

Orthostatic Hypotension

Why do we check your blood pressure sitting and standing? We are looking to see if the top number of your blood pressure drops more than 20 points or if the bottom number drops more than 10 points when going from seated to standing. This is called orthostatic hypotension. It is more common in seniors and is important because it can cause you to feel lightheaded, weak, or even faint. It is a common cause of falling.

Orthostatic hypotension occurs for many different reasons. The most frequent reason it happens is because of dehydration caused by not drinking enough fluids. Other causes of orthostatic hypotension include problems with circulation such as heart disease or hardening of the arteries, nerve conditions, anemia (low blood count) and medications.

The first treatment for this drop in blood pressure is to stay hydrated. Unfortunately as we get older, we feel thirsty less and therefore are less likely to drink fluids. Water is the best fluid for hydration but any fluid that does not contain alcohol or caffeine hydrates well so if you do not like the taste of water (as many seniors do not) you can drink juice, milk, or decaffeinated sodas. If you have diabetes and are watching your sugars, try



drinking flavored waters or watered down juice. If hydration does not work, then decreasing high blood pressure medicines may be needed. You may also need to wear support stockings to help keep your blood from pooling in your legs.

If you have orthostatic hypotension, be sure to take care when you first stand up. If you've been lying down for a while, start by sitting up slowly and then staying seated for a few minutes before getting up further. When you do stand up, make sure that you have something sturdy to hold onto in case you feel dizzy.

What is Geriatrics?

Older adults have special healthcare needs that often make their medical care more complicated. More than half of adults age 65 and older have 3 or more medical problems such as dementia, osteoporosis, arthritis, incontinence, or high blood pressure. Older adults with multiple medical problems often end up taking more medications than younger adults. Taking multiple medications can

cause drug interactions and adverse side effects. Aging also causes a decline in physiologic reserves causing more complications from minor illnesses. Unfortunately there is no way to avoid getting older but one can better accommodate the changes aging brings with the help of geriatrics.

Geriatrics is the medical practice of treating older patients.

It is a sub-specialty of internal medicine and family medicine.

A geriatrician is a doctor who is specially trained to manage the unique healthcare needs of seniors. Geriatricians use a holistic approach to address the physical, psychological and social needs of the patient and their family. The interdisciplinary team approach to healthcare is integral to geriatrics. The geriatric team promotes wellness and maintenance of functional independence with the goal of helping older adults live happy and satisfying lives.

Meet Family Nurse Practitioner Patricia Lee



Patricia Lee, MSN, APRN-RX

Patty is a Board Certified Gerontological and Family Nurse Practitioner. She began her health care career working in the laboratory of a community hospital in Anchorage, Alaska when she was only 16 years old. Since that time, she has logged well over thirty years of experience in various areas of patient care (laboratory assistant, phlebotomist, registered nurse, consultant and nurse practitioner). Patty's first RN job was at The Queen's Medical Center shortly after she married her husband, Colin, a local boy whom she met while vacationing in the islands.

Patty has a Bachelor of Science degree in nursing from the University of Alaska in Anchorage and a Master of Science degree in Nursing from the University of Hawaii at Manoa. Her long time interests include advocacy for adults and children with special

needs. A number of years ago she helped to establish a special needs and health care ministry for adults and children at a local congregation. She also worked with a case management program to operationalize the first state contract that supported home based care for medically fragile children as an alternate to institutional care.

Patty is an avid reader and has a love of art. She recently started drawing and painting again and is saving her pennies to travel to see art in New York, Italy and France. In the meantime, she is content to visit and periodically take art classes at the Honolulu Art Academy.

Patty and her husband have four grown children (1 girl, 3 boys), a grandson and a rescue dog named Lucy.

Queen's Geriatric Services Commitment to Education

Queen's Geriatric Services is dedicated to educating the next generation of geriatric physicians and nurse practitioners. All of the Queen's Geriatric Services physicians are clinical professors with the University of Hawaii School of Medicine. The nurse practitioners also participate by precepting nursing students with University of Hawaii School of Nursing.

This commitment can most be seen on Tuesday mornings in the clinic when Drs. Chun and Barry work with geriatric fellows. Fellows are physicians who have completed medical school and residency and are obtaining extra training to look after senior citizens. During your Tuesday morning appointments, the fellows see you first and then afterwards your regular doctor will finish up the appointment.

Nursing students also occasionally spend the day with Patricia Lee, APRN. These students have graduated as a registered nurse and are working toward their advance practitioner nursing license.

We appreciate your patience and helpfulness while Queen's Geriatric Services provides teaching to the next generation of physicians and nurse practitioners.





5 Basics of Adult Day Care

1 **What is adult day care?**

It is a licensed facility where elders enjoy planned activities such as games and exercises, participate in social time, take field trips, and enjoy meals. Some adult day cares also are able to provide some health care such as giving medications. Some are able to do specialized activities such as providing bathing services. It provides daytime respite for caregivers, allows family to continue to work, and gives daytime flexibility.

