

AGS NEWS

NEWSLETTER OF THE AMERICAN GERIATRICS SOCIETY

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AT #AGS24 MEMBERS ADVANCE RESEARCH AND CELEBRATE EXCELLENCE IN SERVICE AND SCHOLARSHIP ENHANCING LIVES OF OLDER ADULTS

The #AGS24 Virtual Annual Scientific Meeting was a heartwarming testament to the unity and camaraderie we cherish as AGS members. For a taste of the event, search for our Annual Meeting hashtag #AGS24 across various social media platforms or connect with the AGS on Instagram, Facebook, LinkedIn, or X (Formerly Twitter). From our traditional pre-sessions and a full schedule of plenary and paper sessions to illuminating research presentations, heartfelt expressions of gratitude within our AGS community, and virtual networking, this gathering delivered a diverse array of experiences for all attendees, united in the virtual space.

The AGS Members' Business Meeting delved into a wealth of topics: Anna Chang, the Annual Meeting Program Chair, warmly welcomed attendees and encouraged participation with tips and tricks on how to make the most out of the #AGS24 experience, AGS treasurer Alison Moore provided an update on the AGS finances, and outgoing AGS Board Chair Michael Harper conveyed his appreciation to the AGS community for their support over the past ten years he served on the AGS Board and for their support of the AGS Health in Aging Foundation. Outgoing AGS President Donna Fick also expressed her gratitude for the unwavering support and kindness received from the AGS community throughout her term, acknowledged the significant contributions of individuals to the Society, and recognized outgoing committee members (see right). She then introduced Dr. Mark Supiano as the incoming AGS President who recognized this year's cohort of new AGS Fellows (see page 3 for listing), remembered colleagues who have recently passed away, and expressed his gratitude and excitement for what lies ahead.

KUDOS TO OUR AMAZING BOARD/ COMMITTEE LEADERS

At the #AGS24 Member Business Meeting, incoming Board Chair **Donna M. Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN** honored the following outgoing Board and Committee members for their exceptional service.

Our Outgoing Board & Committee Members

We thank **G. Michael Harper, MD, AGSF, FACP** for leading the AGS Board as its chair and his extraordinary work championing AGS's diversity, equity, and inclusion work, supporting the Society's Intersection of Structural Racism and Ageism in Healthcare Initiative as it developed from concept to an implementation phase that now spans across our portfolio of programs, products, and initiatives. He now provides primary care for homebound older adults in San Francisco in the UCSF Care at

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AGS 360° WITH NANCY E. LUNDEBJERG, MPA



The National Institute on Aging turns 50 this year and I encourage you to visit the [May issue](#) of the *Journal of the American Geriatrics Society (JAGS)* which is devoted to celebrating that milestone. In this issue of *AGS News*, Mark Supiano uses his inaugural *From the President* column to chronicle how NIA research has led to discoveries that are having a positive impact on his health as he ages. Mark also celebrates the many contributions that geriatrics health professionals have made to advancing our understanding of how we age. There is lots to celebrate on this front and I encourage you to read Mark's column and the articles and letters included in the May issue of *JAGS*.

One of the very tangible outcomes of these advances in research is that aging is no longer just about the number of years we have lived. Rather, it is about how we function in the world and that metric can be quite different for each of us as we grow older. Unfortunately, as the research has begun to expand our healthy years (or healthspan), we haven't been all that successful in changing the public discourse from a focus on chronological age to a focus on how we function as individuals. Because of that, ageism (we define it as discrimination against a person solely based on age) remains all too prevalent in our society. It impacts older people's physical and mental health, can limit access to health care, and pits one generation against the others in a fight over perceived limited resources (as we recently saw in rationing plans put forward during the COVID-19 pandemic). It is also the most hidden of 'isms—rarely included in the public discourse about steps that are needed to address discriminatory practices and implicit bias

towards older adults. It is the one 'ism where we act against our future selves.

As I write this, we are heading full throttle into the general Presidential election cycle (the first (6/27) and second (9/10) Presidential debates were scheduled yesterday). Further, based on the primaries, it appears that chronological age is going to remain front and center in the general election given both major party candidates—President Biden at age 81 and former President Trump at age 77—will be the oldest presidential candidates in our nation's history. Already, we are seeing AGS members fielding questions from the media that are focused on chronological age and whether that should prevent candidates from running for office. In anticipation that these questions will continue and recognizing that our members may choose to write about the issue of ageism in response to the intensive focus on the age of our candidates, we thought it would be helpful to provide examples of the ways in which geriatrics health professionals are conveying that chronological age is not the appropriate metric for measuring whether someone is able to do a specific job (see sidebar).

A few lessons that I've learned over the years about communicating and staying on message are in order here. One of the best is to take a beat before answering a question—phrases like “that is a great question” or “interesting you should ask about that” are useful here. Taking the beat allows you to figure out how to answer the question you were asked with the message that you want to get across. A second lesson is to not be surprised if your carefully crafted answers are reduced to a single short quote that is more aligned with the story that

a reporter is trying to tell than with what you were hoping to convey. This happens more often than not and it's important not to be discouraged when it happens to you. Be consistent from venue to venue. I recently commented to a colleague at another organization that for over a quarter of a century (eek!), I've been saying that graduate medical education and board certification should reflect that we are training health professionals across specialties and disciplines to care for older adults. Their remark was “you have certainly been consistent with that message, Nancy.”

Learning from each other on MyAGSONline: We've also dropped this column into our MyAGSONline.org member community as a CEO blog. We invite members to share their own experiences and thoughts as to how they are communicating about aging and working to shift the public discourse from a focus on chronological age to a focus on aging as a lifelong process and a recognition that there is no “one size fits all” description for those 55.8 million Americans who are 65 and older. We'd love to hear how you are doing and please feel free to share links to articles and interviews so we can all learn together how we can better address these issues.

Additional Resources for Election Season: We are updating our [questions for candidates](#) running for office in 2024 and that compendium is a great resource for focusing candidates and the media on issues that

Let's talk about aging

Laura Mosqueda, MD, AGSF was extensively quoted for an April 2023 article in the *LA Times*, [Is Biden too old to run again? Is Feinstein too frail to stay? It's not about age](#). From the jump, Laura focused the interview on shifting the question from “Is someone too old?” to “Can someone still do their job?” In a follow up conversation with Laura, some key take-home points that she thinks we all should be making when asked about placing age-based limits on serving in office are:

- We cannot judge or predict another person’s abilities based on their chronological age.
- The older we get, the more different we become from others of the same age. Heterogeneity is a hallmark of aging.
- Fitness to perform our work should not be an age-based decision. Rather, fitness should be evaluated based on whether our function meets the needs of the job.

