

# ADVANCES *in Aging*

## African-American Exercise and Nutrition Study Delivers “The Goods”

Anna Maria Izquierdo-Porrera, MD, principal investigator, and Jennifer Reiner, BSN, epidemiology assistant, have taken health promotion out of the gym and doctor's office and into the First United Church of Jesus Christ in West Baltimore. Twenty-five members of this predominantly African-American congregation are participants in the AMEN (African-American Exercise and Nutrition) Study, a community-based project conducted through the Baltimore VA Geriatric, Research, Education and Clinical Center (GRECC).

The program aims to promote low-impact exercise and healthy diet in this community.



Anna Maria Izquierdo-Porrera, Jennifer Reiner

“We want to determine if making exercise more ‘convenient’ will encourage older people to participate,” says Izquierdo-Porrera. Investigators will also examine whether this type of program will have a positive

impact on cardiovascular risk factors such as hypertension, high cholesterol and diabetes.

Of the volunteer parishioners screened, 96% are African-American, 4% Caucasian, and 85% are women. All received baseline testing including exercise treadmill, strength, lipid profile, and functional and cognitive tests. With regard to cardiovascular risk factors, 50% of these parishioners have hypertension, 17% have diabetes mellitus, 11% have dyslipidemia, and 63% are obese (BMI>30). The subjects will be retested after six months.

Izquierdo-Porrera uses a different approach to modeling fitness programs for her participants. “You have to take away the ‘white coat,’” she says. “Taking the time to know people on a more personal level allows you to design a program that works for them. I am finding that a person's race is not as important as his or her needs. First we must consider day-to-day issues such as: are they a caregiver to parent(s), spouse or grandchildren? Do they work? Do they have

transportation? If you treat people with respect and ‘get into their skin’, they are usually interested and responsive to what you have to offer.”

Reiner serves as health educator in the study, delivering the nutrition and health promotion classes. She exercises with the group daily. “To reach older minority populations, we need to take it [health promotion] to them,” says Reiner. “Churches are a great place to reach older adults, and it doesn't stop there. Our participants report that because of their involvement in this study, their families and friends are becoming more aware of the importance of exercise and practicing better nutritional habits. They're passing our message on.”

All classes are held on the church property. “They [participants] are very involved in their church. We designed a program for them that didn't require an investment in exercise equipment—one that utilizes what's available in their everyday environment,” says Izquierdo-Porrera. “We are emphasizing the importance of increasing their daily physical activity in such ways as taking stairs, walking trails, exercising in chairs, or parking at the far end of the lot and walking.”

The daily exercise program includes 10 minutes of warm-up stretching, 40 minutes of indoor or outdoor walking and/or aerobics, 10 minutes of strength training with Therabands, and 10 min-

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THE PETER LAMY CENTER  
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presents

**17th Lamy Annual Conference:  
Advancing Geriatric Drug Therapy  
2000 and Beyond**

May 11, 2000

# Clinical Geriatrics Program Up and Growing

The Clinical Geriatrics Program at the University of Maryland is still, forgive the expression, in its infancy. However, program director Nancy Friedley, MD, is quickly establishing the program as a presence at the university and in the community.

Currently, the program provides care at two off-site centers. One is located at the Christ Church Harbor Apartments, a senior high rise community in South Baltimore. The other is at the Waxter Center for Senior Citizens, the flagship senior citizens' center for the City of Baltimore. "Whenever possible, we try to provide care where seniors live or play," says Friedley. "By doing that, we overcome the two biggest hurdles in geriatric health care: difficulties with transportation and fear of the unknown." In the future, the program hopes to use Kernan Hospital as a third site of outpatient care.

On the inpatient side, a major concern is patients' loss of function during hospital stays. "When [elderly people] leave the hospital, even though we may have cured their illnesses, they leave at a lower functional level than when they came in," says Friedley. "There are some [prevention methods], which are labor intensive. . .but which have been shown to be useful. We're looking to take full advantage of efforts that minimize loss of function during hospitalization."

Friedley teaches in the medical school at all levels, from part of a first-year course in clinical practice to education of house staff. Integrated curricula in geriatrics for medical students are few, she says; a grant application is in the works to develop a curriculum, emphasizing technology-based education and the use of elderly patients for enhanced physician-patient interaction.

In addition, the program coordinates grand rounds, with lectures alternating between medical and psychiatric topics. Geriatric and geropsychiatric faculty and staff attend the lectures, which are held each Tuesday.

