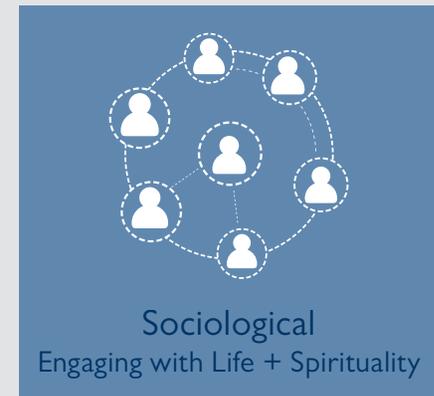
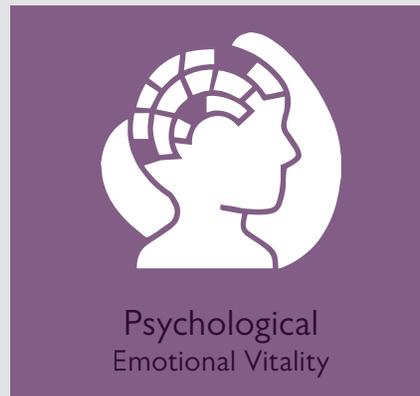


# The Changing Keys to Successful Aging

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## EVERYONE AGES

Yet, not everyone relates to his or her own aging in the same way. In the past, successful aging was regarded by many healthcare professionals as the achievement of an advanced age while free from debilitating disease or disability.<sup>1</sup> Most past clinical studies of aging tended to focus on physiological factors of aging alone. And even when considering other domains of successful aging besides the physiological, minimal attention has been given to how psychological or other factors may mitigate sometimes-severe physiological decline.

But it's not difficult to imagine a case in which an older adult confined to a wheelchair and suffering from a chronic medical condition who exhibits psychological resiliency and volunteers regularly with a close social network may be aging more successfully than a disconnected, isolated peer whose physiological condition is substantially better.

### A MORE COMPLETE PICTURE

New research seeks to improve upon the past definitions of successful aging to provide a multidimensional view. Inside, you'll learn the framework of successful aging proffered by Young, Fan, Parrish, and Frick. Armed with their assessment tool, you'll be better equipped to determine your patients' status on the path to successful aging. And, you'll have the insights to help make meaningful changes in care to support individual patient needs.



### The Physiological Domain

PAGE 4



### The Psychological Domain

PAGE 5



### The Sociological Domain

PAGE 6

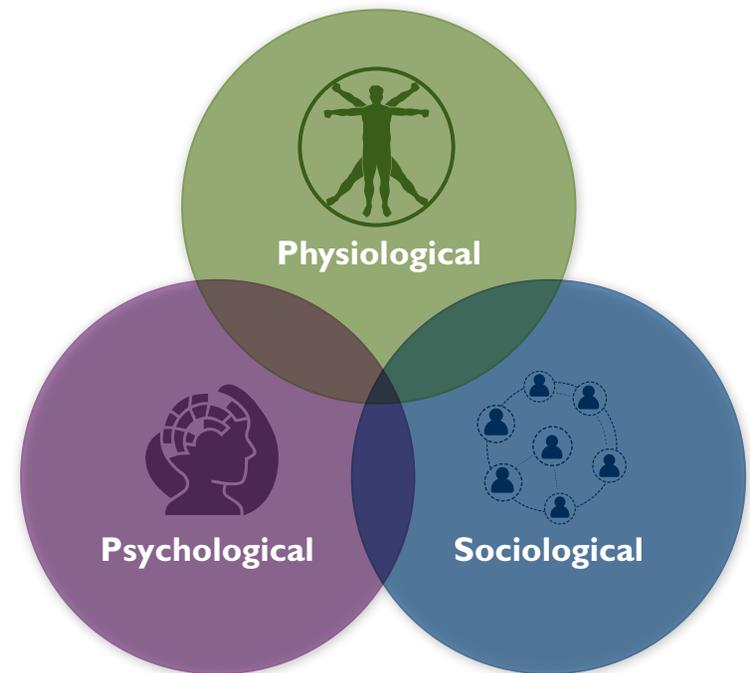
# MULTIPLE PATHWAYS TO SUCCESSFUL AGING

## THE THREE DOMAINS

To capture the complexities and interdependencies of successful aging, Young, Fan, Parrish and Frick proposed this new definition:

*A state wherein an individual is able to invoke adaptive psychological and social mechanisms to compensate for physiological limitations to achieve a sense of well-being, high self-assessed quality of life, and a sense of personal fulfillment even in the context of illness and disability.<sup>2</sup>*

This new outlook incorporates physiological, psychological and social aspects of aging as three domains that permit strengths in one or two domains to counterbalance deficiencies in the other domain(s).





# THE PHYSIOLOGICAL DOMAIN

## DISEASE + IMPAIRMENT

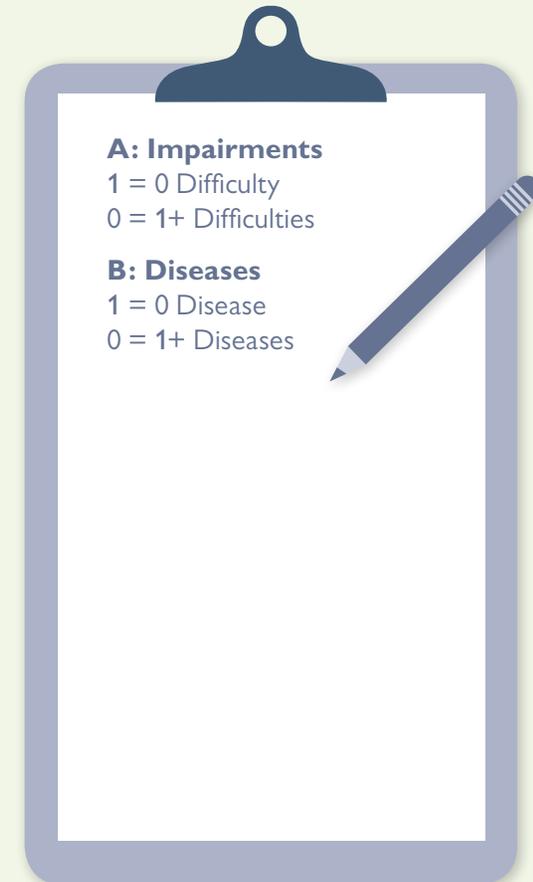
To assess the physiological domain, evaluate functional impairments using Nagi's<sup>3</sup> performance variables on a yes or no basis for difficulty:

### A. EVALUATE USING NAGI'S 7 PERFORMANCE VARIABLES

- |  |   |
|--|---|
| <ul style="list-style-type: none"><li>○ Standing for long periods</li><li>○ Lifting or carrying weights of 10 lbs</li><li>○ Ascending or descending stairs</li><li>○ Walking</li></ul> | <ul style="list-style-type: none"><li>○ Stooping, bending or kneeling</li><li>○ Using Hands and Fingers</li><li>○ Reaching with either/or both arms</li></ul> |
|--|---|

### B. THEN, EVALUATE COMORBIDITY OF CHRONIC CONDITIONS

- |   |  |  |
|---|--|--|
| <ul style="list-style-type: none"><li>○ Angina</li><li>○ Myocardial infarction</li><li>○ Congestive heart failure</li><li>○ Peripheral arterial disease</li><li>○ Hip fracture</li><li>○ Osteoporosis</li></ul> | <ul style="list-style-type: none"><li>○ Osteoarthritis of hands</li><li>○ Osteoarthritis of knees</li><li>○ Osteoarthritis of hips</li><li>○ Rheumatoid arthritis</li><li>○ Disk disease</li><li>○ Spinal stenosis</li></ul> | <ul style="list-style-type: none"><li>○ Stroke</li><li>○ Parkinson's disease</li><li>○ Pulmonary disease</li><li>○ Diabetes</li><li>○ Cancer<sup>4</sup></li></ul> |
|---|--|--|





