New Perspectives in Palliative Medicine

If one were to hear of a hospital ward that offered musical therapists who will sing and play instruments in the patient’s room for them, a massage therapist who will come and provide a massage in each patient’s bed, chaplains and therapists who provide emotional support, and a team of physicians and nurses working tirelessly to address each patient’s needs, I’m sure that person would be skeptical that such a place really exists. However, these were some of things I witnessed one day while walking through the Palliative Care/Hospice Ward at the VA Palo Alto.

As one who conducts research on palliative care issues, I often run into families who are initially resistant to the idea of entering a palliative care facility. This is often the result of a fundamental mis-understanding by the patient or family about exactly what palliative care is, and a lack of communication about end of life options. This article is intended to shed light on the field of palliative medicine, and what families can do to plan for end-of-life care.

What is Palliative Care?

Palliative care is characterized as neither hastening nor postponing death, but providing relief from pain and other symptoms. Death is thought of as a normal part of the life cycle and providing comfort care is often the top priority for the physicians. Since it is a relatively new medical field, palliative medicine faces the daunting challenge of recruiting and educating new physicians to increase the field’s capacity to expand, and, it must work to change perceptions within the general public about what the death and dying process entails.

Our perspective of death and the dying process in the U.S. has changed radically in recent years. In the past the average age of mortality was younger and death occurred rather suddenly. Presently, the average age of death is much higher, and the dying process tends to be more drawn out. Simply put, we are both living and dying longer.

The factors behind this are complex and numerous, but advances in medical technology are chief among them. Over the last 50 years, medical advances have been so astonishing that we have collectively started to feel like anything is possible, and that any disease can someday be cured. This attitude has led to a “cure-based” culture in which the goal of treating every disease is to get rid of it, or, heal the person. With a longer life span, a more drawn-out death, and a “cure-based” attitude present in most of the medical community (as well

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as the general public), we have seen a continuous rise in the number of people in need of long-term health care.

**Progress in Palliative Care**

Fortunately, palliative care physicians and researchers at the VA Palo Alto Health Care System and Stanford University School of Medicine are leading the charge to address some of these issues. Specifically, Dr. James Hallenbeck and Dr. VJ Periyakoil have begun a series of creative and innovative research projects, as well as producing educational material centered on palliative care. Dr. Periyakoil’s team has attempted to address the problem of untrained, under-qualified health care professionals in palliative care by creating a series of online modules which can be studied to assist professionals in practicing this type of care. For instance, one module, “Setting Goals of Care”, emphasizes that physicians should work with families to create a plan of care, making sure that good communication is used so that the family and/or patient are clear on what those goals are, and that the family is happy with those goals. These online modules are composed of interactive slide shows, guest lectures from leading experts in the field, and self-assessment tests to make sure the learner is retaining the material. The modules cover a wide range of topics such as how to deal with the needs and demands of different cultures, managing depression and grief in the terminally ill, and managing requests for physician-assisted suicides.

The objective of Dr. Periyakoil and her group is to improve the care one receives once inside a palliative care setting. If they succeed in this, Dr. Periyakoil and her group hope to increase the amount of positive exposure the field receives. This, by extension, will help palliative care receive more funding and resources, as well as assist the physicians within

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**STANFORD/VA CALIFORNIA ALZHEIMER’S DISEASE CENTER SUPPORT and EDUCATIONAL GROUPS**

There are issues unique to individuals with memory changes and to their family members. We are trying to learn how to better address these issues by developing new services and providing support groups that meet the needs of individuals with memory problems and their families. We are involved in ongoing development of support groups to achieve these goals. Currently the following groups are available at our center:

**Caregivers Support Group**

This small group is designed to provide answers to individual questions and concerns of caregivers as well as educational information and a network to offer support and guidance. The group meets on the second Friday of each month from 1-3pm. For further information, please contact Virginia Dao at (650) 858-3915.

**Mild Cognitive Impairment Group**

This group is for individuals with a diagnosis of mild cognitive impairment (memory problems not meeting criteria for dementia) and their family members or friends. The main focus is on education, communication, management, and psychosocial concerns. The group meets twice a month on Wednesdays from 11:00-12:30 pm. For further information, please contact Helen Davies at (650) 858-3915.