In October 2023, Anna Chodos, MD, MPH wrote an editorial for *STAT News*, [The case against age limits for politicians](#). Anna, who has focused on addressing ageism in health care, started with a blunt assessment: “As a geriatrician, I think that the idea of maximum age for politicians is terrible. It won’t help America — and it might hurt us. And yes, it’s because the very concept is rooted in ageism. Conflating age and health or age and ability cannot actually help us discern who’s truly fit for office and who’s not.” She went on to pick up on a number of the points Laura had made and called for us all to: “Stop dismissing politicians by saying someone is “too old.” It’s an undefined concept. There is plenty to debate with regard to their actual work, their record, their policies, and their proposals.” Some additional take away messages from Anna’s op-ed:

- Lean into your expertise as a geriatrics health professional who has the authority and knowledge to speak on these topics.
- Pivot from a focus on how old a candidate is to a focus on how they will do the job that they are running for – a timely reminder for all of us that we should learn about our candidates, including their track records, their policies, and their proposals.
- Point out the benefits of aging in a way that’s based on our expertise. Aging really can equate with wisdom and better decision making and that is one of the things that may be an asset if the candidate possesses it. Meaning: the age of a candidate for a job should not be feared in and of itself, it may mean they are the wisest version of themselves.

In a follow up conversation with Anna, she pointed to another useful resource from *STAT News*, the *STAT* e-book on [Improving Care for the Aging Population](#) which provides a nice overview of the body of research that focuses on how our cognition can improve with aging. Studies have shown that older people show less emotional volatility, have improved decision-making, and can be better at navigating social conflict.

matter to older adults and those who care for them. Our friends at the Center to Reframe Aging (where I am on the Advisory Board) have developed an [Election Ageism Guide](#) which

is a great resource for helping us to combat stereotypes about aging as our national elections unfold. ♦



AGS WELCOMES NEW CLASS OF FELLOWS

The AGS also recognized 14 leading health professionals who have been awarded AGS Fellowship over the past year – a distinction that recognizes AGS members for their deep commitment to the AGS and to advancing high-quality, person-centered care for us all as we age. They include:

- Candice R. Coffey, MD, AGSF
- Clifford F. Feiner, DO, AGSF
- Ariel Green, MD, MPH, AGSF
- Sherry Greenberg, PhD, RN, GNP-BC, FGSA, FNAP, FAANP, FAAN, AGSF
- Megan Huisinigh-Scheetz, MD, AGSF
- Ecler E. Jaqua, MD, AGSF
- Esther Oh, MD, PhD, AGSF
- Neela K. Patel, MD, MPH, AGSF
- Lenny Powell, DO, MS, FACOFP, CMD, AGSF
- Heather Schickedanz, MD, AGSF
- Nancy Schoenborn, MD, MHS, AGSF
- Cassandra Vannes, NP, AGSF
- Louise C. Walter, MD, AGSF
- Sarah A. Wingfield, MD, AGSF

* * *

For more information on the new class of AGS Fellows and about AGS Fellowship visit the membership page on the AGS website.

MEET THE NEW AGS PRESIDENT

MARK SUPIANO, MD, AGSF

University of Utah's Geriatrics Division Research Co-Chief and Executive Director of its Center on Aging

Q. What inspired you to become a geriatrician?

A. There are many reasons I became a geriatrician.

In the 80's, geriatrics was not yet an established field like it is now. It was an exciting new area of medicine. I was part of the second class of fellows trained in Geriatric Medicine at the University of Michigan, and in 1987, I took the first-ever American Board of Internal Medicine's certifying exam in Geriatric Medicine. It was a fresh discipline, offering an opportunity to be a pioneer and make a meaningful impact. It felt like stepping into the unknown, similar to the wild west, where I could navigate the uncharted territory of aging and make meaningful contributions to an emerging field.

Specializing in geriatrics also gave me the opportunity to develop a specialized knowledge base without abandoning primary care. In medical school I was passionate about going into primary care and I knew that I did not want to give up taking care of the whole patient. Geriatrics is a great discipline that allows that. We are complexivists – something geriatricians, including myself, take pride in. We take pride in providing comprehensive care, supporting individuals throughout their aging journey. Aging, as we're all aware, is inherently intricate and multifaceted.

Second, the demographic imperative that we are now in the midst of, was then on the horizon. There was a recognized need to generate knowledge to better care for older people because we knew that a demographic change in the country was coming and there was a lot of work to be done to get ready.

Thirdly, like many geriatricians, my influences stemmed from close relationships and personal experiences. I grew up with strong connections to three out of my four grandparents, all of whom lived into their early 90s. I was particularly close to my paternal grandfather, who immigrated from Ukraine when he was in his 20s in 1918. Because he lived in my hometown, we spent a lot of time together as I was growing up, which allowed our relationship to strengthen and deepen over the years. Observing his aging process firsthand had a significant impact on my career trajectory. Lastly (but not least!), my wife, Kathie, played a pivotal role. Her first job as a newly minted geriatric social worker was as the Director of Social Services for a nursing home. Her experience opened my eyes to the urgent need for better care for older individuals, especially considering the challenging conditions in nursing homes back then. I like to say that Kathie and I formed our own interprofessional geriatrics team – and as of June we will celebrate 45 years together.

Q. What do you look forward to most about being AGS president this year?

A. I've been associated with AGS since roughly 1986, making it not just my professional and academic home, but also a place where I've built enduring relationships with the leaders, members, and the exceptional staff (I have worked with—Nancy Lundebjerg, Marianna Drootin, and Erin Obrusniak—for nearly two decades!). It's evolved into more than just a professional network for me; it feels like family.

Looking ahead, I see this upcoming period as the culmination of my

years of service to AGS. I plan to continue to work with the Society to make meaningful impacts and work towards fulfilling its mission. I'm excited and committed to supporting AGS and its efforts to combat ageism, racism, and other forms of bias and discrimination through its DEI initiatives. I'm enthusiastic about the advocacy role our Society can play on behalf of older adults in this critical space.

Q. What advice would you give to new AGS members?

A. There are so many opportunities to engage in the Society - and I highly recommend that new members embrace these opportunities and get involved. There are a variety of ways for members to get involved. One such avenue for engagement is contributing to our [public policy efforts](#) by reaching out to your representatives to support the advocacy that is being made on behalf of aging issues. You can serve as an abstract reviewer for the AGS Annual Meeting, sign up to participate in our [virtual mentoring program](#) (we are looking



Dr. Supiano and wife Kathie on biking trip.

for both mentees and/or mentors!) or apply to serve on an [AGS Committee](#). These are just a few ways that you can engage – there are many others. Just visit the AGS membership page to check out the volunteer opportunities available. Additionally, if your state has a [state affiliate organization](#), I encourage you to join it and get involved there too. If there isn't one yet, consider taking the initiative to establish an affiliate in your state.