# THE PSYCHOLOGICAL DOMAIN

## EMOTIONAL VITALITY

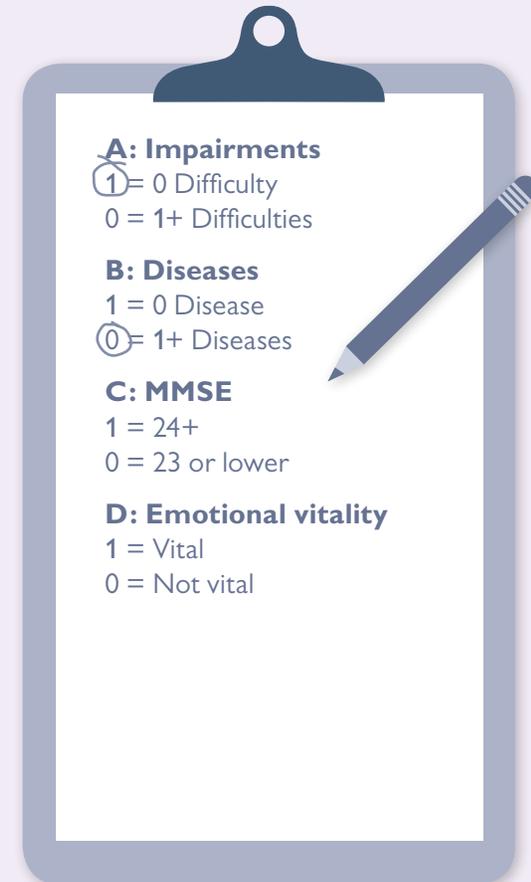
Psychological evaluation can be accomplished using a combination of already-available tools to assess cognitive function and emotional vitality.

### C. COGNITION:

A score of 24 or better on the Mini-Mental State Examination (MMSE) indicates proper cognitive function.

### D. EMOTIONAL VITALITY:

Older adults who report “a high sense of personal mastery, being happy, and having low depressive symptomatology and anxiety,” are deemed to have superior emotional vitality.<sup>4</sup> Emotional vitality scoring model utilizes depression score (GDS) and a shortened 4-item version of the anxiety subscale of the Hopkins symptom checklist (4Qs).





# THE SOCIOLOGICAL DOMAIN

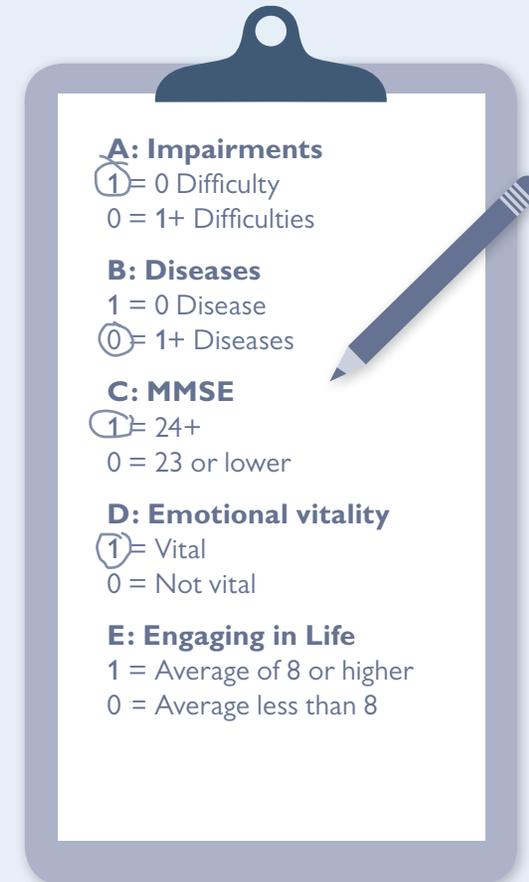
## ENGAGING WITH LIFE + SPIRITUALITY

Sociological “interaction with the environment and engagement with social activities”<sup>4</sup> can be determined using the following 5 questions:

### E. ENGAGING WITH LIFE:

On a scale of 1 to 10, how satisfied are you with . . .