In spring 1999, the program pilot-tested a one-month elective for residents in clinical geriatrics. It worked well, and they "began in earnest" with the elective in July. "It's a true interdisciplinary month," says Friedley. The month includes experiences with the Charlestown Continuing Care Retirement Community in Catonsville, the Baltimore Veterans Affairs Medical Center, geriatric psychiatry, pallia-

tive care, and more. Currently, the elective supports only one resident at a time, but Friedley hopes to expand the program to allow all house staff to gain exposure to geriatrics.

Expansion is a trend for the program, which boasted only one member, Friedley, until this past July. Then Kennita Carter, MD, a geriatrician based at the Waxter Center for Senior Citizens, joined the program, as did Gina Scarinzi, a nurse practitioner based at the South Baltimore center. More additions are in the works. "We are actively recruiting a third board-certified geriatrician," says Friedley, "and we've been approved for a geriatric social worker and a geriatric nurse so that we can start our geriatric assessment program." Mary Tlasek-Wolfson, MSN, a patient care services manager in gerontological psychiatry, has also joined the program. The program in clinical geriatrics has also provided clinical appointments to seven faculty members at Charlestown, who have been active participants in medical student and house staff education.

"The ultimate goal in geriatrics is to have integrated multidisciplinary services available at each point in the continuum. That includes everything from an ACE unit (an acute care for the hospitalized elderly) for hospitalized seniors to long-term care should it become necessary. Our model is definitely interdisciplinary. We are excited to get the geriatric assessment program up and running, since

this will pull together all the different disciplines that help us to care effectively for aging patients," Friedley says.

"The thrust for geriatrics is to figure out ways to care for older people in the midst of all their social, emotional and psychological needs. It's a very different way of caring for people,

and a very different model for medical students and house staff to learn. They have to learn to work as a team and to understand the strengths and skill sets of all the other people who participate."

To facilitate interdisciplinary learning, the Geriatrics and Gerontology Education and Research Program (GGEAR) convened University faculty members from the nursing, pharmacy, dental, social work, and law schools, as well as the medical school's physical therapy program, to develop a web-based case presentation through GGEAR's Health Resources and Services Administration funding, via its affiliation with the Washington D.C. Area Geriatric Education Center Consortium.

"The beauty of web-based technology is the ability to expose learners from all disciplines and at all levels of sophistication to the team concept," says Friedley, "without the frequently encountered logistical barriers. We hope to expand the use of technology in all areas of geriatric education."



**Nancy Friedley**

*The ultimate goal in geriatrics is to have integrated multidisciplinary services available at each point in the continuum.*

## AMEN Study

Continued from page 1

utes of cool-down stretching. “I supervise the group daily,” says Izquierdo-Porrera. “It’s refreshing to see the progress they’ve made.” According to Izquierdo-Porrera, participants started the study exer-



Izquierdo-Porrera, Reiner, and AMEN Participants

cising at 60% of their reserve heart rate (RHR), and are now up to 75-80% RHR.

Izquierdo-Porrera designed this program to be interactive. “The participants calculate their own heart rates while exercising,” she says. “They are also responsible for maintaining personal exercise logs. When I arrive late, I find that someone in the group has taken the initiative to start the class in warm-up stretches. They’re so enthusiastic.”

The GRECC hosted a Christmas party at the church and each participant brought a heart-healthy dish. “We wanted to demonstrate that they can attend a social gathering while sticking to a heart-healthy diet,” explains Reiner. “Everyone had a great time.”

Recently, Reiner and Izquierdo-Porrera took the AMEN group to a local food market to reinforce information presented in a nutrition class. Participants were asked to purchase items necessary to prepare a heart-healthy entree. “This outing provided first-hand practice in reading food labels and making healthy choices in a market where many participants actually shop,” says Reiner. “Other shoppers gathered around and joined in our discussion. It was exciting to see how interested everyone was and I feel that they went away with some sound nutritional insight that they may not have been aware of before.”

“Health promoters need to enable these populations to take control of their health—to empower them with the knowledge and tools necessary to improve their quality of life,” says Izquierdo-Porrera. “It’s more than just telling people that they need to diet and exercise.”

## And the Oscar Goes To. . .Video Press!

Susan Hadary and William Whiteford, Video Press, University of Maryland School of Medicine, won an Academy Award March 26 for their documentary “King Gimp.”

“King Gimp” is about Dan Keplinger, an artist with cerebral palsy who is now in his mid-twenties. Hadary and Whiteford began filming Keplinger about 13 years ago. They have received numerous accolades, including Emmy awards for their geriatric and pediatric subject productions.

