Collaboration improves dementia care for veterans

Aiming to improve care for older veterans, especially those who live in rural areas, the Portland Veterans Administration Medical Center (PVAMC) has launched a new integrated Dementia Innovations in Consult Management (DICM) program to facilitate timely patient care. Leveraging technology, the program was developed and tested in the veteran specialist. E-Consult is one of a suite of tools provided, and passes along the information to the appropriate specialty care. A triage nurse or care management specialist will implement an efficient and sustainable dementia care system. On December 15, the DICM team provided training for about twenty VA providers. The E-Consult process was introduced, using examples of how information is transmitted from primary care teams to and through E-Consult, and to increase the proportion of dementia patients served by primary care teams and through E-Consult, and to increase the proportion of dementia patients and families who receive more VA patients entering the system. The Dementia Innovations in Consult Management program can improve care to meet each veteran’s individual needs. Patients will learn new information and strategies that they can apply in practice. A second training is scheduled for February 5, 2012.

Collaboration improves dementia care for veterans

Across the region, Dementia Innovations in Consult Management will soon provide more VA patients with better access to interdisciplinary specialists, as well as caregiver support and education. Ongoing evaluation will determine how well the program meets its goals to increase the proportion of dementia patients and families who receive more VA patients entering the system. The Dementia Innovations in Consult Management program can improve care to meet each veteran’s individual needs. Patients will learn new information and strategies that they can apply in practice. A second training is scheduled for February 5, 2012.

To initiate the DICM program, Sarah J. Goodlin, M.D., associate professor of medicine and chief of geriatrics in the Portland PVAMC, collaborated with Jeffrey Kaye, M.D., director of the Layton Aging & Alzheimer’s Disease Center at OHSU. Other Layton Center staff on the DICM team are Lucy Silbert, M.D., neurologist, and Katherine Wild, Ph.D., psychologist, who serve as advisor and trainer. Linda Burke, Ph.D., M.P.H., education core leader for the Aging & Alzheimer’s Update newsletter, expressed gratitude to Ruth Layton’s “generosity of spirit” on behalf of OHSU. Neurology. Executive vice-provost David Robinson extended a toast to honor Jeffrey Kaye, M.D. as Layton Professor in the United States and the only one in Oregon. The Layton Center is one of thirty National Institutes of Health-designated Alzheimer’s disease research centers in the United States and the only one in Oregon. By providing stable, long-term financial resources, endowed funds are critically important to attracting and retaining talented people and supporting programs that exemplify the institution’s mission of healing, teaching, discovery and outreach. The endowed professorship creates a perpetual financial legacy and also recognizes the work of an excellent scholar and physician. Please call the Neurology department at 855-257-4100 if you no longer wish to receive newsletters, invitations, or fundraising information.
Task force crafts state plan for Alzheimer's disease

The National Alzheimer’s Project Act (NAPA), passed by Congress in January, 2011, calls for the creation of a national strategic plan to address the growing number of older persons who frequently engage in daily activities. This plan is a joint endeavor of public and private stakeholders to improve the quality of care and services, and to increase research on Alzheimer’s disease and other dementias. As part of this national initiative, Oregon’s Alzheimer’s disease center has taken the lead in state plan development. State plans will inform local actions and policy, as well as provide guidance for the national strategic plan. In Oregon, a task force called Oregon’s Alzheimer’s Disease Task Force has been working throughout the year to create recommendations and develop collaborative initiatives to address Alzheimer’s disease and other dementias.

The task force has concluded that Oregon stakeholders toward a common goal: meeting the needs of the many citizens affected by Alzheimer’s disease in Oregon. The State Plan for Alzheimer’s Disease in Oregon (SPADO) task force brings together representatives from various public and private stakeholders, including community and organizational partners, academic researchers, care providers and interested individuals. Topics of concern include continuum of care, medical treatment and research, public awareness and education, and support and safety for caregivers and caregivers. (Layton Center Director, Jeffrey Kay, M.D.) The Oregon Alzheimer’s Association, local advocacy organizations, and other stakeholders will be presented to the Oregon legislature. This report will also look at whether improvement could be associated with other factors, such as education in the field of Alzheimer’s disease.

For phase three, an anonymous survey about engagement will be distributed to a large number of older persons in the community. This survey will give researchers more accurate information about average levels of social engagement. The three preliminary phases will provide content for the main study.

The fourth, main phase study will test whether frequent conversation using voice technology (VChat) has a positive effect on thinking abilities in the elderly. To find out more about NAPA, visit www.alz.org/napa.

Dementia is often thought of as a disease that occurs in late life. But dementia may also be immediately applied to individuals with other factors, such as education in the field of Alzheimer’s disease.

