



COMMONWEALTH of VIRGINIA
Department for the Aging

[Click here to go to the Virginia Department for the Aging Home Page](#)

TABLE OF CONTENTS
AAA TUESDAY E-MAILING
March 31, 2009

SUBJECT	VDA ID NUMBER
<u>Caregiving</u> (Ellen Nau)	09-94
<u>15th Annual Adult Abuse Prevention Conference</u> (Bill Peterson)	09-95
<u>Article on Dietary Supplements for Weight Loss</u> (Elaine Smith)	09-96
<u>Alcohol and Aging Awareness Media Campaign</u> (Elaine Smith)	09-97

Note: The web addresses (links) in this document may change over time. The Department for the Aging does not attempt to refresh the links once the week has passed. However, this document is maintained on the web for a period of time as a reference. Some links may require registration.



09-94

COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

FROM: Ellen Nau

DATE: March 31, 2009

SUBJECT: Caregiving

PRINCE WILLIAM ANNUAL CAREGIVERS' CONFERENCE

The Prince William Area Agency on Aging is hosting their annual caregivers' conference on Saturday, April 25, 2009 from 8:30 a.m. to 4:00 p.m. at Westminster at Lake Ridge, 12191 Clipper Drive, Woodbridge, VA 22192. The theme of the conference is "Caring: For Your Loved Ones, For Yourself."

The conference offers a wide variety of experts in the areas of caregiving and aging. Louis G. Colbert, Director of the Delaware County Office of Services for the Aging, will speak about the challenges and rewards of caregiving. Dr. Al B. Fuertes, Assistant Professor at New Century College, will provide information about conflict transformation and healing. Peter Notarstefano, Director of Home and Community Based Services for the American Association of Homes and Services for the Aging, will discuss facility care and adult day care. A panel of experts will address specific caregiver issues and Barbara Watts, the Outreach Coordinator with Evercare Hospice and Palliative Care, will teach participants to reduce stress with guided imagery and relaxation techniques. Agencies, organizations and businesses providing services to caregivers and older adults will be on exhibit throughout the conference.

The conference is an excellent learning opportunity for local and long distance caregivers, professionals in geriatric health care and social work, and volunteers who work with older adults. It explores the process of caregiving and caregiver issues, and offers practical solutions for increasing communication and coping skills and connecting to resources for caregivers.

The registration fee is \$25 per person, \$40 per couple, and includes a continental breakfast, lunch and respite care (if required). Registration and payment must be received by April 17, 2009. Early registration is encouraged as this annual conference is highly attended and space is limited. To register, please contact the Prince William Area Agency on Aging at 703-792-6374.

.



09-95

COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Directors
Area Agencies on Aging

FROM: Bill Peterson

DATE: 3/31/09

SUBJECT: 15th Annual Adult Abuse Prevention Conference

Please mark your calendars for the **Virginia Coalition for the Prevention of Elder Abuse (VCPEA) 15th Annual Conference** that will take place on **May 27-29, 2009** at the Virginia Beach Resort & Conference Center, 2800 Shore Drive, Virginia Beach, Virginia.

Attached is the conference brochure with all the details you will need to register. If you have questions about the conference, please contact the following individuals:
For questions about registration, contact Joyce Walsh at jwalsh@cityofchesapeake.net
For questions about the agenda, CEUs, or other programmatic issues, contact Lisa Furr at furrl@vcu.edu

As in past years, space will be limited and registration will be accepted on a first-come-first-served basis. The economy and budget cuts have limited opportunities for training....so consider taking advantage of this reasonably priced training that has a proven track record!

Attachment

CONFERENCE AGENDA

Virginia Coalition for the Prevention of Elder Abuse



VCPEA 15th Annual Conference

May 27-29, 2009

Virginia Beach Resort & Conference Center

2800 Shore Drive

Virginia Beach, VA

1-800-468-2722

*Virginia Coalition for the
Prevention of Elder Abuse*
P.O. Box 70054
Richmond, VA 23255

Address Label

WEDNESDAY, MAY 27, 2009

PRE- CONFERENCE WORKSHOP

3:00 -5:00 Workshop Nuts and Bolts of Elder Abuse: What We All Need to Know!

