AGS23 ON-DEMAND PROGRAM

Can’t join us in Long Beach? Register for AGS23 On-Demand
AGS23 On-Demand is intended for attendees who are unable to join us in Long Beach. This is NOT a virtual annual meeting and does not replicate the in-person meeting. AGS23 On-Demand only provides access to asynchronous annual meeting video recordings available after the in-person meeting. Sessions are NOT live streamed.

AGS23 On-Demand:
- Access to video recordings of 19 of the top clinically focused sessions from the in-person meeting
- Learn at your own pace: videos will be available from May 6 – August 31, 2023.
- Earn up to 19.5 CME/MOC/CE credits
- Please note: sessions will NOT be livestreamed.

MANAGEMENT OF COMPLEX OLDER ADULTS UNDERGOING TAVR
CME/CE Credit: 1.0  Track: Clinical Practice
Moderator: Ashok Krishnaswami, MD, MAS
This session will provide an update on the management of older adults with severe aortic valve stenosis based on published clinical trials and practice guidelines. Learning Objectives: (1) discuss current testing and management of older adults with multimorbidity and severe aortic stenosis; (2) describe the TAVR procedure to better relate to the older adult being referred for consideration of valve replacement; (3) review the benefit, and harm of TAVR from a procedural standpoint in older adults with multiple geriatric conditions; and (4) assess approaches to addressing code status pre- and post-TAVR.

Case Introduction
Francisco J. Medrano Corado, MD

An Overview of Aortic Stenosis Diagnosis and Management in Older Adults with Multiple Geriatric Conditions
Ashok Krishnaswami, MD, MAS

The Pre-Procedure Assessment of Geriatric Conditions in Older Adults with Severe Symptomatic Aortic Stenosis
Ariela R. Orkaby, MD, MPH

The TAVR Procedure
Abdulla A. Damluji, MD, PhD

Gwen M. Bernacki, MD, MHSA

Panel Discussion

PLENARY PAPER SESSION
CME/CE Credit: .75  Track: Research
Sponsored by the Research Committee
Moderator: Donna Fick, PhD, GCNS-BC, FGSA, FAAN
This session will present the top three research abstracts based on average score, quality, originality and methodology of research. Learning Objectives: (1) describe emerging concepts or a new scientific focus in aging research; and (2) summarize the key findings of research with relevance to the care of older adults.
When Should Electronic Medical Records Stop Reminders for Cancer Screening in Older Adults? – A National Physician Survey
Nancy L. Schoenborn, MD, MHS

Personalized Life Expectancy Years Spent in Dementia Progression Stages Vs Normal Cognition
Lillian Min, MD, MSHS

An Outcome Comparison Between Geriatric and Non-Geriatric Emergency Departments
Cameron Gettel, MD, MHS

2023 UPDATE ON VACCINATION STRATEGIES FOR OLDER ADULTS: MATCHING THE APPROACH TO THE INDIVIDUAL AND THE CARE SETTING
CME/CE: 1.0 Track: Clinical Practice
Moderator: George A. Kuchel, MD
Vaccination against varied pathogens represents one of the best-validated and most effective strategies for the prevention of disease, hospitalization, disability, and death in older adults. Nevertheless, even expert geriatrics healthcare providers often lack relevant knowledge, especially regarding their use in older adults who are most vulnerable as a result of being frail, suffering from multiple chronic diseases, and residing in long-term care. Learning Objectives: (1) review the latest recommendations and guidelines pertaining to vaccination indications and schedules for older patients; (2) describe published and emerging research evidence pointing to specific aging-related differences in immune responses and immune protections following immunization with varied vaccines; (3) discuss the use of different vaccine formulations, addition of adjuvants, as well as geroscience-guided strategies for overcoming declines in immune responses with aging; and (4) review literature demonstrating the utility of varied strategies designed to overcome barriers to implementation of FDA-approved vaccines.