Video Press produces and distributes video programs for professionals and students in the fields of geriatric health care, pediatrics and education. GGEAR has provided funding for several Video Press productions, including “Hi Buddy,” about a developmentally delayed individual with Alzheimer’s disease. Visit the Video Press web site at [www.videopress.org](http://www.videopress.org).



Susan Hadary, Dan Keplinger, and William Whiteford

# NEWS

# RESEARCH

## Highlights

### Aging Research Poster Day



*The most important motive for study at school, at the university, and in life is the pleasure of working and thereby obtaining results which will serve the community. The most important task for our educators is to awaken and encourage these psychological forces in a young man (or woman).*

ALBERT EINSTEIN



On February 11th, the University of Maryland Center for Research on Aging hosted the first Annual Aging Research Poster Day. The event provided gerontology researchers a forum to share their work with other investigators, faculty and students. Leaders from the Center were present to discuss opportunities for research education and training, guidance and mentoring by senior faculty members, assistance in developing collaborative research projects and grants, and resources for the conduct of aging research.

Thirty-five posters were displayed by faculty and students from the University of Maryland, Baltimore (UMB) graduate schools and the University of Maryland, Baltimore County (UMBC). The judges were members of the Center's Leadership Committee including faculty from the UMB professional schools, UMBC, and the Geriatrics and Gerontology Education and Research (GGEAR) program. Judging criteria included clarity of the hypothesis and methodology, appropriateness of the experimental design, presentation and interpretation of the data, and the presenter's knowledge and ability to answer questions.

The top three presenters received gift certificates to some of Baltimore's finest restaurants. First prize was awarded to Alex Mah, an MD, PhD student in the laboratory of



Center for Research On Aging Co-Directors Jay Magaziner (left) and Andrew Goldberg (right). Top three presenters: Noni Bodkin, Alex Mah, and Shari Waldstein

Mervyn Monteiro, PhD, Department of Molecular and Cell Biology, School of Medicine for his poster entitled, "Identification of Ubiquitin, a Novel Ubiquitin-Domain-Containing Protein That Stabilizes the Early Onset of Alzheimer's Disease Presenilin Proteins." Second place was a tie between Shari Waldstein, PhD, associate professor, Department of Behavioral Medicine, UMBC, for her poster, "Peripheral Arterial Disease and Neuropsychological Performance in Older Adults," and Noni Bodkin, PhD, assistant professor, Department of Physiology, School of Medicine for her research, "The Effects of Aging on Glomerular Morphometry in Rhesus Monkeys With and Without Type 2 Diabetes."

The multidisciplinary nature of the posters and the diversity of the research presented indicates that there are many areas for investigators to share ideas and develop innovative projects in aging research at UMB and UMBC. The auspicious turnout for the first Aging Research Poster Day demonstrates a high level of enthusiasm for research in aging at University of Maryland, and the potential for the Center for Research on Aging to catalyze the development of new research projects and training opportunities in gerontology.

# POSTER DAY

## *Highlights*



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# Cutting Edge

# NEWS

## Faculty & Staff



Denise Orwig

**DENISE ORWIG, PhD,** research associate, Division of Gerontology, Department of Epidemiology and Preventive Medicine, has received a one-year, \$100,000 award from the Andrus Foundation/AARP. The focus of this research is testing a medication management instrument (the MedMaIDE) in the elderly to determine the extent to which unlicensed caregivers can use

it to identify deficiencies in medication management. Preliminary data collection for this project was supported by the Geriatrics and Gerontology Education and Research (GGEAR) program through the Office of the Vice President for Academic Affairs.

In February, Orwig was an invited lecturer for the Department of Geriatrics Grand Rounds and guest speaker at the Heymans Institute of Pharmacology, at the University of Gent, Belgium. She is proposing collaborative research efforts addressing issues in geriatric pharmacoepidemiology.

**ANDREW GOLDBERG, MD,** head, Division of Gerontology, Department of Medicine, and director, VA Maryland Health Care System GRECC, has been appointed as a member of the Department of Veterans Affairs National Medical Research Advisory Group.