Presenters: Joyce Martin- Adult Protective Services,
Joani Latimer- Long Term Care Ombudsman,
Kathy Pryor- Elder Law

THURSDAY, MAY 28, 2009

8:00-9:00 REGISTRATION

9:00-10:30 WELCOME

Joyce Martin, President, VCPEA
KEYNOTE ADDRESS:
Undue Influence

APS and legal professionals are increasingly involved with cases that may involve undue influence. Considering undue influence is a new phenomenon that challenges the professionals investigating or responding to these cases. This session will cover the definitions of undue influence, pattern of tactics and process used relationship of consent and capacity to undue influence, legal remedies and realities, and practice implications.

Presenter: Lori Stiegel, JD

10:30-10:45 REFRESHMENT BREAK

10:45-12:15 BREAKOUT SESSION I:

A. DEFENDING VIRGINIA'S VULNERABLE ADULTS THROUGH ZEALOUS INVESTIGATION AND PROSECUTION OF OFFENDERS

FBI Special Agents, covert video surveillance, surprise facility inspections, investigative Grand Juries ... the MFCU will try it all, anything it takes to gather the evidence needed to protect Virginia's vulnerable adults from

uncaring, neglectful and even abusive nursing homes! This session will provide you with an overview of the MFCU's activities in nursing home investigations and plans for future expansion of the team's efforts.
Presenter: Lauri Lester

B. GETTING TO PREVENTION: SOCIAL CHANGE AND VIRGINIA'S ADULT FATALITY REVIEW TEAM

Fatality review and surveillance programs are public health efforts designed to understand how and why people die and to educate others about those injuries and deaths in order to assist policy makers, advocates and planners in reducing violence. Dr. Powell is adamant and passionate about preventing premature deaths from violence.
Presenter: Virginia Powell, Office of Chief Medical Examiner

C. PROTECTING RESIDENTS' RIGHTS AND INVESTIGATING ELDER NEGLECT AND ABUSE IN NURSING HOMES PART 1

Attorney Jeffrey Downey will discuss the substantive rights of nursing home and assisted living residents in Virginia and how best to protect those rights. He will address the Department of Health investigative process and explore how best to investigate and address the violation of those rights and elder neglect in the long term care setting. As a trial attorney he will share ways in which those rights can also be protected through our civil justice system.
Presenter: Jeff Downey, JD

12:30-1:45 LUNCHEON AND HELEN NAPPS AWARD

2:00-3:30 BREAKOUT SESSION II:

CONFERENCE AGENDA

VCPEA 2009 Annual Conference Registration Form

Please use only one form per person.
You may copy this form as needed. **PLEASE PRINT.**
Registration deadline is **May 20, 2009**, and there
are no refunds after this date.

Last Name
First Name
Organization Name
Address
City/State/Zip
Daytime Telephone ()
Email
Special Dietary or Other Assistance:

I am attending the May 27th Pre-conference
Nuts and Bolts of Elder Abuse Yes No

REGISTRATION FEES: (Please check the appropriate category
and indicate the amount enclosed.)

I am a VCPEA member, conference sponsor,
student, senior citizen \$115
I am a non-member \$155

You and/or your organization are invited to join VCPEA
now; doing this now will also allow you to register at the
member's rate:

Individual Membership \$35
Organizational Membership \$75

TOTAL ENCLOSED \$ _____

Note: On-site registration will be \$175 for everyone.

Registration deadline is **May 20, 2009** and there are no refunds after this date.
Make checks payable to VCPEA and mail to:
VCPEA 2009 Annual Conference
c/o Chesapeake Sheriff's Office
P.O. Box 15125
Chesapeake, Va. 23328

FRIDAY, MAY 29, 2009

9:00-10:30 BREAKOUT SESSION III:

G. ASSESSING COMPETENCE: THE RIGHT TO MAKE BAD DECISIONS?

Common law dictates that individuals possess autonomy and self-determination, which encompasses the right to accept or refuse medical treatment, and to make independent decisions concerning their finances and other personal interests. Our legal system endorses the principle that all persons are competent to make reasoned decisions unless demonstrated to be otherwise. This workshop will address the standards upon which capacity and competence assessments are made for individuals whose cognitive capacity has come into question.

Presenter: Dr. David Reid

H. FAIRFAX HOARDING TASK FORCE

Learn about Fairfax County's Task Force on Residential Hoarding, a multi-agency response team created to provide a coordinated approach to severe hoarding cases. This session discusses the Task Force's history, structure, roles of participating agencies, reporting process, inspections, code enforcement and compliance, and key issues for establishing a successful hoarding task force.