1. your contribution to the community, neighborhood, religious, political, or other group?
2. how respected you are by others?
3. the amount of variety in your life?
4. the help you receive from your family, friends (eg, errands)?
5. the help you give to your family and friends?



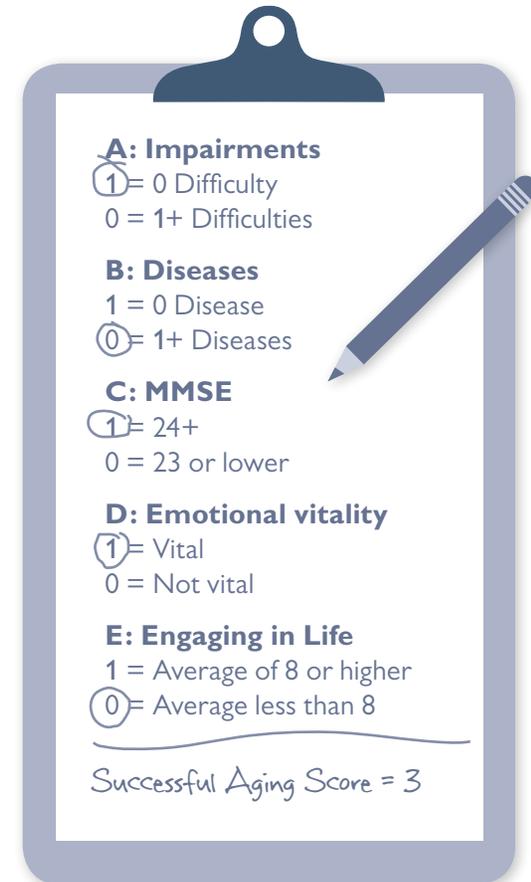
# EVALUATION

## Using this assessment tool can provide a basic view of the challenges and strengths of each patient.

Young, Fan, Parrish, and Frick achieve a quantitative measure of successful aging from a complex evaluation of the preceding tests by summing the evaluation scores of the three domains.

The Successful Aging score can be used as a predictor to indicate hospitalizations and ability to remain living independently. In fact, research indicates there are more hospitalizations and higher risk of needing nursing home care for those who had a lower Successful Aging Score.

It is essential to identify the support older patients need and design appropriate intervention strategies to slow the disablement process and help prevent or delay nursing home admission. This can help patients and caregivers to plan ahead and coordinate needed care.



# ADDITIONAL CONSIDERATIONS

## **In many cases, physiological independence plays a major role in psychological and sociological wellness.**

Older adults can be dependent on a caregiver for daily activities such as shopping and cooking, or even for dressing, bathing and other ADLs.<sup>5</sup> Sometimes, the caregiver is one of only a handful of people who interact with the older patient.

With around 42 million caregivers devoting at least 20 hours per week in the United States alone there is a tremendous opportunity to apply the lessons of the successful aging assessment to make a positive impact on the deficiencies identified.

Though frequently only used for physiological care, caregivers can be encouraged to do more to support the psychological and sociological needs of the patients in their care. This focus on quality of life, rather than just prolonging of life, more closely aligns with what patients report wanting for themselves.<sup>6</sup>

## LIFELINE RESOURCES

The Lifeline CarePartners Mobile smartphone application can help caregivers coordinate caregiving tasks. The use of the application can relieve the sense of being overwhelmed, which is common when caring for an aging loved one.

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1. Rowe JW, Kahn RL. Human aging: Usual and successful. *Science* 1987; 237:143–149.

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6. Fried TR, TinettiME, Iannone L, O'Leary JR, Towle V, Van Ness PH. Health outcome prioritization as a tool for decision making among older persons with multiple chronic conditions. *Arch Intern Med*. 2011;171(20):1854-1856.

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## Technologically Advanced:

AutoAlert detects over 95% of falls and can automatically place the call for help, even if subscribers can't push their button.\*

## Responsive:

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