The AGS offers valuable resources for education and ongoing professional development. Explore the various [member benefits](#) and free resources that AGS members have access to and take advantage of the many educational opportunities that exist, including the [AGS/ADGAP Leadership](#)

[Curriculum](#) available to Fellows-in-Training members and Early Career Professionals; the [Multiple Chronic Conditions Research Core Curriculum](#); and the [AGS Older Adult Vaccine Initiative website](#). Take a moment to learn about the [AGS CoCare®](#) portfolio of programs, which provide institutions with resources to integrate geriatrics expertise into broader care for older adults.

Attending the AGS Annual Scientific Meeting, whether virtually or in-person, presenting your work and learning from colleagues is an excellent way to learn, grow, and engage with the Society as well.

Q. What do you do to have fun?

I'm an exercise enthusiast and have

found immense fulfillment and health benefits through endurance running, having completed 15 marathons, including five Boston Marathons, as well as road cycling. While I'm currently recovering from surgery and eagerly awaiting clearance to resume running, I continue to enjoy cycling, especially as a shared activity with my wife, Kathie. Our recent cycling trip to Portugal, immediately following this year's Virtual Annual Meeting, was a wonderful experience that highlights how cycling has allowed us to explore the world together. Alongside our adventures, we treasure spending time with our family, including our granddaughters, whom we are very proud of. ♦

JOIN US IN CONGRATULATING THE FLORIDA GERIATRICS SOCIETY AS THE RECIPIENT OF THE 2024 STATE AFFILIATE ACHIEVEMENT AWARD

Each year the AGS State Affiliate Achievement Award is given to a state affiliate that has shown success in one of five areas: membership recruitment/retention; innovative educational programming in geriatrics; public outreach; advocacy; and affiliate growth. This year, we congratulate the Florida Geriatrics Society (FGS) for its comprehensive analysis of FGS and targeted membership outreach efforts to increase membership, enhance educational programming, and foster collaboration with volunteers and external organizations.

With the adage “one cannot truly know how far they have traveled if they do not know where their travels have taken them,” FGS looked back upon their history and conducted a thorough assessment of their structure and membership to understand who their members are. Using that knowledge, FGS was able to answer WIFM (What's In It For Me) for their members to create new value propositions, attract new volunteers and leadership, increase committee output, and bring new awareness of FGS to prospective members across the state. FGS took a personal approach towards handwriting cards to new and lapsed members and encouraged past members to rejoin, featuring new and upcoming enhancements to FGS's annual meeting, advocacy, committee work, and benefits. FGS's efforts have proven successful in growing and engaging its membership and creating a more sustainable future with collaborative relationships with task forces and associations throughout Florida.

The journey of FGS, spanning over three decades, is a testament to resilience, dedication, and strategic planning. Their approach to membership recruitment and engagement underscores the significance of understanding the diverse needs of members and adapting strategies accordingly. Additionally, their emphasis on building strong relationships with key stakeholders exemplifies the power of collaboration and community engagement in advancing organizational goals. Congratulations to FGS on its achievements and for its upcoming celebration of its 35th anniversary this year.

The AGS State Affiliate program was launched in 1991 and has increased the visibility of geriatrics medicine throughout the country. The 25 AGS State Affiliates offer professional education, networking, and advocacy at the local and state levels. The Council of State Affiliate Representatives (COSAR) serves as the governing body of the AGS State Affiliates and is comprised of elected member representatives from each affiliate. **To learn more** about AGS State Affiliates and upcoming events, please go to americangeriatrics.org/stateaffiliates. ♦

FROM OUR PRESIDENT

MARK SUPIANO, MD, AGSF

I begin my term as AGS President eligible to receive Medicare and as the second oldest to hold this position in its 82-year history. The record holder is Dr. Frank McGlone, who was two months older than me when he became President in 1981. I joined AGS four years later, commensurate with the beginning of my Geriatric Medicine Fellowship training.

In this current election year much attention is being placed on whether chronological age is a factor in one's ability to function in leadership. In this context, I would like to share aspects of my personal aging experience to illustrate some of the advances that have been made in caring for older adults during my 40-year career in geriatrics, calling attention to the knowledge that did not exist when Dr. McGlone served his term. Thanks to the advances in aging research and clinical care that AGS members have led during my career lifetime, I submit that I am well-positioned to lead the AGS in the coming year.

Fellowship training and board certification in Geriatric Medicine did not exist in 1981. After completing my VA-supported Geriatrics Fellowship training (and I am forever grateful to the VA for this support and what ultimately was a 33-year-long VA affiliation), I was eligible to sit for the very first American Board of Internal Medicine's certifying exam in Geriatric Medicine in 1987. I am proud that I continue my status as a Board-certified geriatrician.

Early in my geriatrics clinical and research training in vascular aging, I embraced the mounting evidence that exercise is the best anti-aging medication in our armamentarium.

I have enjoyed—and benefitted from—endurance running (15 marathons including five Bostons) and road cycling. Yet, despite the certain benefits that accrued thanks to this lifestyle intervention, its impact was not sufficient to forestall the inevitable effects of vascular aging and the development of systolic hypertension. In this historical context, it is important to note that when I began my geriatrics training, there was no evidence base to inform a systolic blood pressure treatment target for older adults. The seminal Systolic Hypertension in the Elderly (SHEP) trial was published in 1991. Further, my recent clinical “Essential Hypertension” diagnosis would not have been made without the evidence base that resulted from the Systolic Blood Pressure Intervention Trial (SPRINT). Its results,



As the incoming AGS President I am committed to speaking out to address the inequities in health care and to ensuring that the AGS diversity, equity, and inclusion efforts are sustained.

published in 2015, influenced the 2017 AHA Clinical Guideline for Hypertension that lowered the definition of hypertension and treatment goal for systolic blood pressure (SBP) from 140 mm Hg to 130 mm Hg. This meant that the gradual increase in my SBP to the mid-130s was no longer be considered “normal” and led to a recommendation to initiate anti-hypertensive therapy.

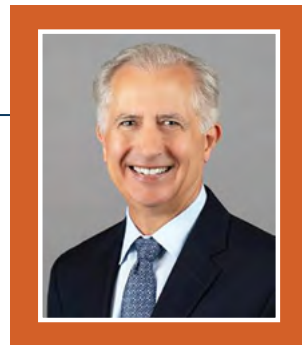
In addition to reaping the cardiovascular and cerebrovascular benefits of lower SBP, additional evidence

from SPRINT suggests that my brain health is also being protected. As further protection, I have adopted the evidence that hearing loss is associated with cognitive decline. To derive this benefit—and to be able to hear my granddaughters' conversations—I began using hearing aids to correct age-related hearing loss.