Presenter: Northern Virginia Task Force- Jim Armstrong, Environmental Health Supervisor, Fairfax County Health Department

I. SUCCESSFUL PROSECUTION OF ELDER ABUSE

This informative workshop will concentrate on identifying criminal statutes that protect against Elder Abuse. We will cover physical abuse, neglect, financial fraud and exploitation, as well as sexual abuse. We also will

address the unique challenges and barriers to prosecuting cases of elder abuse.

Presenters: Mike Huberman, JD, Henrico Commonwealth Attorneys Office, Julie McConnell, JD, Richmond Commonwealth Attorneys Office

11:00-12:30 CLOSING PLENARY SESSION:

CURRENT NATIONAL ISSUES FOR NURSING FACILITY RESIDENTS

This plenary session considers a variety of current issues at the national level that affect nursing facility residents. Issues in Congress include the transparency and accountability bill, legislation prohibiting mandatory pre-dispute arbitration agreements, and the elder abuse bill. Regulatory issues include federal standards of care and recent developments in survey and certification, such as new surveyor guidance, the Five-Star Rating System, and Special Focus Facilities. Presenter: Toby S. Edelman Ed. M JD Senior Policy Attorney in the Washington, DC Office of the Center for Medicare Advocacy

VCPEA has applied for continuing education and CLE credits.

WWW.VCPEA.org

ACCOMMODATIONS AND HOTEL RESERVATIONS:

VCPEA has reserved a block of rooms at the Virginia Beach Resort and Conference Center at the special rate of \$99.00 a night, single or double occupancy. Please make your reservations directly with the hotel by calling **1-800-468-2722** and requesting the VCPEA conference rate. Reservations must be made by April 28, 2009 in order to receive the conference rate.

D. POWER OF ATTORNEY ABUSE: NEW LEGAL AND LEGISLATIVE REMEDIES.

This workshop will address: power of attorney (POA) abuse and its impact on victims; civil and criminal legal remedies for POA abuse; the new Uniform Power of Attorney Act (UPOAA) and its provisions to prevent and remedy abuse, which Virginia's legislature is expected to enact in 2009.

Presenter: Lori Stiegel

E. PROTECTING RESIDENTS' RIGHTS AND INVESTIGATING ELDER NEGLECT AND ABUSE IN NURSING HOMES PART 2.

Attorney Jeffrey Downey will discuss the substantive rights of nursing home and assisted living residents in Virginia and how best to protect those rights. He will address the Department of Health investigative process and explore how best to investigate and address the violation of those rights and elder neglect in the long term care setting. As a trial attorney he will share ways in which those rights can also be protected through our civil justice system.

Presenter: Jeff Downey

F. Geriatric Bingo

This fun and informative event will ask questions from our conference and present relevant information about aging issues. Prizes available!

Presenter: Dr. Jonathan Evans

3:45-5:45 PLAY- GRACE & GLORIE

Grace & Glorie is a heartfelt comedy written by Tom Ziegler. It tells the story of the growing relationship between a crotchety country-bred elderly woman and the city woman sent from hospice to render her aid and comfort.

6:00 RECEPTION HOSTED BY VCPEA
LOCATION: HOSPITALITY SUITE



09-96

COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

AND: Nutrition Directors

FROM: Elaine S. Smith, MS, RD
Program Coordinator

DATE: March 31, 2009

SUBJECT: Article on Dietary Supplements for Weight Loss

Following is an article on weight loss supplements that may be of interest to staff and seniors.

As the article states, "Weight loss "cures" come and go. Information on weight loss products is available from many different sources, including the organizations below. Before spending money, find out if the claims are fact or phony."

Information in the article was obtained from the [Federal Trade Commission](#) (1-877-FTC-HELP), [US Pharmacopeia](#) (1-800-822-8772), and [Consumerlab.com](#) (1-914-722-9149).

Weight Loss Supplements: Fact or Fiction?

"Cures" Are Often More Hype than Help

-- By Becky Hand, Licensed & Registered Dietitian

Whether browsing the Internet, surfing through 500 channels, or flipping through your favorite magazine (or tabloid), you'll find them everywhere: weight loss supplements that offer quick and easy solutions to shedding unwanted pounds. Simply pop a pill, put on a patch, or tone up with the touch of a cream. Do these "cures" work, or are they more hype than help? Let's take a look at some of the most popular weight loss products, their claims, their risks...and why they're NOT such a great idea.