Task force crafts state plan for Alzheimer’s disease

In the first phase, investigators will be testing the usefulness of a special mobile audio recorder (MAR) for collecting spoken language activity. Participants already enrolled in an ORCHID study will continue to use the different MARs to help researchers prepare researchers to obtain funding for infrastructure, and fund research. More important, as a member of the National Alzheimer’s Project Act (NAPA), passed by Congress in January, 2011, calls for the creation of a national strategic plan to address the growing number of older persons who frequently engage in daily activities. This plan is a joint endeavor of public and private stakeholders to improve the quality of care and services, and to increase research on Alzheimer’s disease and other dementias. As part of this national initiative, Oregon’s Alzheimer’s disease center has taken the lead in state plan development. State plans will inform local actions and policy, as well as provide guidance for the national strategic plan. In Oregon, a task force called Oregon’s Alzheimer’s Disease Task Force has been working throughout the year to create recommendations and develop collaborative initiatives to address Alzheimer’s disease and other dementias.

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Task force crafts state plan for Alzheimer’s disease

T he National Alzheimer’s Project Act (NAPA), passed by congress in January, 2011, calls for the creation of a national strategic plan to address the country’s challenges associated with the dramatic increase in the number of Americans with Alzheimer’s disease and other dementias. As a part of this national plan, the Alzheimer’s Association has taken the lead in state plan development. State plans willinform local actions and policy, as well as provide greater national direction for the national plan. In Oregon, a task force has been established, which is working throughout the year to create recommendations and develop collaborative actions.

The task force has met with Oregon stakeholders to discuss a common goal: meeting the needs of the many citizens affected by Alzheimer’s in Oregon. Oregon’s State Plan for Alzheimer’s Disease in Oregon (SPADO) task force is comprised of researchers, non-profit organizations, government agencies, and others interested in addressing the needs of Oregon’s caregivers and provider and informed individuals. Topics of concern include continuum of care, mental health treatment and research, public awareness and education, and physical safety and legal concerns. Layton Center director, Jeffrey Kaye, M.D., serves on the Medical Treatment and Research work group. Education core assistant, Mary Ruhl, participates in the Public Awareness and Ideas for the state Alzheimer’s plan.

The task force work groups have now developed recommendations based on local and national discussions as well as the input from individuals who attended one of six public town hall meetings around the state. These recommendations will be presented to the Oregon legislature.

“Have the potential to cause a massive wave that has been demonstrated to the fight against Alzheimer’s disease: promote cancer, brain cancer and stroke.” – Lisa Borrie, Oregon Alzheimer’s Association

You can help

To donate a portion your state income tax to Alzheimer’s, please contact Lisa Loree: Volunteering for Clinical Studies

The Layton Aging and Alzheimer’s Disease Center

A recent grant from the National Institutes of Health (NIH) establishes OHSU as a center of clinical excellence for the conduct of clinical trials in neurologic disease. The Layton Center’s Dr. Joseph Quinn, M.D., is principal investigator for the grant, which will support collaboration among neurology research and clinical disciplines. The new national network, called “Alzheimer’s Disease Network (NAN)”, will be the institute that will fund and monitor the development of new treatments that will need to be tested in patients. Through testing new treatments in the patient’s homes, it is expected that researchers will be able to test new therapies and increase the efficiency of clinical trials.

Different neurological diseases often show similar aberrations in tissue and cells, leading researchers to look for drugs that can address a common problem. For example, many cases of late-life dementia reveal extensive pathologies: doctors observe not only plaques and tangles in the brain, typical of Alzheimer’s disease, but also other aberrations in brain tissue. This project will explore blood vessel abnormalities and/or “lewy bodies” (clumps of protein typical in the late stages of dementias). So for example, clinical research targeting blood vessel disease may also be immediately applied to the “lewy bodies” that commonly occur in late-life brain disease.

Dr. Robert Holloway, M.D., Ph.D., University of Rochester Medical Center

For more information, contact Molly Bowman, 503-494-7719.

The Layton Aging and Alzheimer’s Disease Center

The Layton Aging and Alzheimer’s Disease Center is one of 8 Alzheimer’s Disease Centers in the United States and the only one of its kind in Oregon. Our Center is recognized as a national leader in dementia care and research, and is committed to providing the highest quality care to people throughout the Northwest.

Volunteering for Clinical Studies

To find out about our current clinical studies, please contact Lisa Loree: 503-494-7715.

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Task force crafts state plan for Alzheimer’s disease

The National Alzheimer’s Project Act (NAPA), passed by congress in January, 2011, calls for the creation of a national strategic plan to address the many challenges associated with the dramatic increase in the number of Americans with Alzheimer’s disease and other dementias. As a part of this national plan, the Alzheimer’s Association has taken the lead in state plan development. State plans will inform local actions and policy, as well as provide grass roots direction for the national plan. In Oregon, a task force has been working throughout the year to create recommendations and develop a collaborative state plan.