Introduction to the AGS/CMSS/CDC Vaccine Initiative
Sharon A. Brangman, MD, AGSF

Staying Up to Date and Making Sense of CDC Vaccination Guidelines
Kenneth Schmader, MD

Optimizing Vaccine Effectiveness in Frail Older Adults with Multiple Co-Morbidities
George A. Kuchel, MD

Improving Vaccine Uptake in Long-Term Care Settings
Stefan Gravenstein, MD, MPH

SLEEP APNEA IN OLDER ADULTS
CME/CE Credit: 1.0 Track: Clinical Practice
Moderator: Cathy A. Alessi, MD
Learning objectives (1) review the diagnosis and management of obstructive sleep apnea; (2) counsel patients on strategies to encourage compliance with PAP; and (3) utilize currently available and emerging treatments to manage insomnia in older adults with OSA.

OSA Diagnosis and Management in Older Adults
Constance H. Fung, MD, MSHS

Adherence with CPAP Therapy
Carl J. Stepnowsky, PhD

Insomnia Management in Older Adults with OSA
Jennifer L. Martin, PhD
WORLD CLINICAL PRACTICE GUIDELINES FOR FALLS PREVENTION AND MANAGEMENT
CME/CE Credit: 1.0    Track: Clinical Practice
These guidelines were developed by the World Falls Task Force, which assembled 96 multidisciplinary experts from 39 countries across 5 continents, with representation from 36 scientific and academic societies, including the AGS. The Guidelines provide a framework and expert recommendations on how to identify and assess the risk of falls and recommend which interventions should be offered, alone or in combination, as part of a person-centered approach to preventing and managing falls. Learning Objectives: (1) review the guideline development process and new recommendations; (2) interpret how to relate the Guidelines to clinical use in the US; and (3) identify limitations and areas needing future research.

The Guideline Development Process and What's New
Manuel Montero-Odasso, MD, PhD, FRCPC, AGSF, FGSA

Implementation of the Guidelines in the US
Colleen M. Casey, PhD, ANP-BC, CNS

Opportunities and Future Directions
Elizabeth Eckstrom, MD

PRESCRIBING AND DEPRESCRIBING OPIOIDS TO OLDER ADULTS
CME/CE Credit: 1.0    Track: Clinical Practice
Moderator: Nicole J. Brandt, PharmD, MBA, BCGP, FASCP
Learning Objectives: (1) review opioid practice updates; (2) develop a practical risk-benefit framework for decision making on the initiation, continuation, dosage modification, and discontinuation of opioid analgesics in the treatment of acute and chronic pain; and (3) discuss whether there is an increased risk of use of opioids concomitantly with gabapentin.

Standing at the Intersection of Pain and Frailty
S. Orion Courtin, MD, MHS

Tools for Deprescribing Opioids
Holly M. Holmes, MD, MS, AGSF

An International Perspective: International Union of Basic and Clinical Pharmacology (IUPHAR)
Sarah N. Hilmer, MBBS, PhD, FRACP

HENDERSON STATE-OF-THE-ART LECTURE - MAKING OLDER ADULTS HEARD: FROM VES13 TO IMPACT
CME/CE Credit: 1.0    Track: Clinical Practice
Speaker: Debra Saliba, MD, MPH, AGSF
Learning Objectives: (1) explain the components and utility of the Vulnerable Elders 13-item Survey; (2) summarize the resident-reported assessment items for the Minimum Data Set 3.0; (3) describe the Improving Medicare Post-Acute Care Transformation (IMPACT) Act inclusion of post-acute care populations for improved care coordination and quality; and (4) identify new pain, cognitive and mood assessments being implemented to meet IMPACT Act requirements.