Weight Loss Supplements

- **Bitter Orange, Citrus Aurantium, and Sour Orange:**

These products are concentrated extracts from the orange peel. They are often used in "ephedra-free" products, claiming that they increase metabolism, but tests involving people haven't even been conducted! They contain the stimulant synephrine, which can cause hypertension and cardiovascular toxicity. Orange supplements can also interact with medication. Their risks are even greater when used with other stimulant-containing ingredients such as caffeine and decongestants. Individuals with heart disease, hypertension, and glaucoma should avoid these at all costs.

- **Chromium** (*Examples: Puritan's Pride Chromium Picolinate, Vitamin World Naturally Inspired Yeast Free Chromium Picolinate, Nutrilite Trim Advantage*):

Claims that chromium increases weight loss and improves body composition have only been backed by one study, while all other studies failed to find any supporting evidence. There are two types of chromium: Trivalent (which the body requires and is considered safe in doses of 200 micrograms or less daily) and Hexavalent (which may cause stomach upsets, ulcers, convulsions, kidney and liver diseases, and death). Hexavalent chromium can be toxic and shouldn't be used in supplements, but some do contain this dangerous form!

- **Conjugated Linoleic Acid (CLA)** (*Examples: Vitamin World CLA, Nature Made CLA, Now Foods CLA*):

This product claims to promote leanness, but very few studies support this claim. While more research is needed, CLA is generally safe.

- **Ephedra/Ephedrine:**

Ephedra may aid weight loss by suppressing appetite, and research has proven its effectiveness when used with caffeine. However, ephedra causes high blood pressure, stroke, and serious heart problems, which is why the sale of dietary supplements containing ephedra was prohibited in April 2004.

- **7-Keto Dehydroepiandrosterone (7-keto DHEA):**

Preliminary research indicates that this product may decrease body weight and fat composition by increasing metabolism, but larger research studies are needed (see Ephedra to learn why testing is important).

- **Hydroxycitric Acid (HCA) and Garcinia Cambogia:**

These products claim to suppress appetite and improve fat metabolism. While studies have shown mixed results, they are generally safe.

- **L-Carnitine:**

L-Carnitine claims to inhibit obesity, but there is very little evidence of its effectiveness.

- **Dihydroxyacetone (DHA), Pyruvate, and Dihydroxyacetone and Pyruvate (DHAP):**

A few small studies suggest that these supplements may have modest effects on weight loss, but research is needed. Presently, no serious side effects have been reported.

Fat Blockers

- **Alli:** For a detailed discussion of Alli, the first FDA approved weight loss pill available over the counter, [click here](#).
- **Lecithin, Guar Gum, Psyllium Hulls, Chickweed, and Chitosan** (Examples: *Chito-Trim, Exercise in a Bottle, Fat Blocker—Chitosan Complex, Fat Grabbers, Fat Trapper, Fat Trapper Plus, Metabo Fat Blocker, MiracleTab, Now Chitosan with Chromium*):
These products claim to help break down fat so that it can be absorbed, emulsified, trapped, and eliminated by the body. There is currently no competent and reliable scientific research to support such claims.

Starch Blockers

- **White Bean Extract, White Kidney Bean Extract, Green Tea Extract, Chlorogenic Acid from Coffee, Banaba Extract, Phaseolus Vulgaris, Natural Bean Extract** (Examples: *Carb Blocker Triple Action, CarboGetic, Carbo Grabbers, Carb Shuttle, CarboVal, Extreme Carb Blocker, Maximum Strength Phase 2 Carb Blocker, Now Phase 2 Carb Blocker, Starch Blocker Plus, UltraCarb, Xenadrine CarboCurb*):
These products claim to prevent the digestion and neutralization of sugar and carbohydrates, therefore reducing the calories available to the body. The undigested carbohydrates are carried to the intestine for elimination. These claims lack scientific research and are false and misleading.