The task force has met with Oregon stakeholders toward a common goal: meeting the needs of the many citizens affected by Alzheimer’s in Oregon. The Oregon State Plan for Alzheimer’s Disease in Oregon (SPADO) task force includes a variety of organizations representing providers and individuals affected by Alzheimer’s disease. The task force includes those who work in medical treatment and research, and those who provide informal care. Participants on the task force also represent the needs and interests of patients and their families.

The task force will report to the Oregon legislature by November 20th, 2011, and the recommendations developed will then be used as the basis for legislation to be considered by the Oregon State Legislature in 2012.

The task force work groups have now developed recommendations based on local expertise as well as the input from individuals who attended one of six public town hall meetings around the state. These recommendations will be presented to the Oregon legislature. The task force will work to develop a collaborative state plan. State plans will help formulate NAPA initiatives, increasing the federal and state level to raise awareness, strengthen medical and service infrastructure, and fund research. To find out more about NAPA, visit www.alz.org/napa.

Now you’re talking! Conversation and cognition

Do older persons who frequently engage in conversation maintain better cognitive abilities than those who do not often socialize? It is widely believed that social engagement is good for mental health. As we age, this facet is difficult to study. Simply asking people to estimate how much time they spend talking to others does not result in reliable information. In a new four-part study, Layton Center’s Dr. Hiroko Dodge and assistant Molly Bowman are using leading edge technology devices to examine the relationship between social interaction and cognitive health. In the first phase, investigators will be testing the abilities of a special mobile audio recorder (MAR) for collecting spoken-language activity. Participants already enrolled in an ORCATECH study will wear a MAR on their pocket or collar. The recorder will measure the amount of time spent in conversation during a 2-day period. During the second part of the study, participants will visit the OHSU lab to record their spoken language activity for ease and effectiveness of use. Those participants will then test this technology with a week-long trial in their homes.

For phase three, an anonymous survey about social engagement will be delivered to a large number of older persons in the community. This survey will give researchers more accurate information about average levels of social engagement. This three-phase plan will provide outcomes for the needs of the main study. The fourth, main phase study will test whether frequent conversation using a voice-phono technology (VChat) has a positive effect on thinking abilities in the elderly. Now volunteer participants may join any or all of the four parts of the study!

Technicians will install equipment in participants’ homes. The experimental group will be asked to use VChat with a research assistant for 10 minutes each weekday for 6 weeks. Participants will be asked to complete a short health questionnaire on the computer once a week. Follow-up cognitive testing sessions in the participant’s home will be conducted one week and again at three months after the equipment has been removed. Dr. Dodge and her team will then be able to see the results of the study for each of our participants while they engage in daily cognitive function compared to the control group. They will also look at whether improvement could be associated with other factors, such as their physical activity.

For more information, contact Molly Bowman, 503-494-7179.

OHSU “CONNECT”: Center for Neuroscience/Clinical Research

A recent grant from the National Institutes of Health, National Institute on Aging Parlier Disruptions and Stresses (NHINDS), establishes OHSU as a center of clinical excellence for the conduct of clinical trials in neurologic disease. The Layton Center’s Dr. Joseph Quinn, M.D., is principal investigator for the grant, which will support collaboration across neurology research and clinical disciplines. The new national center is called the “Comprehensive Oregon Neuroscience Network for Excellence in Clinical Trial” (“CONNECT”).

Alzheimer’s and Parkinson’s patients enrolling are being exposed to accelerated development of new treatments that will need to be tested in patients. Through testing trials in Clinical Network for Excellence in Clinical Trial, OHSU will gain opportunities to test new therapies and increase the efficiency of clinical trials. The network innovations will improve the process of turning promising discoveries into new means to treat neurologic disease. Although NINDS continues to support these networks that will fund new investigators, NINDS will fund research into hundreds of other neurologic diseases such as Lewy body dementia, Parkinson’s disease, dementia with Lewy bodies, cortical and other dementias, and diseases like autoimmune encephalopathy. The grant to OHSU provides the center infrastructure to support the needs of investigators. Simply asking people to estimate how much time they spend talking to others does not result in reliable information. In a new four-part study, Layton Center’s Dr. Hiroko Dodge and assistant Molly Bowman are using leading edge technology devices to examine the relationship between social interaction and cognitive health. In the first phase, investigators will be testing the abilities of a special mobile audio recorder (MAR) for collecting spoken-language activity. Participants already enrolled in an ORCATECH study will wear a MAR on their pocket or collar. The recorder will measure the amount of time spent in conversation during a 2-day period. During the second part of the study, participants will visit the OHSU lab to record their spoken language activity for ease and effectiveness of use. Those participants will then test this technology with a week-long trial in their homes.