**Educational Seminars**

These are monthly informational/educational seminars given by professional staff addressing a variety of topics pertinent to memory loss and caregiver issues. These seminars are open to all participants and their caregivers and will include a question-and-answer session. Seminars meet on the fourth Wednesday of each month from 10-11a.m. For further information, please contact Helen Davies at (650) 858-3915.

All groups meet at the VA Palo Alto Health Care System 3801 Miranda Ave., Bldg. 6, 2nd floor Conference Room (room C258) Palo Alto, CA 94304

For more information, please call (650) 858-3915 or (650) 493-5000, x 65051 http://arcc.stanford.edu/family.html

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Jeff Newell began his research career at the University of California, Berkeley, under the tutelage of the prestigious Dr. Dacher Keltner. With a major in Psychology and minor in Anthropology, Jeff quickly became interested in research questions that involve broad social forces with underpinnings in evolutionary theory. For his senior thesis, Jeff worked with Dacher Keltner, Chris Oveis of Harvard University, and June Gruber of Yale University, to pose the question, “Can we express our emotions by the way we breathe”? Using the sigh as a template of an expressive breath, the study was able to conclusively show that people were indeed able to express emotions such as sadness, boredom, frustration, and relief through no other mode than the way they breathe. The project was awarded highest honors within the department and is now being prepared for publication. Furthermore, Jeff was awarded the “Departmental Citation” for his project, giving him the distinction as the top graduating student of his class in the field of psychology.

After his graduation from Berkeley, Jeff worked with Professor Ian Gotlib of Stanford University, helping with studies involving genetics, stress, and decision-making abilities of older adults. He also helped run studies on cognition and depression in this lab.

Currently, Jeff is assisting in geriatric research working with both Dr. Jerome Yesavage and Dr. VJ Periyakoil of Stanford/VA Palo Alto Health Care System. He coordinates the Citalopram in the Treatment of Agitation in Alzheimer’s Disease (CitAD) study, as well as studies that are trying to differentiate between grief and depression in terminally ill patients. From this position, he is hoping to enter PhD programs within the next several years and pursue other research interests which include race and cultural identity, social justice, and human rights violations, which he believes are all connected to each other. Aside from research, Jeff has various volunteer activities which include peer counseling at a free health clinic in Berkeley, coaching a high school football team, and running a book club.

Plan for the Future

However, the physicians at Stanford are not the only ones who can ameliorate this problem. Families and married couples can help as well by communicating their end of life wishes and desires. Topics to discuss might include arranging power of attorney, how long should one be left on life support if consciousness is lost, or how aggressively should an illness be treated if the chances of survival are slim? Although this topic can be difficult for some families to discuss, having a plan for the future in which everyone feels comfortable and confident is imperative, because as Ben Franklin once said, “In this world nothing is certain but death and taxes”.

Information for this article was provided by the book Palliative Care Perspectives by Dr. James Hallenbeck. If you would like to learn more about palliative care at Stanford, or Dr. Periyakoil’s work, you can visit http://ecampus.stanford.edu, or, http://hospice.stanford.edu.
We are recruiting for a study that examines the usefulness of modafinil (Provigil) in treating sleep problems in Mild Cognitive Impairment or Alzheimer’s disease. We anticipate that this drug will both improve your nighttime sleep and make you less sleepy during the daytime. Modafinil is a drug that is FDA-approved for the treatment of sleepiness in a variety of conditions, but has not been examined in older individuals with memory impairment. The study takes place for 4 weeks in your own home, with weekly visits to the VA. There is also a free screening for sleep apnea that will take place in your home.

You may be eligible to participate if you are:
• Diagnosed with Alzheimer’s disease or Mild Cognitive Impairment
• Live at home with a caregiver or partner
• Willing to take an FDA approved medication (modafinil)

Researchers at Stanford University are conducting a brief anonymous online survey to assess the health concerns of caregivers to individuals with dementia or cognitive decline.

The survey takes about 10 minutes to complete and can be accessed at https://med.stanford.edu/survey/caregiver.

The goal of the study is to learn if Citalopram is helpful to people with Alzheimer’s disease who are experiencing significant symptoms of agitation. Participation is expected to last a maximum of four months.