Next, should I be on a statin for primary prevention? Whether statins have an influence on brain health remains an open question. I am grateful to be a part of an NIA-supported pragmatic clinical trial, Pragmatic Evaluation of Events and Benefits of Lipid-lowering in Older Adults - PREVENTABLE, that is designed to enroll up to 20,000 statin naïve adults age 75 years and older to answer this question – ideally by the time I celebrate my 75th birthday. Such a trial could not have been imagined in 1981. If you attended

#AGS24, I encourage you to access the symposium on PREVENTABLE and pragmatic trials that was presented by Drs. Callahan, Espinoza, and Orkaby on the meeting platform (it will be available until August 31, 2024).

I am beginning my term in office less than four months following cervical spine fusion surgery to address—and successfully treat—a painful ulnar nerve impingement. I was fortunate to be cared for in an Age-Friendly Committed to Care Excellence academic health



system that provided 4Ms care, and addressed what matters most to me. Today, my pain is largely in the rear-view mirror, which allowed me to thoroughly enjoy a cycling trip in Portugal immediately following the #AGS24 meeting.

I need to acknowledge that I have benefited from being a privileged, educated white man with resources and access to outstanding health care and therapies. To that end, I embrace the AGS commitment to advocating for this same access to resources and health care to everyone as they age. As the incoming AGS President I am committed to speaking out to address the inequities in health care and to ensuring that the AGS diversity, equity, and inclusion efforts are sustained. AGS will continue to support and advocate for investment in additional aging research, training, and workforce development, and wide dissemination of evidence-based, person-centric models of care. I believe that all older adults should have access to care that is informed by the principles of geriatrics just as I have personally benefited from as I age.

We are all aware that more geriatrics health care professionals are needed now and for years to come. However, let's not allow a singular focus on the metric of board-certified geriatricians prevent us from celebrating the tremendous impact the advances made in the past 40 years have had in improving the health and health care of older adults.

I am excited to continue working with our members in the coming year on advancing the AGS mission supporting all of us as we age. ♦

Kudos to Board/Committee Leaders continued from page 1

Home Program. At the San Francisco VA Medical Center he provides consultative geriatric services on the Mobile Acute Care for Elders service, and he supervises physicians who are training to become geriatricians. In addition to his work as Secretary, President, and Board Chair, Dr. Harper has co-chaired the Junior Faculty Task Force and Geriatrics-for-Specialists Council, served as Chair of the AGS/ADGAP Fellowship Directors Group, and served as co-chief editor of the *Geriatrics Review Syllabus* (11th edition). Prior to joining the Board, he was a member of the Education and Clinical Practice and Models of Care Committees. An AGS member for 26 years, we thank Dr. Harper for his dedication, service, and for being a prominent voice, continuously advocating for the Society's vision to contribute to our communities and maintain our health, safety, and independence as we age.

Our outgoing committee members also have graciously given much of their time and talent to the AGS this past year. Our sincere thanks to:

- **Peter Abadir** from the Public Policy Committee;
- **Steve Barczi** and **Halina Kusz** from the AGS/ADGAP Education Committee;
- **Jovy Borja**, **Crystal Burkhardt**, and **Daniel Mendelson** from the Quality Performance and Measurement Committee;
- **Sean Jeffery** from the HSI-TC Committee;
- **Christine Kistler** from the Research Committee;
- **Kobi Nathan** and **Quratulain Syed** from the Public Education Committee;
- **Lisa Walke** from the Clinical Practice and Models of Care Committee; and
- **Leah Witt** and **Ugochi Ohuabunwa** from the Ethnogeriatrics Committee.

Our Outstanding Committee Service Awardees

Our Outstanding Committee Service Awardees are members who have made extraordinary contributions through our committees. Congratulations to:

- **Steve Barczi** from the AGS/ADGAP Education Committee;
- **Daniel Forman** from the Research Committee;
- **Sean Jeffery** from the HSITC Committee;
- **Philip Kithas** from the Ethics Committee;
- **Mark Levine** from the Public Policy Committee;
- **Kobi Nathan** from the Public Education Committee;
- **Paul Tatum** from the Quality & Performance Measurement Committee;
- **Lisa Walke** from the Clinical Practice & Models of Care Committee; and
- **Leah Witt** from the Ethnogeriatrics Committee.

**Join us in person next year for the 2025 AGS
Annual Scientific Meeting in Chicago, IL!**

**May 8-10, 2025
(Pre-conference Day: May 7)**

We are accepting proposal submissions on our online submission site at meeting.americangeriatrics.org/submissions. All proposals must be submitted online - hard copy proposal submission will not be accepted. The proposal submission deadline is June 30, 2024 at 11:59 PM Eastern time.

Passion, dedication, and scholarly pursuits defined #AGS24, which was evident with more than 700 research studies presented throughout the meeting. From the live chats held through the virtual meeting platform to social media postings to the in-person viewing parties, dinners, and shindigs our #AGS24 attendees organized and hosted themselves to celebrate together from wherever they were participating from – the enthusiasm and commitment to enhancing care for older adults that our members embody resonated throughout the event. Although virtual, the vibrant atmosphere was palpable. Thanks to generous donations to the AGS Health in Aging Foundation, 100 trainees received stipends facilitating valuable networking and learning experiences.

Mark Supiano, MD, AGSF, hosted the #AGS24 Awards Ceremony, where we celebrated excellence across the AGS, highlighting the outstanding work of award recipients from a variety of disciplines and career stages. (You can learn more about our 2024 awardees on Page 10).

Barrett Bowling, MD, MSPH this year's Thomas and Catherine Yoshikawa Award recipient, gave a memorable lecture entitled "*Geriatricizing" Chronic Disease Research: A Geriatrician's Journey in Collaborative Research*". Calling upon his background as a geriatrician and chronic disease researcher, Dr. Bowling made the case for why aging expertise is essential in chronic disease research and spoke to his own collaborations outside of geriatrics to discuss ways to communicate best practices for age-inclusive research to non-geriatrics research teams.

Dr. Mark Supiano opened the highly anticipated #AGS24 Plenary Paper Session by welcoming Ayumi Emily Sakamoto to the virtual stage for a presentation of her work on testosterone, genetics, and mortality

risk which showed how the FOXO3 genotype mitigates the effect of low bioavailable testosterone on mortality. She was followed by Bruce Kinoshian, MD who presented his research highlighting the cost-saving benefits and expanded services of Home-Based Primary Care (HBPC) for Independence at Home Qualified (IAHQ) Veterans, emphasizing reduced total care costs, lowered hospitalizations, and care quality for high-need Veterans. Tais Moreira Protasio, MD wrapped things up with a presentation that explored decision regret in patients considering implantable cardioverter defibrillator. The plenary paper session gave attendees a glimpse of the diverse and impressive range of papers and posters awaiting exploration at the meeting. All of the abstracts can be accessed at <https://meeting.americangeriatrics.org/program/jags-abstract-supplement>.

