Professional efficiency topic of annual seminar on aging

By David Tull

The goal of enhancing the efficiency of professionals working with the elderly underlies the seventh annual Summer Institute on Aging at Ohio State July 21-24.

The institute will be held in the Ohio Union. Ten seminars on a variety of topics begin at 9 a.m. each day and continue to 4:30 p.m. The seminars are almost equally divided between one-day and two-day programs.

In addition, there is a special workshop on July 22 on "Suicide Prevention in the Elderly." Katherine Mohr, of the North Central Mental Health Center, and Judy Malone, Ohio State assistant professor of family and community, will lead the workshop. The workshop, especially for nurses who work with elderly, addresses the high rate of suicide among older adults.

Leopold Liss, Ohio State professor of pathology, psychiatry and neurology, will speak at a luncheon July 24 on "Cognitive Disorders: Benign Neglect or Criminal Conspiracy of Ignorance." Cost of the luncheon is $10.

"As the proportion of elderly individuals in our society continues to grow, it becomes increasingly important to train and update professionals working with the elderly and to enhance their knowledge of the aged," according to coordinator Linda Roberts, of Ohio State's Department of Conferences and Institutes. Credit for continuing education units may be earned by professionals attending the seminars, she adds.

Although designed for professionals, the programs are open to the public. A two-day seminar costs $110 and a one-day seminar is $55.

Registration information is available at 422-4250. Registration will be accepted at the door on a space-available basis.
Campus seminars examine aging

By Donna Meacham
Lantern staff writer

Experts on the aging process will conduct campus seminars and lectures to increase awareness about senior citizens, an awareness that, an expert says, sometimes does not exist.

"The word senility is one of the worst words in the English language, and should never be used under any circumstances," said Leopold Liss, a professor of pathology, psychiatry, and neurology.

Liss will lecture at the Summer Institute on Aging, which is scheduled to begin today and runs through Thursday at the Ohio Union.

Liss will lecture at noon on Tuesday and will discuss "Old Age and Incompetence: Priorities for Action."

He will discuss how the symptoms some elderly people experience such as confusion, illusions and loss of memory are the result of a disease in their body or mind and not because they are old, he said.

"Aging is a normal process that should not be equated only with disability," Liss said.

Seven other experts in gerontology and geriatrics will hold seminars providing additional training in working with the elderly.

This year, approximately 100 professionals who work with the elderly will participate in the seminars, said Linda Roberts, conference coordinator.

Other lecturers include:

- Andrew Coyne, an assistant professor of psychology, will discuss the development of the memory during old age. "It will also be a nice opportunity to get across some of the research that has accumulated," he said.

- Jerome Kaplan, executive director of Mansfield Memorial Homes, will hold a seminar on retirement aspects July 27 and 28.

- John Addis, a clinical psychologist, will conduct a seminar on July 27 and 28 on counseling the aging.

- Ruth Roberts, director of a project concerning elderly mentally retarded people, will participate in the July 27 seminar on the elderly mentally retarded and developmentally disabled.

- Barbara Dreher, associate professor and director of speech and hearing at Wright State University, will lecture at a seminar concerning age-related sensory changes and new technologies.

Two all-day seminars cost $120 and one all-day seminar costs $60. There will be walk-in registration.
Alzheimer’s not always the culprit

By Alan Miller
Dispatch Staff Reporter

If Grandma has been acting a little odd lately, blame it on Alzheimer’s disease. Everyone is doing it.

But everyone is not always right, and Grandma could be suffering for it, said Dr. Leopold Liss, an Ohio State University professor of pathology, psychiatry and neurology.

“I have no doubt there are people in nursing homes who don’t need to be there,” Liss said yesterday during the 8th annual Summer Institute on Aging at OSU.

UNTIL A few years ago, the average person hadn’t heard of Alzheimer’s disease, an incurable illness that kills brain cells. Suddenly, after a television movie and other publicity about the disease, every other oldtimer who forgets what he had for breakfast is labeled as having Alzheimer’s, Liss said.