Stress, Craving, and Appetite Controllers

- **Hoodia Gordonii:** For years the South African San bush people have used the succulent plant, Hoodia gordonii, to stave off hunger during long hunts. A few preliminary and *unpublished* research studies indicate that there may be some type of appetite-suppressing mechanism from a molecule in Hoodia called P57. This molecule supposedly affects the hypothalamus of the brain to reduce appetite. Now this plant from the Kalahari Desert is being imported and made into Hoodia pills, tablets and capsules to supposedly help with hunger control for those trying to lose weight. However, there is no conclusive evidence to support these claims regarding appetite control and weight loss. For now, more evidence is needed to determine if Hoodia is effective for any clinical condition. Beyond that, there is plenty of fake Hoodia on the market. News reports suggest that some Hoodia products don't even contain any actual Hoodia.
- **Magnolia Bark, Korean Ginseng, Chromium Picolinate, and Chitosan** (Examples: *CarboGetic, CarboVal, Maximum Strength Phase 2 Carb Blocker, Miracle Tab, Now Chitosan with Chromium*):
These ingredients claim to suppress appetite, reduce stress-induced cravings, and normalize cravings overall. No competent and reliable scientific evidence exists to support these claims.
- **Cortisol Control** (Examples: *CortiSlim, CortiStress, Cortisol Stress Test*):
Cortisol is also called the "stress hormone." These claims suggest that a persistently elevated cortisol level is the underlying cause of weight gain and weight retention. The supplements further claim to eliminate cravings for certain foods (including sweets and carbohydrates), control appetite, ease eating due to stress, burn calories efficiently, and therefore result in weight loss. While cortisol levels can be a factor, these "control" claims are not supported by documented scientific research. They are considered false, misleading, and deceptive.

Body Composition Regulators

- **Chromium Picolinate and Garcinia Cambogia** (Example: *Turbo Tone*):
These claim to significantly improve body composition and fat loss, particularly in individuals who may not be as aggressive in making lifestyle changes. These claims lack scientific substantiation, making them false and misleading.

Caffeine Boosters

- **Mate, Yerba Mate, Jesuit's Tea, Paraguay Tea, Black Tea, Cocoa, Coffee, Cola Nut, Green Tea, Guarana** (Examples: *Metabolife, Stacker Two*):
The caffeine contained in these products is a stimulant, which raises blood pressure and has diuretic effects. Chronic use of caffeine can produce tolerance and psychological dependency as well. Caffeine was often combined with ephedra (which was removed from the market in the U.S.) for weight loss.

Topical Fat Loss Gel and Cream Ingredients

- **Leptoprin and Anorex** (Examples: *Cutting Gel, Dermalin, Tummy Flattening Gel*):
These products claim to promote a rapid and visible fat loss on the areas of the body where they are applied. These are false, unsubstantiated claims, without any scientific research.

Weight loss "cures" come and go. Information on weight loss products is available from many different sources, including the organizations below. Before wasting your money, find out if the claims are fact or phony.

Information in the article was obtained from the [Federal Trade Commission](#) (1-877-FTC-HELP), [US Pharmacopeia](#) (1-800-822-8772), and [Consumerlab.com](#) (1-914-722-9149).



09-97

COMMONWEALTH of VIRGINIA
Department for the Aging

MEMORANDUM

TO: Executive Directors
Area Agencies on Aging

AND: Care Coordinators, Health Promotion/Disease Prevention Coordinators,
and Nutrition Directors

FROM: Elaine S. Smith, MS, RD
Program Coordinator

DATE: March 31, 2009

SUBJECT: Alcohol and Aging Awareness Media Campaign

Please be aware of "The Best Is Yet To Come" media campaign, funded by the Virginia Department of Health, Division of Injury and Violence Prevention, and created by the Virginia Department of Alcoholic Beverage Control (VA ABC) and the Alcohol and Aging Awareness Group (AAAG).

VA ABC, AAAG, and Channel 6 WTVR produced a television commercial that will start airing April 6, 2009 and run through the first week of May, 2009. (April is Alcohol Awareness month, and May is Older Americans month.) The 30 second spot will run on all three major television stations in the Richmond area and two stations in the Roanoke/Lynchburg area. This is an awareness campaign targeted to older adults aged 55 and older and their adult children.

You may view the commercial by visiting the following link:
http://www.youtube.com/watch?v=k_rIRtYfM3A. A list of the stations airing the television commercial is attached.

SUBJECT: Alcohol and Aging Awareness Media Campaign

Page 2

Virginia 211, SeniorNavigator and Virginia Poison Control Network are partners on this campaign. Depending on their questions, Virginia 211 callers will be directed to the following groups for information:

- Area Agencies on Aging
- SeniorNavigator
- Community Service Boards (CSBs)
- www.samhsa.gov – the Substance Abuse and Mental Health Services Administration
- Virginia Poison Control Center

Please anticipate that AAAs located in the viewing area and others may receive calls requesting information. Calls may be handled in the following ways:

- Refer callers to the VA ABC website at www.abc.state.va.us/education.html for information available from VA ABC and the AAAG including *The Best is Yet to Come* brochure. A resource list is also attached.
- For more free Information, attached are materials that you may disseminate.
“As You Age...A Guide to Aging, Medicines and Alcohol”
“Good Mental Health is Ageless”
“Aging, Medicines and Alcohol”
“How to Talk to an Older Person Who Has a Problem with Alcohol or Medications”
- Additional information is available by download from the Substance Abuse and Mental Health Services Administration (SAMHSA) such as the toolkit *“Get Connected! Linking Older Adults with Medication, Alcohol, and Mental Health Resources”*
<http://download.ncadi.samhsa.gov/prevline/pdfs/getconnectedtoolkit.pdf>
Or you may call the National Clearinghouse for Alcohol and Drug Information (NCADI) at 1-800-729-6686 or visit www.ncadistore.samhsa.gov, click on “Audience” and select “Older Adults” or visit http://www.samhsa.gov/aging/age_08.aspx
- Information is also available free from Hazelden. Call 1-800-I-DO-CARE or visit www.hazelden.org
What Can I Say to Get You to Stop?
<http://www.hazelden.org/web/public/whatcanisay.page>

Article on older adults and recovery
<http://www.hazelden.org/web/public/ade60306.page>

SUBJECT: Alcohol and Aging Awareness Media Campaign

Page 3

Article on substance abuse among the elderly

<http://www.hazelden.org/web/public/ade60220.page>

For services

- Refer to www.SeniorNavigator.org, Click on “Health”, scroll to “Medical Concerns: Substance Abuse”.
- You may also refer the callers to their Primary Care Physicians, Geriatrician, or Geriatric Psychiatrists in the viewing area. Dr. Joseph James, Midlothian, Joseph.James@HCAHealthcare.com, 804-320-4252, or Dr. David Trinkle, Roanoke, dbtrinkle@cox.net, 540-314-8875, have expertise in this field.
- In Lynchburg there is the Pathways Treatment Center. Call 866-749-4455 for referrals or visit the website at www.recoveratpathways.com.
- The SAMSHA website also has an online treatment locator <http://dasis3.samhsa.gov/> and a 24 hour help line. Call 1-800-662-HELP (1-800-662-4357)
- Or you may refer to any appropriate local services of which you are aware.

Thank you for assisting in this worthwhile awareness campaign to ensure *The Best Is Yet to Come* for older adults of Virginia. If you have any questions or concerns, please contact me at 804-662-9319 or Elaine.Smith@vda.virginia.gov or Regina Whitsett at 804-213-4445 or Regina.Whitsett@abc.virginia.gov.

Attachments

As You Age...

A Guide to Aging, Medicines, and Alcohol



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Food and Drug Administration
www.samhsa.gov
www.fda.gov



As we age, the need to take more and different kinds of medications tends to increase. Also, growing older means that our bodies respond differently to alcohol and to medication than when we were younger.

You should be aware that:

- Some of your medicines won't mix well with other medications, including over-the-counter medications and herbal remedies.
- Many medications do not mix well with alcohol.
- Changes in body weight can influence the amount of medicine you need to take and how long it stays in your body. Body circulation may slow down, which can affect how quickly drugs get to the liver and kidneys. In addition, the liver and kidneys may work slower, which can affect how a drug breaks down and is eliminated from the body. Due to these changes, medicine may remain in your body longer and create a greater chance of interaction.

To guard against potential problems with medicines, become knowledgeable about your medication and how it makes you feel.

Take steps on your own:

- Read the labels of your medications carefully, and follow the directions.
- Look for pictures or statements on your prescriptions and pill bottles that tell you not to drink alcohol while taking the particular medication. If you are taking medications for sleeping, pain, anxiety, or depression, it is unsafe to drink alcohol.
- One alcoholic drink a day is the recommended limit for anyone over the age of 65 who has not been diagnosed with a drinking problem. That's 12 ounces of beer, 1.5 ounces of distilled spirits, or 5 ounces of wine.
- Talk to your health care professional about all medicines you take, including prescription; over-the-counter (OTC) medications; and dietary supplements, vitamins, and herbals.
- Tell your doctor about any food or medicine allergies you have.
- Keep track of side effects, and let your doctor know immediately about any unexpected symptoms or changes in the way you feel.
- Go through your medicine cabinet at least once a year to get rid of old or expired medicines.
- Have all of your medicine reviewed by your doctor at least once a year.

Medicine and alcohol misuse can happen unintentionally.