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Volunteering for Clinical Studies

To find out more about our clinical studies, please contact Lisa Lauer: 503-494-7175.
Collaboration improves dementia care for veterans

Aims to specialty care can be challenging for older veterans, especially those who live in rural areas. Depending on their individual symptoms and needs, patients with dementia may require consultation with neurologists, psychiatrists, or geriatricians. To address the need for specialty care in dementia, the Portland Veterans Administrators Medical Center (PVAMC) has launched a new integrated Dementia Innovations in Consult Management (DICM) program to facilitate patient and family care. Electronic consultation, or E-Consult, is an essential component of this program, designed to use time and travel for the veteran, as well as reduce wait time for appointments and for obtaining results of specialist consultation. Instead of scheduling an additional clinic visit, the primary care clinician and the specialist communicate about a patient’s medical condition and care needs through the VA’s electronic medical records system.

The E-Consult enhances care coordination and quality through improved information sharing between primary care clinicians and specialists. Radiographic medical record communication tools send all referrals for specialty care through a single portal. A site team or site director receives the referral, evaluates it, and assigns it to the right specialty in a timely and appropriate manner. E-Consult’s role in a regional health care system involving VA, VA regional primary care clinics, and specialists is to ensure that needed patient information is transferred, and the team can reach the necessary specialists and providers. VA regional primary care clinicians and specialists work together in a collaborative model to improve patient outcomes in a system-centered, data-driven, and continuously improving care system.

Innovations in Consult Management Across the region, Dementia Innovations in Consult Management (DICM) and strategies that they can apply to improve dementia care. The team is currently working with other VA sites in the region, such as Redmond, Wash., and others, to develop and test additional communication tools to support advanced care planning, and other needs for dementia care for veterans and their caregivers.

To initiate the DICM program, Sarah-J. Gould, M.D., deputy professor of Medicine and chief of geriatrics in the Portland PVAMC; and Jeffrey Kaye, M.D., director of the Layton Aging & Alzheimer’s Disease Center at OHSU, launched a new integrated Dementia Innovations in Consult Management (DICM) program in the Portland VA Medical Center (PVAMC) to facilitate patient and family care. Electronic consultation, or E-Consult, is an essential component of this program, designed to use time and travel for the veteran, as well as reduce wait time for appointments and for obtaining results of specialist consultation. Instead of scheduling an additional appointment, the primary care clinician and the specialist communicate about a patient’s medical condition and care needs through the VA’s electronic medical records system.

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To initiate the DICM program, Sarah J. Goldfuss, M.D., Associate Professor of Medicine and chief of geriatrics in the Portland PVAMC, collaborated with Jeffrey Kaye, M.D., director of the Layton Aging & Alzheimer’s Disease Center at OHSU. Other Layton Center staff on the DICM team are Lisa Silbert, M.D., neurologist, and Katherine Wild, Ph.D., psychologist, who serve as advisor and trainer. Linda Boise, Ph.D., M.P.H., education coordinator, and Mary Ruhl, M.A.I.S., education consultant, are responsible for project evaluation and coordination between VA and Layton Center staff.

The team is currently working with regional PVAMC specialists to implement an efficient and sustainable dementia care system. On December 15, the DICM team provided training for about twenty VA providers. The E-Consult project was introduced, using examples of how information is transmitted from primary care to specialists. Training was also provided on identifying common types of dementia, behavioral problems that may occur in people with dementia, advanced care planning, and family support. High marks were given for the content and presentation for all participants reporting that they learned new information and strategies that they can apply in practice. A second training was scheduled for February 9, 2012.

Across the regions, Dementia Innovations in Consult Management will soon provide more VA patients with better access to interdisciplinary specialists, as well as enhanced support and education. Ongoing evaluation will determine how well the program meets its goals to increase the proportion of dementia patients served by primary care and through E-Consult, and to increase the number of veterans and family members who receive caregiver education, support, advanced care planning, and appropriate medications.

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The Layton Center is one of thirty National Institutes of Health-designated Alzheimer’s disease research centers in the United States and the only one in Oregon. An October 21, 2011, celebration paid tribute to the family’s ten-year commitment to the center and to honor Jeffrey Kaye, M.D., at Layton Professor in Neurology. Executive vice-president David Robinson announced that the Kaye Family has established The Layton Aging & Alzheimer’s Disease Center to expand its impact and fund new and provocative research.

Our Layton Family Legacy

By providing sizable, long-term financial resources, endowed funds are critically important to attracting and retaining talented people and supporting programs that exemplify the institution’s mission of educating, teaching, discovering, and outreach. The endowed professorship creates a perpetual legacy and also recognizes the work of an excellent scientist and physician.