2 **Plan ahead.**

It takes time to enroll in adult day care. It is recommended that you visit several facilities near you and find the one that most fits the senior who will be attending. Keep in mind that some popular day cares have waiting lists. Get your name on the list as soon as you make a decision.

3 **Paperwork.**

Every adult day care has its own admission paperwork. Some of the paperwork family completes and some the doctor will fill out.

4 **Annual physical.**

Before enrolling in adult day care, the elder will need to have a physical exam done by a doctor. Every year after that an annual physical (sometimes more often if the day care requires) and paperwork along with it will need to be done.

5 **TB skin tests.**

Included in the physical exam will be a TB skin test. State regulations require all persons attending day care to prove that he or she does not have tuberculosis. If the person attending has never had a positive TB skin test, before enrollment, there will need to be a 2 step TB skin test (this means 4 visits to the doctor's office and takes about 1.5 weeks to complete). To keep the TB skin tests up to date, every year after that there is a 1 step TB skin test (just 2 visits). If there has been a positive TB skin test, the doctor will order a chest x-ray to check for tuberculosis.

What is a POLST?

Provider Orders for Life Sustaining Treatment



The POLST form is intended for a person who has a chronic debilitating illness or who is facing a life limiting disease, such as end-stage lung or heart disease or a terminal cancer.

– *Kokuamau.org*

The POLST form is an in-case-of-emergency form that tells paramedics, fire fighters, emergency room physicians, and other health-care personnel your wishes.

It includes whether or not you would want to be resuscitated (that is have CPR) in case your heart stops or your breathing stops

or whether or not you would want to be allowed to pass naturally. It also includes how aggressive you would want your medical care to be if you were very ill. There is a section on the POLST for you to document whether or not you would ever want artificial nutrition (such as tube feeding).

If you are interested in completing a POLST form, please speak to your healthcare provider. Your own doctor or nurse practitioner (APRN) must sign the POLST but any healthcare provider can help fill it out.

How Much Water Do I Need to Drink?

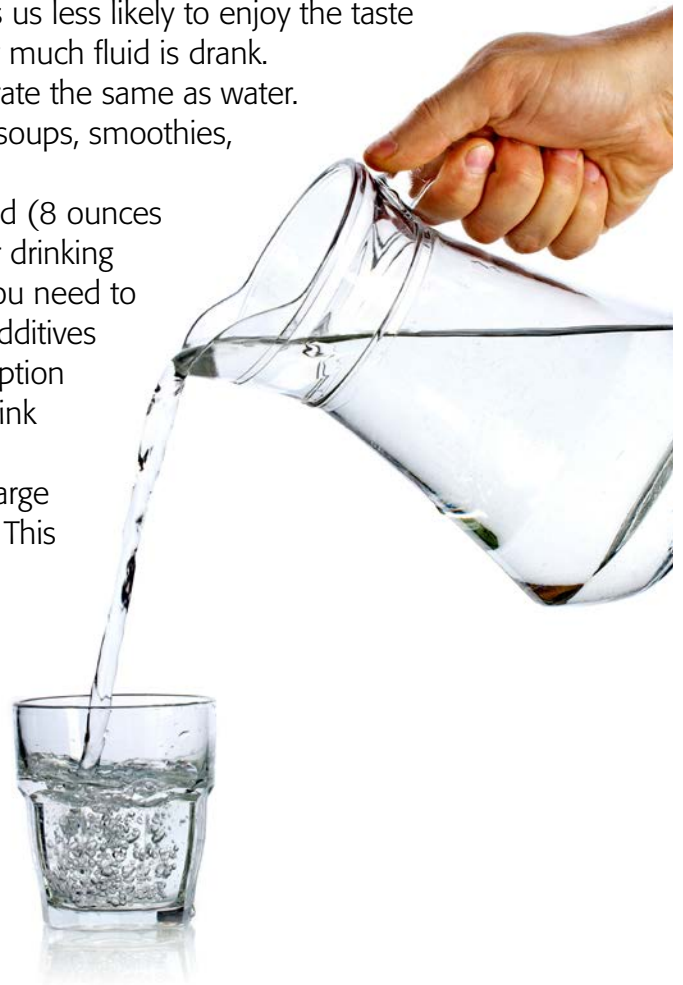
Hydration is a bigger issue in seniors than it is in younger people. As we age, we do not feel as thirsty and changes in our taste buds and sense of smell makes us less likely to enjoy the taste of water. This means that seniors need to stay attentive to how much fluid is drank.

Any fluid that is decaffeinated and nonalcoholic will hydrate the same as water. Keep in mind that foods with a lot of water such as fruits, jello, soups, smoothies, and ice cream can give you fluid as well.

Most seniors need to push for at least 6-8 glasses of fluid (8 ounces each) a day. If you do not like the taste of plain water, consider drinking flavored or carbonated water. If high sugars are an issue or if you need to lose weight, you can try products such as Crystal Lite or water additives such as Mio. Most juices now come in a diet or lower calorie option as well. If you've been told you need to gain weight, you can drink juices, milk, milk shakes, smoothies, Ensure, Boost, or Glucerna.