ELDER FINANCIAL EXPLOITATION – FROM BENCH TO BEDSIDE
CME/CE Credit: 1.0    Track: Clinical Practice
Moderator: Carrie Rubenstein, MD
An estimated 7% of older adults experience financial exploitation annually in the United States. This is likely an underestimation, making it one of the most common forms of elder mistreatment. In this session, three experts from the fields of Elder Mistreatment and Financial Exploitation will share the most recent evidence and expert practices from basic science to the bedside. Learning Objectives: (1) judge the rationale and future promise of using neuroimaging as a tool to understand financial exploitation vulnerability in older adults; (2) assess for financial decision-making capacity in a vulnerable older adult experiencing or at risk for financial exploitation; (3) identify racial, ethnic, and cultural differences in financial exploitation experience and perception of harm that may be present in diverse populations; and (4) formulate a culturally tailored intervention and prevention plan for the serially financially exploited adult by overcoming barriers and leveraging community-based strategies and national resources.

**Financial Exploitation Risk and the Brain**  
Duke Han, PhD

**Assessing Financial Decision-Making Capacity**  
Julia Hiner, MD

**Interventions and Supports for Elder Victims of Financial Exploitation**  
Miles McNeeley, MSW, LCSW

**THOMAS AND CATHERINE YOSHIKAWA OUTSTANDING SCIENTIFIC ACHIEVEMENT FOR CLINICAL INVESTIGATION AWARD LECTURE: UNLEASHING FRAILTY FROM LABORATORY INTO REAL WORLD**  
CME/CE Credit: .75  
Track: Research  
Presenter: Dae Hyun Kim, MD, MPH, ScD

Frailty has long been recognized by geriatricians as a means to understand the vulnerability in older persons that is not explained by chronological age and individual diseases. Despite increasing burden and clinical significance of frailty, frailty assessment had been mainly confined to the research setting, in which rigorous standardized assessment was possible. Over the past decade, the effort to translate frailty from research to the real world has accelerated. In this lecture, Dr. Kim will present three major accomplishments at the forefront of this effort: 1) development of an algorithm to measure the level of frailty from Medicare data for researchers; 2) implementation of a frailty index calculator in the electronic health records of a large academic medical center for clinicians; and 3) dissemination of our knowledge and tools to the clinical and research community through software codes, websites, and incorporation into the fellowship training curriculum. He will discuss motivating clinical cases and research applications to help clinicians and researchers advance frailty-guided clinical care and will conclude with future directions in our quest to make frailty part of routine care of older adults. Learning Objectives: (1) describe the latest developments in frailty measurement; (2) generate evidence to advance frailty-guided clinical care; and (3) apply frailty information to guide clinical decisions.

**COVID-19: ACUTE TREATMENT, LONG COVID, AND THE PANDEMIC EXPERIENCE OF OLDER ADULTS**  
CME/CE Credit: 1.0  
Track: Clinical Practice  
Moderator: Kenneth Schmader, MD

COVID-19 continues to pose a threat to older adults, causing a disproportionate amount of disability and death. Professional practice gaps and knowledge needs regarding COVID-19 in older adults include the benefits and limitations of different treatment approaches for acute SAR-CoV-2 infection, identifying and managing post-acute (long) COVID-19 in older adults, and addressing the impact of the COVID-19 pandemic experience on the quality of life of older persons and their loved ones. Learning Objectives: (1) review use of antiviral, monoclonal antibodies, corticosteroids and other treatments for acute infection in older adults outside the hospital setting; (2) identify the clinical manifestations and impact of post-acute (long) COVID-19 in older adults and demonstrate approaches to management of this syndrome, including models of care; (3) review the recent data on pandemic-related psychosocial health outcomes among
older adults and potential downstream health effects; and (4) identify factors that impacted pandemic experiences, including inequities by race/ethnicity, living situation, and experiences of serious illness and apply a framework for assessing and addressing pandemic-related psychosocial needs, including persistent loneliness and social isolation.