One of the standout moments from the meeting was the Henderson State-of-the-Art Award Lecture featuring members of the American College of Surgeons (ACS) Geriatric Surgery Verification Team, the whole of which was the recipient of the 2024 Edward Henderson Award. This year's recipients from the ACS Geriatric Surgery Verification team epitomize Dr. Henderson's visionary leadership, dedication, and commitment to advancing care for all of us as we age. The panel of speakers included Drs. Rosenthal, Russell, Robinson, and Cooper who all helped to describe the efforts of the American College of Surgeons (ACS), together with the AGS and The John A. Hartford Foundation, to improve care for older adults considering and having surgery by developing a structured program and measures that address the goals and needs of each individual older adult.

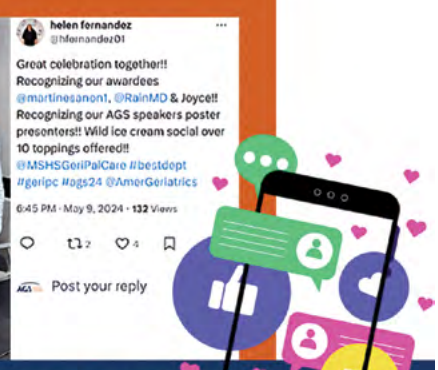
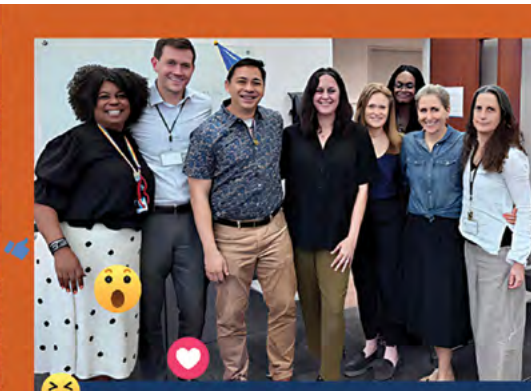
Yet another highlight of the meeting for many attendees was the geriatrics literature review session. This year delivered an impressive array of songs

spanning from Bob Marley to REM to the acclaimed musical *Hamilton*, covering diverse topics such as the effectiveness of donanemab, the efficacy and safety of a RSV vaccine, decolonization in nursing homes, and breast cancer overdiagnosis among older women. A heartfelt thank you goes out to Ken Covinsky, MD, MPH; Alex Smith, MD, MS, MPH; and Eric Widera, MD for their hard work in curating such an entertaining and insightful session again for us this year.

While celebrating the virtual success of #AGS24, we can also feel the excitement building for next year's in-person meeting in Chicago, IL from Thursday, May 8 to Saturday, May 10 (with a preconference day on Wednesday, May 7). The prospect of reuniting face-to-face, exchanging ideas, and fostering connections energizes the AGS leadership and staff as much as it does our AGS community.

In conclusion, the 2024 AGS Virtual Annual Scientific Meeting exemplified innovation, excellence, and inclusivity, setting new standards for us as we move forward. As we reflect on the achievements and collaborations sparked by #AGS24, our anticipation grows for the dynamic possibilities that lie ahead, both virtually and in-person in the upcoming year. This year's virtual experience laid a strong foundation for future events, blending the best of virtual accessibility with invaluable personal interactions.

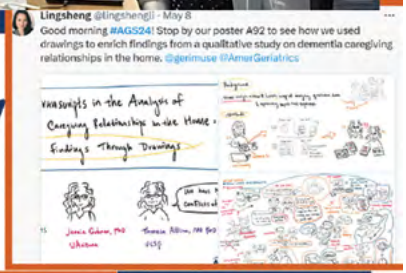
If you missed the meeting, it's not too late to register for access to the on-demand educational sessions through the #AGS24 Virtual Annual Meeting Platform where you still will be able to earn CME and Nursing CE credit until August 31, 2024. Anyone who attended the event can also access all of the educational content until August 31. CME and Nursing CE applications and evaluations are due August 31, 2024. ✦



Lee Lindquist @LeeLindquistMD · May 8
#AGS24 Connect w NIA Events! These have been so awesome for my career!!! Thank you @NIHaging @AmerGeriatrics!!! @NMGeriatrics #geriatrics

And you're not throwin' away this shot

#AGS24



Dr. Ramona Rhodes @DrRamonaRhodes1
I truly enjoyed hearing our @UTSWMedCenter learners and trainees share their #AGS24 projects! So inspiring! Great discussions around #Aging! Thank you, @debfreelandmd for convening the session! #MSTAR @AmerGeriatrics

3:10 PM · May 10, 2024 · 22 Views



Kate Bennett @KateBUW
So nice to celebrate #AGS24 with #UW #geriatrics fellows, faculty, and staff! Lucky to work with them all. A taste of an in person conference close to home. @Sofy_Jar

11:19 PM · May 9, 2024 · 161 Views



umichgeri Fellows and faculty at our #AGS24 viewing party. Grateful for such a supportive division and time to connect and network during a #virtual conference!

#AmericanGeriatricsSociety #geriatrics #genhpm #GeriatricFellowship #MichiganMedicine #MedicalEducation #MedEd

6h



AGS24 VIRTUAL ANNUAL SCIENTIFIC MEETING

CONGRATULATIONS TO OUR 2024 AWARD RECIPIENTS

Each year, the AGS celebrates researchers, clinicians, educators, and trainees who have made outstanding contributions to the care of older adults. Please join us in congratulating 2024's award recipients, who were honored at the 2024 Virtual Annual Scientific Meeting of the American Geriatrics Society.

Thomas and Catherine Yoshikawa Award and Lecture for Outstanding Scientific Achievement in Clinical Investigations

The 2024 Thomas and Catherine Yoshikawa Award for Outstanding Scientific Achievement in Clinical Investigation is awarded to **C. Barrett Bowling, MD, MSPH**, Associate Professor in the Division of Geriatrics at Duke University School of Medicine.

At the #AGS24 meeting, Dr. Bowling delivered his lecture on “*Geriatricizing*” *Chronic Disease Research: A Geriatrician’s Journey in Collaborative Research*.



Dr. Bowling is a geriatrician, chronic disease researcher, and research educator who focuses on incorporating geriatrics into chronic disease research and clinical care. He is a past recipient of the NIA GEMSSTAR, a T. Franklin Williams Scholar, and VA Career Development awardee and principal investigator of two R01s and one VA IIR (R01 equivalent). His collaborative research has resulted in over 95 peer reviewed publications related to chronic kidney disease, hypertension, multimorbidity, lupus, and other chronic conditions among older adults.