One way to keep track of your fluid status is to fill up a large bottle and make drinking 2-3 of the bottles each day your goal. This is a great way to remind yourself to drink plenty of liquids.

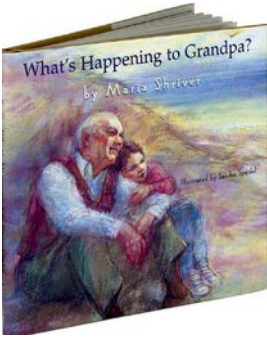
Symptoms of dehydration are not feeling hungry, being sick to your stomach, constipation, having lightheadedness when you stand up (see article on orthostatic hypotension for more information), weakness, sleepiness, and confusion. When you are dehydrated it can take up to 16 glasses (8 ounce each) of fluid to rehydrate you. If you are unable to drink that much you may need to get intravenous (IV) fluids or go to the emergency room.



Book Reviews

It can be difficult for family to understand when someone they love develops dementia. It is especially hard on children. Below are two books which may make it easier for kids to comprehend how dementia affects elders and what they can do.

What's Happening to Grandpa? *Maria Shriver*



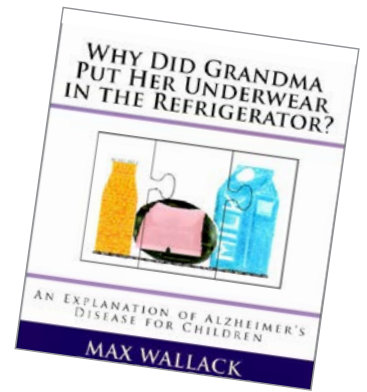
Maria Shriver's book tells the story of Kate and her grandpa who has Alzheimer's disease. It's a wordy book written to older children and touches on how dementia causes memory loss and changes in personality. The book helps children find ways to better communicate with their loved ones with dementia.

Sometimes "a walk down memory lane" is a wonderful way to enjoy spending time with someone.

Why Did Grandma Put Her Underwear in the Refrigerator?

Max Wallack and Carolyn Given

According to the book's biography, author Max Wallack was a caregiver to his grandmother who had Alzheimer's disease and this book retells some of his experiences. The story helps describe to children how people with Alzheimer's think and why sometimes they do things that may seem odd. Putting the situations in children's terms, Grandma and her Underwear help explain the day to day challenges that occur when living with and caring for an elder with Alzheimer's disease. This is a book that even adults would benefit from reading.



alzheimer's  association

Call 591-2771
to register

FREE Caregiver Classes by Alzheimer's Association Aloha Chapter!

Where: Ward Warehouse, 1050 Ala Moana Blvd, Ste. 2610, Honolulu, HI 96814

When: Classes are always on Tuesdays from 9:30-10:30am (Call for dates)

Registration Required. Call 591-2771 to register

- **Communication**

Tips on ways to improve communication with someone who has Alzheimer's disease or dementia

- **Hiring and Managing In-Home Caregivers**

Introductions to homecare planning and management

- **When is it time to Move Your Loved One into a Facility?**

Steps to take when exploring residential facilities

- **Taking Care of Yourself**

How can I cope while I care for my loved one?

- **Basics of Alzheimer's disease and Memory Loss**

A comprehensive guide to Alzheimer's and dementia

- **Putting Legal & Financial Affairs in Order**

How to begin with legal and financial issues

- **Managing Challenging Behaviors**

How to approach or reduce some of the more challenging care situations that arise





In 1999, The Queen's Medical Center initiated Geriatric Services to help support the complex needs of Hawaii's medically fragile elderly.

Did you know...

- Queen's Geriatric team is well recognized in the community for their expertise?
- Queen's makes house calls for home-bound seniors and supports the terminally ill?
- Queen's plays an instrumental role at the University of Hawaii medical school by teaching new physicians and nurses how to best care for Hawaii's elderly?

Your financial support is needed to help continue these programs for seniors.

Please contact:

Fund Development at **691-4976** for more information on how you can help!

Clinic Information

Hours of Operation: Monday – Friday: 8 a.m. – 4:30 pm

Address: Queen's Physician's Office Building III (POB III), 550 Beretania Street, Suite 601, Honolulu, HI 96813

Phone: 691-8877 **Fax:** 691-8875

Refills for new or existing prescriptions:

Call our medication refill line at **691-8876**.

Please plan ahead and call before you run out. Allow us 3-4 days to process your request. Our medication line is an automated recording which will ask you to leave your name, phone number, medication and pharmacy information. If we have any questions regarding your request, we will contact you.

Office Staff: Mirasol, PSR; Arvi, PPA; Ronette, PPA; Mary Jane, PPA; Christine, Office Coordinator.

Clinic Providers: Dr. Jeremy Chun; Dr. Jessica Barry; Patricia Lee, APRN; Dr. Kentaro Nishino, Dr. Elizabeth Rhee; Dr. Shari Kogan; Dr. Yukako Tachibana Debbie Chun, Social Worker