Here are some signals that may indicate an alcohol or medication-related problem:

- Memory trouble after having a drink or taking medicine
- Loss of coordination (walking unsteadily, frequent falls)
- Changes in sleeping habits
- Unexplained bruises
- Being unsure of yourself
- Irritability, sadness, depression
- Unexplained chronic pain
- Changes in eating habits
- Wanting to stay alone a lot of the time
- Failing to bathe or keep clean
- Having trouble finishing sentences
- Having trouble concentrating
- Difficulty staying in touch with family or friends
- Lack of interest in usual activities

In the case of an emergency, call 911.
To talk to a health care information specialist
about possible alcohol or drug misuse or for
dependency treatment referral, call the Substance
Abuse and Mental Health Services

Administration at:
(800) 662-HELP (4357)
TDD (800) 487-4889
or visit

www.findtreatment.samhsa.gov

For more information about your medicines, con-
tact the Food and Drug Administration at:
888-INFO-FDA (463-6332)
www.fda.gov

Check the box below to see if a
local program or provider has listed
its address and/or phone number.

For Health Care Professionals

Do not reproduce or distribute this publication
for a fee without specific, written authorization
from the Office of Communications,
Substance Abuse and Mental Health
Services Administration,
U.S. Department of
Health and Human Services.

Printed 2004, SMA 04-3940



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Food and Drug Administration
www.samhsa.gov
www.fda.gov

Good Mental Health is Ageless



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
Center for Mental Health Services
www.samhsa.gov

A healthy mind is as important as a healthy body.

Good mental health can help you:

- Enjoy life more.
- Handle difficult situations.
- Stay better connected to your family, your friends, and your community.
- Keep your body strong.



Being in good mental health doesn't mean that you'll never feel sad, lonely, or 'down.' But when these feelings disrupt your life or go on too long, there may be a bigger problem.



Unusual feelings of sadness or depression can happen when

- You have to move from your home.
- People you love get sick or die.
- You have to depend on others to get around, or even to do the simple things you used to do yourself.
- Physical health problems seem overwhelming.



In addition to feelings of depression, some of the following changes in behavior may suggest other emotional problems:

- Being easily upset
- Not having the energy to do the things you want to do, or used to do
- Changing sleep habits
- Increasing forgetfulness
- Being afraid of things
- Changes in eating habits
- Neglecting housework
- Crying a lot
- Having trouble managing money
- Believing that you can't do anything worthwhile
- Being confused
- Getting lost a lot
- Staying alone a lot of the time
- Spending little or no time with friends
- Feeling hopeless or overwhelmed
- Thinking life isn't worth living
- Thinking about hurting yourself

Here are some things you can do if depression or other changes in your behavior last longer than two weeks:



© Matthew McVay/Getty Images/Stone

- Talk with your doctor or other health care professional. Tell them exactly how you're feeling, and let them know how this is different from the way you used to feel. They can check for any problems you may be having, and can discuss treatment options with you.
- Share your feelings with a friend, family member or spiritual advisor. These people can sometimes notice changes that you might not see.
- Ask for advice from a staff member at a senior center or other program you participate in.
- Call for information from the National Eldercare Locator at 1-800-677-1116, or speak with the Federal Center for Mental Health Services (CMHS) by calling 1-800-789-2647 or visiting its Web site at www.cmhs.samhsa.gov. These organizations can help you find a program or provider near you.
- Check your local yellow pages for organizations that can help.



**At any age, help can support growth,
discovery, recovery, and happiness.**

**Call the National Eldercare Locator at:
1-800-677-1116**

**Call the Federal Center for Mental
Health Services (CMHS) at:
1-800-789-2647**

or visit www.cmhs.samhsa.gov

Check the box below to see
if a mental health program or provider
near you has listed its address and/or
phone number.

For Health Care Professionals:

Do not reproduce or distribute this publication for a fee without specific, written authorization from the Office of Communications, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

This brochure was created to accompany the publication *Substance Abuse Among Older Adults*, #26 in CSAT's Treatment Improvement Protocol (TIP) series. The TIP series and its affiliated products are available free from SAMHSA's National Clearinghouse for Alcohol and Drug Information (NCADI). Call 1-800-729-6686 or 1-800-487-4889 TDD (for the hearing impaired), or visit www.csat.samhsa.gov.

DHHS Publication No. [SMA] 02-3618

Printed 2001



Aging, Medicines and Alcohol



© David Young-Wolff/ Photodisc



U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
Substance Abuse and Mental Health Services Administration
Center for Substance Abuse Treatment
www.samhsa.gov

**As you get older,
it's important to
take care of your
health.**



© Paul Conklin/Photodisc



As we age, the need to take more, and different kinds of medication tends to increase. Also, growing older means that our bodies respond differently to alcohol and to medication than when we were younger.