To address the underrepresentation of older adults in research, he developed the 5Ts Framework to help anticipate and overcome challenges to enrolling older adults in research studies. The [5Ts Framework](#) describes maximizing study generalizability by enrolling participants from the **Target population**, building research **Teams** that include geriatrics and gerontology expertise, incorporating appropriate **Tools** to measure function and patient-reported outcomes, anticipating **Time** for longer study visits, and accommodating older participants with comorbidities and age-related impairments by following practical **Tips**. The 5Ts have gained national attention as an approach to improve research inclusion. Using this framework has allowed Dr. Bowling to advocate for the needs of older adults and support inclusion across the lifespan.

“Dr. Bowling’s work is based on the selfless goal of working to ensure older adults’ priorities are seen and met,” said AGS Chair Donna Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN. “By focusing on the unique needs of older adults with chronic disease and chronic disease care, he is helping older adults retain their independence

which is often a priority for this population. His research has helped to support inclusion and care of older adults in clinical practice and research with tools such as the CKD-Discordance Index which can be used to identify older adults at high risk of hospitalizations and the 5Ts Framework. This work epitomizes the Yoshikawas’ commitment to diffusing new knowledge into practice.”

Dr. Bowling has demonstrated unwavering dedication as an active member of the Society. His involvement with the AGS dates back to his residency, where he initiated the establishment of an AGS Resident Chapter at University of Alabama at Birmingham. Notably, in 2009, he secured the AGS 1st place prize for Resident Poster, followed by the prestigious AGS/Merck New Investigator Award in 2013. He has actively served on various AGS Committees and Task Forces and is a frequent faculty member for the Annual Meeting Program. Dr. Bowling's exceptional involvement extended to the Junior Faculty Research SIG which he chaired from 2017-2018. More recently, he served as Domain Co-chair for the Inclusion Across the Lifespan, Health Equity, and Vulnerable Populations Module for the AGS/AGING Learning, Educating, And Researching National Initiative in Geriatrics (“LEARNING”) Collaborative Curriculum on multiple chronic conditions (MCC) which was developed with funding from the National Institute on Aging to support investigators seeking to include older adults with MCC in their research.

The Dennis W. Jahnigen Memorial Award

Rainier P. Soriano, MD was honored as the 2024 Dennis W. Jahnigen Memorial Award recipient, recognizing his significant contributions to the education of health professionals in geriatric care. Dr. Soriano's exemplary work in teaching, curriculum development, educational leadership, research, service, and mentorship has markedly improved the knowledge, competence, and skills of those caring for older adults. This prestigious award highlights his dedication and excellence in these domains, underscoring his role as a pivotal figure in advancing geriatric education and healthcare.



Serving as a Professor and Senior Associate Dean for Curricular Affairs at the Icahn School of Medicine at Mount

Sinai (ISMMS) in New York City, Dr. Soriano has established himself as a master clinician-educator and a national leader in both geriatrics and medical education. His career, founded on a deep commitment to the well-being of vulnerable older adults and individuals with serious illnesses, has led to transformative improvements in medical education and geriatric care.

"Dr. Soriano exemplifies humanistic medicine, consistently displaying compassion, empathy, and a nuanced sensitivity to the cultural and linguistic backgrounds of patients and their families," said AGS Chair Donna Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN. "Originally from the Philippines, Dr. Soriano never envisioned a career in the United States. Rooted in a culture where the concept of geriatrics is deeply ingrained as a familial responsibility, his path took an unexpected turn when the opportunity to train in the U.S. presented itself toward the end of medical school in Manila. During that formative period, he discovered the field of geriatrics and quickly realized that he had found his passion – improving the well-being of older adults. He made a conscious decision to pursue a career in geriatrics where, for over two decades, he has been a true innovator in geriatrics and medical education. He has a unique gift for making new knowledge exciting, engaging, and relevant for learners. He receives the prestigious Dennis W. Jahnigen Award for his commitment to advancing geriatrics education and tirelessly working with students, embodying the spirit of the award's namesake, the late Dr. Dennis W. Jahnigen, a compassionate geriatrician, and dedicated educator. Dr. Soriano's impact reaches beyond physical location, influencing national healthcare education and shaping the future of geriatrics."

Under his leadership since 2000, the Medical Student Training in Aging Research (MSTAR) Program at Icahn Mount Sinai has evolved into one of the nation's premier initiatives in aging and palliative care research, thanks to his revitalization efforts. Dr. Soriano's guidance has facilitated mentorship for over 250 medical students in geriatrics and palliative medicine research, leading to noteworthy contributions to peer-reviewed publications and national research awards. His success in securing a 5-year T35 grant from the NIA in 2020, with initial support from The John A. Hartford Foundation, has not only sustained but also expanded the MSTAR Program, allowing students from various institutions to collaborate with Mount Sinai's esteemed researchers.

Beyond the MSTAR program, Dr. Soriano's role as Associate Editor in Geriatrics for the AAMC's MedEdPORTAL has been pivotal in enhancing the quality and dissemination of geriatrics education materials. His editorial work has set new standards for educational content, benefiting learners and educators alike. As the lead editor and author of The Bates Guide to Physical

Diagnosis and History Taking, Dr. Soriano has significantly updated this cornerstone textbook. By integrating clinical skills training and focusing on the care of older adults, he has brought this essential resource into the 21st century, thereby modernizing medical education.

Dr. Soriano's active participation in AGS plenaries, workshops, and publications, along with his mentorship roles, demonstrates his substantial contribution to the field. His efforts have not only enriched the AGS community but also propelled the field of geriatrics forward, ensuring better care for older adults.

The Nascher/Manning Award

William J. Hall, MD, MACP Emeritus Professor of Medicine at the University of Rochester is the 2024 recipient of the Nascher/Manning Award. Dr. Hall's accolades and accomplishments over his lifetime of achievement in geriatrics are vast and diverse, and he has had an impact on education, clinical care, research, leadership, and mentorship.



The Nascher/Manning Award was named in honor of Ignatz Leo Nascher, MD who was the first clinician to advocate for establishing a specialty focused on the care of older adults. Through the generosity of the Manning family, Dr. Nascher's namesake award is one of several honors conferred by the AGS at its Annual Scientific Meeting. Dr. Hall truly embodies the spirit of the award's recognition of a lifetime of achievement in geriatrics.

"Dr. Hall has made unparalleled contributions to the field of geriatrics," said AGS Chair Donna Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN. "He has left an indelible mark on clinical care of older adults, education of geriatrics health professionals, and development of the next generation of academic geriatricians who are pursuing careers as clinician-educators and aging researchers. He is a much sought-after mentor and his contributions to the work of the Society are remarkable. At AGS, he has served as a member of the Board of the Association of Geriatrics Academic Program Directors, on the editorial boards of the *Journal of the American Geriatrics Society* and the *Geriatrics Review Syllabus*, and as Chair of the AGS Annual Meeting Program Committee. To paraphrase one of his nominators, Bill has made steadfast, committed, compassionate, and rigorous contributions to the field of clinical geriatrics through his prolific achievements in education, mentorship, and clinical care over the past 35 years. He truly embodies the spirit of the Nascher/Manning Award and I can think of no one more deserving."