“A certain percentage of those people are not demented because of something organic, but because of something we did to them,” he said.

A woman whose mind appeared to be deteriorating was brought to see Liss, and it was suggested that she was suffering from Alzheimer’s disease, he said.

AFTER QUESTIONING her, he learned that for 16 years the woman had been taking a thyroid medication that probably should not have been taken longer than a few months. The drug was causing her problems.

Simply moving an older person from familiar surroundings can cause changes in personality that make it appear he or she is suffering from the disease, Liss said.

He said a woman in a hospital for a minor operation became belligerent. It may have appeared she was suffering from Alzheimer’s disease, but she was, in fact, upset because she didn’t want to be there, Liss said. The hospital gave her medication. The more medication she had, the more belligerent she became, and the chance of her returning to a normal life diminished, he said.

“WE HAVE done a lot of education about Alzheimer’s disease,” Liss said. “What is now difficult is to get to the rest of the problem, and tell them not everything is Alzheimer’s.”

He said doctors and other professionals who work with older people need to carefully screen people suspected of having the disease.

“We need to develop a methodology to screen out other problems when we’re looking for Alzheimer’s,” Liss said. “The important thing is to recognize the fact that not all cases of dementia are simply irreversible neurological diseases.”
More professional services needed for growing ‘young’ older generation

America’s pioneering older generation is redefining and pushing back old age.

Many 80-year-olds consider themselves middle-aged, Harvey Sterns told 100 people attending Ohio State University’s 14th Summer Institute on Aging last week.

And many still act it: the 85-year-old widow flirting with the 90-year-old widower; the 90-year-old runner completing the New York City Marathon; the 87-year-old couple who climb mountains.

During this century, the years of normal adulthood have doubled, said Sterns, director of the Institute for Life-Span Development and Gerontology at the University of Akron.

“Middle age no longer ends at 50,” he said. “Old age no longer starts at 65.”

Instead, many people live independently to 80 or 90.

“(Youth is) not a time of life; it is a state of mind,” said Sterns, quoting writer Samuel Ullman.

“Nobody grows old merely by living a number of years. People grow old by deserting their ideals. . . . You are as young . . . as your hope, as old as your despair.”

Sterns advises younger generations to learn from their elders — to take care of themselves now so they will be healthy later.

“No one is going to do it for you.”

OLDER PEOPLE'S LIVES ARE DIFFERENT FROM THOSE OF THEIR PARENTS. MANY WORK LONGER IN THEIR PROFESSION OR FIND PART-TIME WORK AFTER RETIREMENT; THEY TURN THEIR BACKS ON THE TRADITIONAL THREE R'S — REST, RELAXATION, RETIREMENT.

Why?

Research on centenarians done at the University of Georgia shows that people continue to try to please their parents — even at age 100.

“Many still said to themselves, ‘My mother would have liked that’ or ‘My father would have liked that.’”

Because the over-85 group continues to be the fastest-growing segment of the American population, Sterns is concerned about the shortage of professionals to treat and counsel the elderly. A 1989 study showed that an additional 8,000 physicians, 8,000 social workers and 12,000 nurses were needed to serve the older population.

“We aren’t even coming close,” he said.

The state budget for geriatric medicine was cut in half in the past year, Sterns said, and medical schools nationwide have been slow to appropriate money for geriatric specialties.

Despite the few victories in geriatric medicine — a formal system of accreditation and several specialties — other goals remain.

“We need more resources, student stipends, assistantships and more opportunities to support students in graduate careers,” Sterns said. “Our budgets must be made larger.”

For people who don’t know yet what being 70 feels like, Sterns quoted Longfellow:

I will tell you so you will not be taken by surprise when your turn comes. It is like climbing the Alps. You reach a snow-covered summit and see behind you a deep valley stretching miles and miles away. And before you are other summits higher and wider which you may have strength to climb or not. Then you sit down and meditate and wonder which it will be.