Geriatric Research Education and Clinical Centers
United States Department of Veterans Affairs
GRECC
Honoring Veterans as They Age
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# GRECCs: VA's Network of Aging Centers of Excellence Explores Aging, Age-related Diseases and Promising Interventions

***...what follows is a small sampling from among the hundreds of research investigations currently underway in VHA's Geriatric Research, Education and Clinical Centers (GRECCs).***

**Ann Arbor GRECC: Antipsychotic Use in Parkinson's disease patients**. Use of antipsychotics (APs) in Parkinson's disease (PD) is common. Noting the high rate at which persons with PD experience psychosis and dementia. investigators at the **Ann Arbor GRECC** hypothesized that use of APs placed patients at elevated risk for mortality. Multivariate analysis of a Veterans Health Administration database of PD patients revealed that antipsychotic users had more than twice the risk of death as observed in a matched group of non-users. The commonly used atypical antipsychotics identified during the study were olanzapine, risperidone, and quetiapine. This work highlights the need for caution when prescribing atypical antipsychotics to PD patients and the importance of always considering non-pharmacologic strategies in managing psychosis. To learn more about this research, contact Dr. Helen C. Kales at helen.kales@va.gov.

**Little Rock GRECC: Nutrient Intake and Hospitalization**. Older Veterans often become severely malnourished during hospitalization, leading to a range of complications and a higher risk of mortality. To prevent this from happening, inpatient programs need to closely monitor each patient's nutrient intake. Yet most hospitals are not adequately staffed to do this. The **Little Rock GRECC** developed and studied a novel means for completing daily patient nutrient intake assessments in less than one-third the time required by traditional methods, and the new approach was found to be more accurate as well. The greater ease and improved accuracy facilitates identification of patients at elevated risk for becoming malnourished. Anyone interested in this new approach to assessing nutrient intake can contact Dennis H. Sullivan, MD at dennis.sullivan@va.gov.

**San Antonio GRECC: Proteins Block Neuronal Death**. A number of aging-related neurological diseases such as stroke, Lou Gehrig's disease, and Alzheimer's disease, involve the death of neurons in the brain. The **San Antonio GRECC** recently described ferroptosis, a previously unrecognized mechanism of neuronal death. Even more exciting, the investigators identified a protein that disrupts this mechanism. Enhancing the activity and delivery of this protein might be a new approach for supporting healthy brain aging. To find out more about this work, contact Dr. Nicolas Musi at Nicolas.musi@va.gov .

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## Evidence of Clinical Uncertainty? Site-Level Variation in Benzodiazepine Prescriptions to Patients with Limited Life Expectancy

Melissa Garrido, PhD is the recipient of a VA HSR&D Career Development Award to improve psychosocial care quality among seriously ill Veterans. Part of this work includes exploration of facility-level patterns of medication provision to hospitalized patients.

When prescribing benzodiazepines to patients with limited life expectancy, clinicians balance the need to manage breathlessness and agitation with the desire to minimize adverse events and complications from polypharmacy. However, there is little guidance on how best to use benzodiazepines for symptom control in seriously ill patients. A necessary first step to improving recommendations for their use is to have a better understanding of which medications are being prescribed and to whom. Of a national cohort of 35,094 Veterans with advanced cancer, heart failure, or chronic obstructive pulmonary disease who were hospitalized between 2012 and 2016 (mean age = 69), 16% received a benzodiazepine while hospitalized (most commonly lorazepam or midazolam). Benzodiazepine prescriptions were more likely among patients with depression, anxiety, past-year benzodiazepine use, in-hospital antipsychotic receipt, and among patients who died before discharge. However, after controlling for these characteristics, a 5-fold difference in the percentage of patients receiving benzodiazepines at different VA medical centers remained (5%-27%). Site-level differences in prescription rates may reflect clinical uncertainty in benzodiazepine use. High-quality symptom management for seriously ill patients requires an improved understanding of the patients for whom benzodiazepines are most likely to mitigate symptoms.

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GRECCs: VHA's Centers of Excellence focusing on vulnerable Veterans through the advancement and integration of research, education and clinical innovation in geriatrics and gerontology within the VA healthcare system. There are currently twenty GRECCs located nationwide with the common mission of improving the quality of care for older Veterans. For more information please visit us at http://www.va.gov/grecc.

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