You may be eligible to participate if you:
• Have a diagnosis of Alzheimer’s disease.
• Are experiencing significant levels of agitation.
• Have a caregiver available to attend all study visits.
• Are proficient in written and spoken English.
RESEARCH OPPORTUNITIES

This observational study is designed to look at sleep/wake patterns in persons with memory problems over the course of time.

Once a year, this study will collect a 1 week record of your sleep, in your own home. No treatment is involved.

Participants should:
- Be 55 years or older
- Have memory impairment or dementia
- Live at home with a caregiver/study partner

This project is developing an approach to screen for memory problems in group sessions.

Each screening session:
- Begins with a brief talk on memory & aging
- Involves simple memory games many enjoy
- Reviews your results and concerns with staff

The next Memory Screening sessions are currently scheduled for the following time and place:

November 17, 10-11:30am, National Memory Screening Day, VA Palo Alto Health Care System, 3801 Miranda Avenue, Palo Alto, Building 5, 4th floor conference room

New MCI Support Group

Mild cognitive impairment (MCI) is being diagnosed more than ever before. It can be defined as clinically significant cognitive changes that do not meet the threshold for a diagnosis of dementia. While persons with MCI experience cognitive problems such as problems with memory, they display little to no functional impairment. Having a diagnosis of MCI can have a detrimental effect on both the individual and their loved ones.

In order to continue to help meet the needs of those with MCI, the Stanford/VA California Alzheimer’s Center and the Alzheimer’s Association are adding an additional support group for persons with a diagnosis of MCI and their care partners. This support group will offer information, emotional support, and socialization among peers who are facing similar circumstances. The new MCI support group will begin in October. All sessions will be held at the VA Palo Alto Health Care System in Palo Alto, CA. If you or a loved one has a diagnosis of MCI and would like to learn more about this support group, please contact Judy Filippoff at the Alzheimer’s Association at 1-800-272-3900.
CitAD: A New and Exciting Study

Agitation in Alzheimer’s Disease

There are currently about 5.3 million people in the United States who are suffering from Alzheimer’s Disease (AD). Agitation is widely considered the most frequent and problematic behavioral problem within AD patients. Agitation involves aggressive behaviors, excessive psychomotor activities (restlessness, jitters, etc.), irritability, disinhibition, and emotional distress. Agitation can be harmful to the patient and caregiver in many ways. As a result of the prevalence and adverse affects of agitation in AD, there has been a new emphasis on research to find ways to alleviate some of these symptoms. Thus far, non-medication interventions have been largely ineffective, and medication studies have had only limited success. However, most of these medication studies have focused only on using antipsychotic drugs. This suggests a need for expanded medication research into alleviating agitation in AD.

New Research Directions

One possible direction for future medication research is to look at medications that increase levels of serotonin in the brain. A lack of serotonin has been shown to increase agitation-like behaviors in both animals and humans. A class of medications known as Selective Serotonin Reuptake Inhibitors (SSRI’s), works by increasing serotonin levels within the brain, thus reducing agitation levels. Although SSRI’s are a common way to treat depression, their efficacy in helping agitation symptoms in AD has not yet been thoroughly studied.

CitAD Study

Dr. Jerome Yesavage and Dr. VJ Periyakoil at the Stanford/VA Aging Clinical Research Center (ACRC) and the Veterans Affairs Palo Alto Health Care System (VAPAHCS) have signed on to help conduct a national study on the effects of one such SSRI, Citalopram, or, Celexa, on agitation levels in those with AD. This is a double blind study combining the administration of Citalopram or a placebo, with an educational intervention for the patient and caregiver on what agitation is and how to better deal with it.

This study is being run by Johns Hopkins University, and is funded by the National Institute on Aging (NIA) as well as the National Institute of Mental Health (NIMH). This study will require both the patient with AD and the caregiver to participate, and participation will last approximately 9 weeks. Within those 9 weeks there will be 4 visits to the Menlo Park VA facility to answer questionnaires, have blood drawn for analysis, receive their next batches of the medication (or placebo), and complete the educational intervention with a trained physician. There will also be 4 phone calls throughout the nine weeks during which the study participants will answer questions about how the medication is affecting them and whether their agitation levels have changed.

This study is currently enrolling patients. If you are interested in participating please contact Jeff Newell at (650) 493-5000, ext. 23764.
Memory Walk

Join thousands of Memory Walkers from in and around the Bay Area as we MOVE to end Alzheimer’s.

