specific community.

- Written by: Zanda Hilger, M Ed, LPC, Family Caregiver Education, Area Agency on Aging, Revised, 2009
- Resources include US Food & Drug Administration; Medline plus and other online sources
- Permission is granted to duplicate any and all parts of this program to use in education programs supporting family members caring for elders
- This program is one module of a comprehensive caregiver education program provided by the area agency on aging
- Go to www.familycaregiversonline.net for more information about this and
 - other training programs,
 - internet links,
 - frequently asked caregiver questions,
 - legal forms,
 - phone numbers,
 - and more