He has held multiple roles at the University of Rochester, including Hospital Chief of Medicine, medical school Associate Dean, Vice-Chair of Medicine, Director of the Center for Lifetime Wellness, and Director of the Center for Healthy Aging. He led The John A. Hartford Center of Excellence for over two decades as well as a NIA funded Institutional Research Training (T32) grant. Perhaps most importantly, he is known for mentoring colleagues worldwide and for his tireless advocacy on behalf of older adults and those who serve them.

The David H. Solomon Memorial Public Service Award

The AGS recognized **The Institute for Healthcare Improvement (IHI)** as the recipient of the 2024 David H. Solomon Memorial Public Service Award for being a leader of the [Age-Friendly Health Systems](#) movement – which now includes almost 4,000 sites recognized by IHI for providing 4Ms (What Matters, Medication, Mentation, Mobility) care to over 3 million older adults.

“More than 3 million older adults have been reached with 4Ms care because of the work that IHI has been doing to improve the care of older adults equitably through the Age-Friendly Health Systems Initiative,” said AGS Chair Donna Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN. “This work is very much aligned with Dr. Solomon’s life-long commitment to improving quality care for all of us as we age, and I could think of no individual or group more deserving of this award. We have been fortunate to partner with IHI on these efforts and are grateful to The John A. Hartford Foundation for its long-standing partnership with AGS and its visionary leadership of this movement.

IHI partners and collaborates with visionary leaders, organizations, and frontline practitioners worldwide to seek and achieve science-based improvements in health and health care. IHI's collaboration with the Geriatrics Workforce Enhancement Program Coordinating Center at the AGS and the Health Services and Resources Administration (HRSA) has been fundamental in aiding Geriatric Workforce Enhancement Programs and their partners in attaining Age-Friendly recognition. As a result, 272 GWEPs and partners have been recognized by IHI as level 1 and 144 as level 2 Age-Friendly Healthcare Systems.

Clinician of the Year Award

Joyce Fogel, MD, FACP, AGSF, is the recipient of the 2024 Clinician of the Year award. Dr. Fogel is a Clinical Professor of the Brookdale Department of Geriatrics and Palliative Medicine at the Icahn School of Medicine at Mount Sinai and Senior Director of Education for Geriatrics at Mount Sinai Beth Israel.



“Our 2024 Clinician of the Year, Dr. Joyce Fogel, stands as an exemplary figure in geriatrics, demonstrating unparalleled dedication to the well-being of older adults,” said AGS Chair Donna Fick PhD, RN, GCNS-BC, AGSF, FGSA, FAAN, “As an outstanding clinician, educator, and leader, Dr. Fogel's career has been a beacon of the transformative impact of holistic, person-centered care. Her enduring commitment to improving healthcare outcomes and fostering community well-being makes her a true star in the field of geriatrics.”

A dedicated clinician and community advocate, Dr. Fogel has made significant strides in enhancing the well-being of older adults through her impactful community initiatives. Notably, she spearheaded the development of the "Memory Matters" program, funded by UJA Federation, which successfully operated in two Naturally Occurring Retirement Communities (NORCs). With an annual participation of over 400 older adults, the program focused on early identification of and education about risk factors and comorbidities impacting cognitive impairment. Additionally, she played a pivotal role in establishing the “Dementia friendly NORC” at Penn South Program for Seniors, which was also supported by UJA Federation.

Dr. Fogel has collaborated with diverse groups, including the NYC Department of the Aging, the Wechsler Center for Modern Aging at the Jewish Community Center of the Upper Westside, University Settlement on the Lower Eastside and 6 other NORCs under JASA (Jewish Association Serving Aging). Her culturally and educationally tailored programs, such as the multilingual Ask the Dr. Program, exemplify her commitment to inclusivity. Dr. Fogel's community outreach extends to educating and empowering older adults, advocating for their healthcare needs, and collaborating with fellow professionals. As a senior clinician, she serves as a mentor to her younger colleagues, emphasizing personal growth and career development. Dr. Fogel's holistic approach to community care showcases her dedication to improving the lives of older adults and her enduring impact on healthcare practices.

Dr. Fogel received her undergraduate degree from the Sophie Davis School for Biomedical Education at City College of the City University of New York and her MD from SUNY Downstate. She completed residency in internal medicine at SUNY Health Science Center at Brooklyn/Kings County Hospital Center before her geriatric medicine fellowship at New York University School of Medicine/Bellevue Hospital Center.

An AGS member since 1987, Dr. Fogel is also a Fellow of the Society and has served as a mentor, abstract reviewer, and a Presidential Poster Session Judge during the Annual Meeting. AGS is delighted to honor her with the Clinician of the Year award in recognition of how she has brought her numerous talents and skills to bear during an exceptional

clinical career with a focus on ensuring that we all have access to person-centered, high quality medical care as we age.

Edward Henderson Award

In a departure from the traditional single-recipient format, the AGS proudly honors the entire **American College of Surgeons (ACS) Geriatric Surgery Verification team** with the 2024 Edward Henderson Award. Led by Drs. Clifford Ko and Ronnie Rosenthal, this collective of exceptional individuals representing multiple specialties has been instrumental in enhancing surgical care for older adults. They have developed a structured program and measures that address the goals and needs of each individual older adult. Their collective vision for this work is that it will improve quality of care for older adults undergoing surgery.

The Henderson Award is bestowed upon those who embody the legacy of Dr. Edward Henderson, a former AGS Vice President, President, and Executive Director, renowned for his influential work in human aging and geriatric medicine. This year's recipients from the ACS Geriatric Surgery Verification team epitomize Dr. Henderson's visionary leadership, dedication, and commitment to advancing care for all of us as we age.

"We are delighted to recognize the outstanding achievements of the American College of Surgeons Geriatric Surgery Verification (GSV) team with the 2024 Edward Henderson Award," said Donna Fick, PhD, RN, GCNS-BC, AGSF, FGSA, FAAN, Board Chair of the AGS. "The ACS was one of our early partners in our Geriatrics-for-Specialists Initiative (GSI) and Dr. Rosenthal has long served as one of the leaders in this multi-specialty collaboration and Dr. Robinson is the current co-chair of the GSI Council. With funding from The John A. Hartford Foundation, the GSV team has collaborated across specialties to create a verification program that is changing the care of older adults undergoing surgery. The entire ACS GSV team is comprised of visionary leaders who reflect the spirit and legacy of Dr. Henderson himself."