On February 4, Goldberg was interviewed by FOX 45 News as part of a health segment, "Young For Your Age." The interviewers posed the question: Can you really make yourself younger? The segment stemmed from RealAge.com, a web site which features interactive tools to support individual health decisions and equate a person's biological to chronological age. According to Goldberg, adopting good nutritional habits, taking preventive health measures, and exercising regularly can sustain and improve quality of life to promote successful aging. Seventy-five year-old, retired Marine Corp Col. Ben Moore, master athlete and participant in Goldberg's aging studies, participated in the interview as a model of successful aging.



Andrew Goldberg

**KEVIN FONTAINE, PhD,** has been appointed Assistant Professor of Medicine in the Division of Gerontology. Trained in Psychology, he comes from the Johns Hopkins University of Medicine. His research interests are in the quality of life of overweight persons, the impact of weight loss on quality of life, the relation between body weight and osteoarthritis, and the impact of weight loss on knee pain and disability in overweight persons with knee osteoarthritis. Fontaine is also interested in the potential benefits of using quality of life assessments to enhance motivation and treatment compliance.



Kevin Fontaine

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**JOAN O'SULLIVAN, JD,** School of Law, co-authored "The Increasing Medical Malpractice Risk Related To Pressure Ulcers in the United States" which appeared in the January issue of the *Journal of the American Geriatrics Society* with Richard Bennett, MD, Eric Devito, JD, and Robin Remsburg, PhD RN. Devito graduated from the University of Maryland School of Law in 1997, and won the GGEAR student award in the law school that year. O'Sullivan has recently presented the following lectures:

"Health Care Decision Making in Maryland," Frederick Memorial Hospital Medical Staff, Frederick, Md., February 4

"Medical Decision Making and Maryland Law," University of Maryland Dental School, Baltimore, Md., February 2

"Nursing Homes and the Law: How to Enforce Quality of Care," moderator, Association of American Law Schools Annual Meeting, Washington, D.C., January 7

"Medicare and Medicare Reform," moderator, AALS Aging and the Law Section Field Trip, AARP, Washington, D.C., January 6

"Legal and Ethical Issues in Health Care," Geriatric Imperative Minimester, University of Maryland, Baltimore, Md., January 4

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**ANDREW GARDNER, PhD,** Department of Medicine, and **RICHARD MACKO, MD,** Department of Neurology, are co-principal investigators on a Department of Veterans Affairs Merit Award, "Portable Monitoring of Physical Activity and Depression in Stroke." The results of this study will lay the groundwork for clinical trials investigating the benefits of interactive personal status monitoring in outpatient stroke, cardiovascular and mental health promotion programs.

# Baltimore VA GRECC: A healthier future for veterans

The Geriatrics, Research, Education and Clinical Center (GRECC) program was established in 1975 by the Department of Veterans Affairs. The program has played a major role in increasing basic knowledge of the aging process and diseases associated with aging, sharing that knowledge with healthcare providers, and improving the overall quality of medical care for older veterans. There are now 19 GRECCs nationwide, including the site at the Baltimore Veterans Affairs Medical Center (VAMC) which was activated in 1992 under the leadership of Andrew P. Goldberg, M.D., Head, Division of Gerontology, University of Maryland, Baltimore (UMB). GRECC faculty and staff are engaged in research, clinical and educational activities at the Baltimore VAMC, UMB and throughout the VISN5 (Veterans Administration Integrated Service Network) in Maryland, Washington, D.C., and Martinsburg, W. Va.

The Baltimore GRECC's mission is to prevent and reverse functional and physiologic declines associated with aging that are related to the influences of sedentary lifestyle, imprudent diet, cigarette smoking, and environmental factors; rehabilitate functional disabilities in veterans caused by stroke, peripheral arterial disease and coronary artery disease; prevent cardiovascular, musculoskeletal and other complications in older veterans; and study the health care utilization and economic implications of these strategies. Since the Center's inception, more than 2,000 veterans over the age of 60 have participated in programs involving weight loss, exercise, stroke prevention and rehabilitation, smoking cessation, and the treatment of hypertension, diabetes and high cholesterol. Clinicians, biomedical researchers, educators and health service researchers focus on the effectiveness of these secondary and tertiary cardiovascular disease prevention programs. Research, clinical and educational activities in the GRECC favorably impact the Baltimore VAMC and VISN5 by instituting these prevention strategies and disseminating Center accomplishments through seminars and clinical training.

GRECC investigators have more than \$8 million in annual funding from the VA and National Institutes of Health in aging, exercise-cardiovascular and obesity research. The UMB Claude D. Pepper Older Americans Independence Center (OAIC) research program is also housed in the Baltimore VA Medical Center. In the Pepper Center, GRECC and UMB Center for Research on Aging investigators collaborate in studies involving the exercise rehabilitation of older patients with peripheral arterial occlusive disease, stroke, congestive heart failure, or hip fracture.