Memory Walk is a fun and inspiring event that helps the Alzheimer’s Association fulfill its vision to create a world without Alzheimer’s disease. It is also a wonderful chance to pay tribute to those who have been touched by Alzheimer’s. And, most importantly, it is an opportunity to be part of the solution to ensure that no one faces Alzheimer’s disease alone.

Memory Walk is a community event that joins friends, family and co-workers as they walk to end Alzheimer’s. This year, once again, we are doing our part to fight against Alzheimer’s disease! We have gathered members from our center and created the Stanford University / Veterans Affairs Palo Alto Team that will be walking at both Silicon Valley and Treasure Island. Our goal is to get as many walkers as possible and raise $3000 to help combat Alzheimer’s disease.

Treasure Island Walk – Saturday, October 10, 2009

Walk Distance: 3 mile walk around Treasure Island (or a 1.5 mile shortcut).

If you would like to donate or join us at the walk, please contact Ban Ku at ban.ku@va.gov or (650) 849-1971. For more information, please visit our team website!

Team website: http://memorywalk.kintera.org/sf09/stanford

Make a difference: Help end Alzheimer’s Disease!

A contribution to the Aging Clinical Research Center is a gift to future generations in our quest to cure Alzheimer’s disease. Your generous support ensures that the Center continues to conduct top-quality clinical research to improve treatment options and to provide education and support for patients and families. With your help, our clinical researchers investigate the causes of memory loss and neurodegeneration, develop and test better treatments for Alzheimer’s disease, and share these discoveries with the local community and with scientists around the world.

Tax-deductible contributions can be made by check, payable to: Stanford University
Please indicate Stanford/VA Aging Clinical Research Center in the memo line.

Mail your contributions to:
Jerome Yesavage, MD, Director (151Y)
Stanford/VA Aging Clinical Research Center
3801 Miranda Avenue
Palo Alto, CA 94304

Gifts may be made in honor of someone’s special occasion or in memory of someone who has passed away. Please provide the name of the person you wish to honor, as well as the name and address of anyone whom you wish to receive an acknowledgement of the gift.

For additional information about the Stanford/VA Aging Clinical Research Center and opportunities to contribute, call (650) 852-3287. All donations are tax-deductible.
UPCOMING EVENTS

Treasure Island Memory Walk
Saturday, October 10, 2009, 9:30am
Walk Route: The walk begins in front of the Chapel at the corner of Avenue of the Palms and California Avenue. This route is scenic, flat, and wheelchair accessible.
If you would like to donate or join us at the walk, please contact Ban Ku at ban.ku@va.gov or (650) 849-1971. For more information, please visit our team website: http://memorywalk.kintera.org/sf09/stanford

Circle of Care Conference
Saturday, October 24, 2009, 8:00am -4:00 pm, Crowne Plaza Hotel, Foster City, CA
The Circle of Care Conference provides the opportunity for families and care professionals to:
* Engage in the latest research from prominent experts of Alzheimer’s disease and dementia
* Connect with other family members and professionals
* Explore resources that foster wellness for total mind, body and spirit

For more information, contact the Alzheimer’s Association at (800) 272-3900 or www.alz.org/norcal

Memory Screening Day
Tuesday, November 17, 2009 10am-11:30am, VA Palo Alto Health Care System, 3801 Miranda Avenue, Palo Alto, CA in Building 5, 4th floor conference room.
National Memory Screening Day is part of a national effort to promote early detection of Alzheimer’s disease and related illnesses, and to encourage appropriate intervention, including medical treatments, social services and other resources. Memory screenings are a significant first step toward early diagnosis.
To register for a memory screening at the Stanford/VA Aging Clinical Research Center, call (650) 852-3287.

Stanford/VA Aging Clinical Research Center
3801 Miranda Ave. (151Y)
Palo Alto, CA 94304
650-852-3287

Visit us on the web:
Aging Clinical Research Center (ACRC): http://alzheimer.stanford.edu
Stanford/VA California Alzheimer’s Center: http://arcc.stanford.edu
Sierra-Pacific MIRECC: http://mirecc.stanford.edu

To add or remove your name from our mailing list, call (650) 852-3287 or visit the ACRC web site.

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