**Treatment of Acute COVID-19 in Older Adults in Ambulatory and Long-Term Care Settings, 2023**
Robin L.P. Jump, MD, PhD

**The Manifestations and Management of Cognitive and Psychiatric Sequelae of Post-Acute (Long) COVID-19 in Older Adults**
Esther S. Oh, MD, PhD

**The Impact of the Pandemic Experience on the Psychosocial Health of Older Adults**
Ashwin A. Kotwal, MD, MD

**ADVANCING PUBLIC POLICY THAT SUPPORTS ALL OF US AS WE AGE**
CME/CE Credit: 1.0 Track: Public Policy
Moderator: Paul Mullhausen, MD, AGSF
Presenters: Peter Hollmann, MD, AGSF; Audrey Chun, MD, MPH, AGSF; William Hung, MD, MPH
This session will provide an update on AGS’ primary areas of public policy focus: Medicare payment, geriatrics health professions programs, support for aging research, and quality metrics for older adults. The session will include a summary of how AGS identifies and prioritizes issues into those where the Society leads; those where the society is actively working, typically in collaboration; and those where the society looks for opportunities to support the work of others. Learning Objectives: (1) describe legislative and regulatory opportunities for influencing public policy; (2) discuss how AGS incorporates new public policy priorities into its existing advocacy efforts; and (3) review how the Society works in coalition.

**Welcome & Introductions**
William W. Hung, MD, MPH

**Lifting of Public Health Emergency**
5 Things Geriatrics Health Professionals Should Know About the End of the PHE
Shari M. Ling, MD

**AGS Policy Highlights**
Small Society, Big Agenda: Leveraging Resources to Achieve Policy Change
Paul L. Mullhausen, MD, AGSF

**2023 Highlights: Leading, Collaborating, Supporting**
Audrey Chun, MD, MPH, AGSF; William W. Hung, MD, MPH; Paul L. Mullhausen, MD, AGSF

**ADDRESSING THE 5MS OF OSTEOPOROSIS MANAGEMENT**
CME/CE Credit: 1.0 Track: Clinical Practice
Sponsored by the Osteoporosis and Metabolic Bone Disease Special Interest Group
Moderator: Cathleen S. Colón-Emeric, MD, MHS
In light of the new clinical practice guidelines from the Bone Health and Osteoporosis Foundation and advances in pharmacotherapy, this program will support attendees in providing evidence-based fracture prevention for patients with osteoporosis. Learning Objectives: (1) describe mobility interventions and care models that improve bone health and reduce injurious falls in older adults; (2) appropriately prescribe osteoporosis treatment regimens in common clinical scenarios, based on their pharmacobiology, risks, and benefits; (3) describe the pitfalls of race-based decisions in selecting osteoporosis pharmacotherapy; (4) tailor osteoporosis treatment plans for patients with multimorbidity,
including dementia and chronic kidney disease; and (5) list elements of, and tools promoting, shared decision making around fracture prevention options with older adults and their care partners.

Mobility in Osteoporosis Management
Sonja L. Rosen, MD

Designing Rational Osteoporosis Medication Regimens
Cathleen S. Colón-Emeric, MD, MHS

Mind and Medical Complexity in Osteoporosis Treatment
Joshua D. Niznik, PharmD, PhD

Promoting Shared Decision Making on What “Matter Most” in Fracture Prevention
Sarah D. Berry, MD, MPH

APPROACHING DEMENTIA CARE WITH CULTURAL SENSITIVITY AND HUMILITY

CME/CE Credit: 1.0  Track: Clinical Practice & Ethnogeriatrics
Moderator: Michi Yukawa, MD, MPH
Sponsored by the Ethnogeriatrics Committee, Clinical Practice and Models of Care Committee, and Public Education Committee

This symposium will address the gaps of dementia screening, communicating a dementia diagnosis, and providing resources in a diverse older adult population. Learning Objectives: (1) describe dementia screening tools that are applicable for older patients from different cultural and ethnic backgrounds; (2) demonstrate ethnic and culturally sensitive ways to discuss dementia work up and diagnosis with patients and their families; (3) identify opportunities for interprofessional teams to provide culturally sensitive support to caregivers and family members of patients with dementia; and (4) identify culturally inclusive caregiver support resources for patients and families with dementia.