The Baltimore VA GRECC and UMB Claude D. Pepper OAIC collaborate in the use of the Senior Exercise Rehabilitation Center (SERC), a 5,000 sq. ft. state-of-the-art exercise facility housed in the VA. This facility has 15 motor-driven treadmills, 9 weight-lifting stations, 3 stair climbers, 15 stationary bicycles and a walking track for research studies in exercise rehabilitation.

For more information about the Baltimore VA GRECC, visit the web site, <http://grecc.umaryland.edu>.

## GRECC Recruitment Line

The Baltimore VA GRECC is currently recruiting participants for various studies including:

**Effects of Aerobic Exercise Training on Blood Pressure in Older Hypertensives**

**Comparison of Aerobic vs Resistive Training in Older Individuals**

**Effects of Weight Loss on Fat Cell Metabolism in Post-Menopausal Women**

**Genetic Influences of Weight Loss and Exercise Training on Metabolism**

**Exercise Rehabilitation in Hemiparetic Stroke Patients**

For more information about these studies or other ongoing research and recruitment possibilities, please contact the recruitment line, 410.605.7179.

***Advances in Aging* is published quarterly by the University of Maryland Claude D. Pepper Older Americans Independence Center, the University of Maryland Center for Research on Aging, the University of Maryland Geriatrics and Gerontology Education and Research Program, and the Geriatrics Research, Education and Clinical Center of the VA Maryland Health Care System, Baltimore, Maryland. For further information about the newsletter and gerontology programs at the University of Maryland, Baltimore, call 410.706.4567, or visit our web site, <http://gerontology.umaryland.edu>.**

### Editorial Staff

**L. Jean Hetmanski**

**Nancy Volkers**

# CALENDAR *of Events*

**A quarterly listing of educational programs on aging research and clinical practice in the mid-Atlantic region. Contact information is listed with each program.**

## **April 13, 2000**

UM Center for Research on Aging, Claude D. Pepper Center, GRECC, and GGEAR in cooperation with the Maryland Geriatrics Society  
**Advances In Aging Annual Symposium**  
**Longevity: Genetics and Policy Implications for the 21st Century**  
VA Maryland Health Care System  
Baltimore, Maryland  
410.706.4567, or  
[umcra@som.umaryland.edu](mailto:umcra@som.umaryland.edu)

## **April 15, 2000**

Johns Hopkins University School of Medicine  
**6th Annual Update on Alzheimer's Disease and Other Dementias**  
Renaissance Harborplace Hotel  
Baltimore, Maryland  
410.955.2529

## **April 25, 2000**

Peter Lamy Center, UM School of Pharmacy  
**A Medicare Prescription Drug Benefit and Issues for Health Care and the Elderly**  
*Congressman Benjamin Cardin*  
Pharmacy Hall Auditorium, UMB  
RSVP to 410.706.1490, or  
[jpizarro@rx.umaryland.edu](mailto:jpizarro@rx.umaryland.edu)

## **April 26, 2000**

GGEAR and St. Mary's County Office on Aging  
**Eighth Annual Southern Maryland Caregivers Conference**  
Prince Frederick, Maryland  
410.706.4327

## **April 28, 2000**

Baltimore County Department of Aging  
**Understanding the Cultural Diversity of the Elderly**  
Sheppard Pratt Conference Center  
Towson, Maryland  
410.887.2002

## **May 5, 2000**

**Maryland Gerontological Association Annual Conference**  
Timonium, Maryland  
410.560.7450

## **May 11, 2000**

Peter Lamy Center, UM School of Pharmacy  
**17th Lamy Annual Conference: Advancing Geriatric Drug Therapy 2000 and Beyond**  
*Mark Beers, M.D.*  
Sheppard Pratt Conference Center  
Towson, Maryland  
410.706.2434

## **July 9-18, 2000**

**World Alzheimer Congress 2000 With Change In Mind: Pivotal Research and Creative Care**  
Washington, D.C.  
312.335.5813, or  
[www.alz.org](http://www.alz.org)

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### **Abbreviations**

UM - *University of Maryland*  
UMB - *University of Maryland, Baltimore campus*  
GGEAR - *UM Geriatrics and Gerontology Education and Research Program*  
GRECC - *Baltimore VA Maryland Health Care System Geriatric Research, Education and Clinical Center*

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