You should be aware that:

- Some of your medicines won't mix well with other medications, including over-the-counter medications and herbal remedies.
- Many medications do not mix well with alcohol.

Because medicine and alcohol misuse can happen unintentionally, it's important to know if you're having a problem.



Here are some signals that may indicate an alcohol or medication-related problem:

- Memory trouble after having a drink or taking medicine
- Loss of coordination (walking unsteadily, frequent falls)
- Changes in sleeping habits
- Unexplained bruises
- Being unsure of yourself
- Irritability, sadness, depression
- Unexplained chronic pain
- Changes in eating habits
- Wanting to stay alone a lot of the time
- Failing to bathe or keep clean
- Having trouble finishing sentences
- Having trouble concentrating
- Difficulty staying in touch with family or friends
- Lack of interest in usual activities

Do you think you may be having trouble with alcohol or medications? Do you want to avoid a problem? Here are some things you can do:

Talk to someone you trust:

- Talk with your doctor or other health care professional. They can check for any problems you may be having, and can discuss treatment options with you.
- Ask for advice from a staff member at a senior center or other program in which you participate.
- Share your concerns with a friend, family member or spiritual advisor.

Take steps on your own:

- Read the labels of your medications carefully and follow the directions.
- Look for pictures or statements on your prescriptions and pill bottles that tell you not to drink alcohol while taking the particular medicine. If you are taking medication for sleeping, pain, anxiety, or depression, it is unsafe to drink alcohol.
- If you have never been diagnosed with a drinking problem, one alcoholic drink a day is the recommended limit for anyone over the age of 65. That's 12 ounces of beer, 1.5 ounces of distilled spirits or 5 ounces of wine.



Share the right information with your health care professional:

- Make a list for your doctor of all your medications (including doses), especially on your first visit. Keep it updated, and carry it with you.
- Remind your doctor or pharmacist about any previous conditions that might affect your ability to take certain medicines, such as a stroke, hypertension, serious heart disease, liver problems or lung disease.
- Don't be afraid to ask questions if you don't know the meaning of a word, if instructions are unclear, or if you want more information.
- Whenever possible, have your doctor or a member of the medical staff give you written advice or instructions.

If you want to talk to a qualified care professional about alcohol and medications, a 24-hour hotline is available:

1-800-662-HELP (4357)

or visit

www.findtreatment.samhsa.gov

Check the box below to see if a local program or provider has listed its address and/or phone number.

For Health Care Professionals:

Do not reproduce or distribute this publication for a fee without specific, written authorization from the Office of Communications, Substance Abuse and Mental Health Services Administration, U.S. Department of Health and Human Services.

This brochure was created to accompany the publication *Substance Abuse Among Older Adults*, #26 in CSAT's Treatment Improvement Protocol (TIP) series. The TIP series and its affiliated products are available free from SAMHSA's National Clearinghouse for Alcohol and Drug Information (NCADI). Call 1-800-729-6686 or 1-800-487-4889 TDD (for the hearing impaired), or visit www.csat.samhsa.gov.

DHHS Publication No. [SMA] 02-3619

Printed 2001





**VA ABC
2009 Awareness Campaign Recap**

Flight dates: April 6, 2009 - May 10, 2009

<u>Market/Station</u>	<u>Noon News Est. # :30 Ads</u>	<u>Nov08/May08 PJ Est. GRPs A50+</u>	<u>Gross Impressions</u>	<u>Cost</u>	<u>Reach/Frequency</u>
RICHMOND-PETERSBURG					94.5/3.4
WRIC	25	60.0	25,000	\$1,500.00	
WTVR	25	110.0	47,500	\$4,375.00	
WWBT	34	149.6	64,600	\$3,740.00	
Total Richmond	84	319.6	137,100	\$9,615.00	
ROANOKE-LYNCHBURG					88.1/3.0
WDBJ	25	147.5	57,500	\$2,000.00	
WSET	25	80.0	32,500	\$1,625.00	
Total Roanoke/Lynchburg	50	227.5	90,000	\$3,625.00	
GRAND TOTAL	134	547.1	227,100.0	\$13,240.00	

Please note: Gross Rating Points and Cost per Point across markets, demos, and/or media are based on the raw sum of GRPs from each market, demo, and/or media.