Making the Diagnosis: Culturally Inclusive Dementia Screening Tools
Sharon A. Levine, MD, AGSF

Disclosing the Diagnosis: Counseling Families about Dementia in a Culturally Inclusive Manner
Anna H. Chodos, MD, MPH

Approaching Family and Caregiver Support in a Racially and Ethnically Sensitive Manner
Nirmala Dhar, LCSW

HEART FAILURE WITH PRESERVED EJECTION FRACTION: NEW INSIGHTS INTO AN EVOLVING GERIATRIC SYNDROME

CME/CE Credit: 1.5  Track: Clinical Practice
Moderator: Michael W. Rich, MD, AGSF

Heart failure with preserved ejection fraction (HFpEF) is predominantly a disease of older adults and normative aging is considered a contributing factor to its development. It is also the most common form of heart failure in older adults, accounting for up to two-thirds of symptomatic heart failure in this age group. The management of HFpEF can be challenging in older adults due to co-existing complex multimorbidity, polypharmacy and the socioeconomic burdens of aging. As a result, HFpEF is increasingly recognized as a geriatric syndrome and its management requires a multi-dimensional approach to care. Therefore, it is essential that clinicians caring for older adults have a clear understanding of the diagnosis and management of HFpEF in order to optimize the care of their patients in the clinic or the hospital setting. Learning Objectives: (1) review the epidemiology, diagnosis and pathophysiology of HFpEF; (2) recognize that HFpEF as a geriatric syndrome requiring multi-dimensional care; (3) discuss the state of the science for pharmacologic intervention for HFpEF, and available resources for non-pharmacologic interventions focusing on physical rehabilitation for HFpEF as a tool for optimizing quality of life; and (4)
acknowledge disparities and inequities in access to care for HFpEF and utilize strategies to resolve these issues.

**Heart Failure with Preserved Ejection Fraction: Epidemiology, Pathophysiology and Diagnosis**  
Michael W. Rich, MD, AGSF

**Pharmacologic Management of Heart Failure with Preserved Ejection Fraction**  
Parag Goyal, MD, MSc

**Non-Pharmacologic Management of HFpEF: The Case for Physical Rehabilitation**  
Amy M. Pastva, PT, MA, PhD

**Disparities and Inequities in Access to Care and Outcomes for HFpEF**  
Khadijah Breathett, MD, MS, FACC, FAHA, FHFS

**Panel Discussion**

**LET IT GO! HOW TO OVERCOME DIAGNOSTIC EVALUATION AND TREATMENT HURDLES IN MANAGING THE LOWER URINARY TRACT OF OLDER ADULTS**

CME/CE Credit: 1.0  
Track: Clinical Practice  
Moderator: David A. Nace, MD, MPH  

Given the lack of a gold standard, the diagnosis and management of urinary tract infections (UTIs) and lower urinary tract symptoms (LUTS) in older adults is fraught with challenges. This session will help teach AGS members about ways to improve clinical decision making and infection control. Learning Objectives: (1) review prior interventions to improve UTI management as it relates to older adults; (2) describe different approaches to improving the uptake of clinical guidelines and the use of antibiograms; (3) discuss the clinical hurdles most associated with overdiagnosis of UTIs in long-term care and discuss how clinical decision support may overcome these; and (4) list key elements in the evaluation process of LUTS in older men, with a particular emphasis on non-urologic etiologies.

**Not All UTIs Are Created Equal: Rethinking Our Approach to UTIs**  
David A. Nace, MD, MPH

**Overdiagnosis of UTIs in the Nursing Home and the Promise of Clinical Decision Support**  
Christine E. Kistler, MD, MASc

**Case-Based Discussion on Diagnosing and Managing UTI in Community-Based Older Women: It’s Just So Challenging!**  
Lona Mody, MD, MSc

**Outside In: Diagnosing and Managing Lower Urinary Tract Symptoms in Older Men**  
Scott R. Bauer, MD, ScM

**GERIATRICS LITERATURE UPDATE: 2023**

CME/CE Credit: 1.5  
Track: Clinical Practice  

Presenters: Kenneth Covinsky, MD, MPH; Eric W. Widera, MD & Alexander K. Smith, MD, MS, MPH  

Back by popular demand! The Geriatric Literature Update is always one of the most highly rated sessions at the annual meeting. The session will focus on the year’s most important published papers. Discussion includes the significance of findings and application to patient care. Learning Objectives: (1) identify areas in clinical medicine where new strong evidence has been uncovered that should affect geriatric practice; (2) describe the results of a critical appraisal of this evidence; and (3) discuss clinical advances in caring for older adults from a review of approximately 30 peer-reviewed journals January-December, 2022.
TREATING HYPERCHOLESTEROLEMIA IN OLDER ADULTS FOR PRIMARY PREVENTION OF CARDIOVASCULAR EVENTS: A JOINT STATEMENT BY THE AGS AND NATIONAL LIPID ASSOCIATION

CME/CE Credit: 1.0 Track: Clinical Practice
Moderator: Sunny Linnebur, PharmD, FCCP, BCPS, FASCP, BCGP
Presenters: Daniel E. Forman, MD & Ariel R. Greene, MD, MPH, PhD
This session will present key findings related to the assessment of Arteriosclerotic Cardiovascular Disease (ASCVD) risk in adults over age 75 years and the evidence for LDL-C lowering in this population. Learning Objectives: (1) discuss limitations of evidence and recommendations related to older adults based on life expectancy, functional status, and cognitive status; (2) review evidence for adverse effects of statin therapies in this population; and (4) describe evidence for deprescribing.

ALZHEIMER’S UPDATE: BIOMARKERS & mAb THERAPIES

Room: CME/CE Credit: 1.0 Track: Clinical Practice
Sponsored by the American Academy of Neurology
Moderator: Alexander P. Auchus, MD
Learning Objectives: (1) describe how amyloid brain pathology is measured by imaging and CSF biomarkers; (2) describe how blood tests for amyloid and tau can be used in screening for dementias; (3) review the development of monoclonal antibody therapies for AD; and (4) discuss the evidence for and role of amyloid antibodies in treating AD.

Update on Biomarkers
Douglas Galasko, MD

Update on Monoclonal Antibody Therapies
Sharon J. Sha, MD, MS

PHARMACOTHERAPY UPDATE: 2023

CME/CE Credit: 1.0 Track: Clinical Practice
Sponsored by the Pharmacists Section and the Polypharmacy and Deprescribing Special Interest Group
Moderator: Carla J. Bouwmeester, MS, PharmD, BCPS, BCGP
Each year, new medications are approved by the Food and Drug Administration. Newly approved medications have an impact on decisions made by health care professionals caring for older adults. They can also lead to adverse events which may be misinterpreted as new signs or symptoms of another medical condition that can lead to prescribing of additional medication(s). The purpose of this symposium is to educate the audience about managing prescribing cascades and summarize the changes over the past year in pharmacotherapy. Learning Objectives: (1) communicate the indication for use, mechanism of action, pharmacokinetics, dosing, safety, and drug interactions for newly approved medications; (2) describe the average co-pay of these medications and decide whether these newer agents are better than more cost-effective alternatives for the patients they serve in their clinical practice; (3) explain what prescribing cascades are, why they matter, how and why they occur, and the need for additional research focused on health equity; and (4) apply tools for recognizing and investigating prescribing cascades as part of pharmacotherapy assessments for older adults.

Newly Approved Medications and Place in Therapy for Older Adults
Nicole Henry, PharmD

Tackling Prescribing Cascades: Recognize, Investigate and Deprescribe
Lisa M. McCarthy, PharmD, MSc