The Henderson State-of-the-Art Lecture, an integral part every AGS Annual Scientific Meeting, featured four distinguished members of the ACS GSV team - Ronnie A. Rosenthal, MS, MD; Marcia M. Russell, MD; Thomas N. Robinson, MD; and Zara Cooper, MD, MSc. Together, they described how the GSV is enhancing care for older adults undergoing surgery by developing structured programs and measures that reflect what matters to each individual undergoing surgery.

Jeffrey H. Silverstein Memorial Award

Michael Devinney, MD, PhD, Assistant Professor of Anesthesiology at Duke University, is the 2024 recipient of

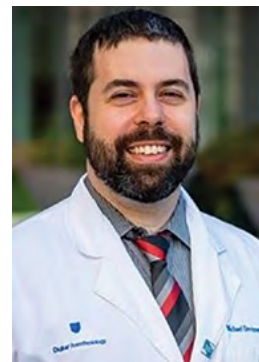
the Jeffrey H. Silverstein Memorial Award for Emerging Investigators in the Surgical and Related Medical Specialties. The award recognizes Dr. Devinney for his cross-cutting work in geriatrics, anesthesiology, and neuroscience.

"Dr. Devinney is a passionate advocate for improving the care of older patients," said AGS Chair Donna Fick PhD, RN, GCNS-BC, AGSF, FGSA, FAAN. "Driven by a desire to understand the underlying mechanisms causing delirium, Dr. Devinney's work showcases a commitment to enhancing postoperative care and prevention of cognitive impairment. His commitment to improving perioperative care of older adults perfectly embodies the spirit of the Jeffrey H. Silverstein Memorial Award, which recognizes emerging researchers making a significant impact on aging-focused care within their specialty."

Dr. Devinney is an exemplary critical-care physician scientist dedicated to improving the care of older adults by discovering aging-related mechanisms of delirium and subsequent Alzheimer's disease and related dementias. An anesthesiologist and critical care physician, he has published extensively in his first 3 years on faculty, and his NIA R03 GEMSSTAR funded study published in the *Annals of Neurology* provides key human evidence for a role of postoperative blood-brain barrier dysfunction in delirium. Using cerebrospinal fluid proteomics, he will next investigate proteins that cross a disrupted blood-brain barrier to cause delirium and subsequent Alzheimer's disease and related dementias. Dr. Devinney has also investigated the role of sleep in postoperative neurocognitive disorders, and is conducting an RCT of suvorexant to improve postoperative sleep and prevent delirium. Overall, his work has great potential to uncover key mechanisms of delirium and subsequent cognitive impairment that will significantly advance our care of older surgical and critically ill patients.

An AGS member since 2018, Dr. Devinney has presented his research at several AGS Annual Scientific Meetings, and his poster was selected for the Presidential Poster Session in 2019. At this year's Virtual Annual Scientific Meeting, Dr. Devinney presented his research during the Clin-STAR Paper session. He discussed "A Role for Intraoperative Hypotension in Postoperative Blood-Brain Barrier Dysfunction in Older Non-Cardiac Surgery Patients" during his presentation.

Board certified in anesthesiology, Dr. Devinney received his MD from the University of Wisconsin School of Medicine and Public Health. He completed his internship, residency, and fellowship at Duke University Medical Center and is currently an Assistant Professor in the Department of

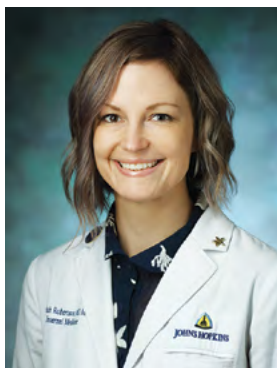


Anesthesiology at the Duke University School of Medicine. Like Dr. Silverstein, Dr. Devinney is working to bring attention to the unique health care needs of older adults by taking on national leadership roles within professional organizations representing anesthesiology and surgery. He is a member of the American Society of Anesthesiologists and the International Anesthesia Research Society. He was also the Mid-Atlantic Representative for Early-Stage Anesthesiology Scholars (eSAS) and is an associate member of the Association of University Anesthesiologists.

Outstanding Junior Clinician Educator of the Year Award

This award is annually bestowed upon an outstanding clinician-educator junior faculty member for an impressive body of work in geriatric education. This year's recipient is **Mariah Robertson, MD, MPH**, a distinguished clinician, educator, and program builder. She is currently the Associate Program Director of the Geriatric Medicine Fellowship at Johns Hopkins University. Focused on improving learner understanding of care for homebound and home limited older adults, Dr. Robertson has become recognized as an expert in geriatrics and home-based care education. Through a HRSA funded Geriatrics Academic Career Award, she has become a recognized expert in using Visual Thinking Strategies to help learners examine biases they may bring to the homes and communities of the medically underserved populations of homebound older adults that they care for. She is also committed to promoting equity and justice through education and has published on the care of LGBTQ+ older adults in the home. Dr. Robertson has been honored with several teaching awards, including the Most Innovative Teaching Presentation from the John Hopkins Department of Medicine Teaching Competition in 2019, the Patrick Murphy Resident Teaching Award from Johns Hopkins Bayview Internal Medicine Residency in 2018 and was inducted, as an internal medicine resident, to the Distinguished Teaching Society of Johns Hopkins School of Medicine in 2018 - an honor most commonly awarded to faculty members. An active member of the AGS, she has served on the Education Committee and subcommittees.

She has also led and presented multiple workshops at national meetings, including at the 2022 AGS Annual Scientific Meeting. Dr. Robertson has presented abstracts at the American Geriatrics Society, Society of General Internal Medicine and American Academy of Home-care Medicine conferences in 2020, 2021, and 2022 focused on her educational work.



The Outstanding Junior Clinician Education Manuscript Award

Kimberly Beiting, MD, is this year's recipient for her work on "GeriAtrics Fellows Learning Online And Together (Geri-A-FLOAT): A sustainable model of learning and support" published in the *Journal of the American Geriatrics Society* in 2023. By collaborating with the co-founders of Geri-A-FLOAT, Kimberly was able to evaluate the program from the "Wave 1" pilot to the "Wave 2" year-long curriculum, which was created using Kern's six-step approach to curriculum development. Her study found Geri-A-FLOAT to be sustainable and associated with high rates (88%) of self-reported impact at 1-year. The Geri-A-FLOAT model promotes sharing of ideas among peers and across institutions, which may help break down silos to promote equity and best practices. Dr. Beiting, an Assistant Professor in the Division of Geriatric Medicine at Vanderbilt University Medical Center, has also completed an Advanced Research Fellowship focusing on a qualitative investigation of institutional and patient perceptions of opioid use disorder in nursing homes. Her clinical and research interests include the care of adults aging with substance use disorders in various care settings and advocating for the improved care of this special population.



The Outstanding Junior Investigator of the Year Award

The Outstanding Junior Investigator of the Year Award this year honors **Melissa Loh, MD**, Assistant Professor at the University of Rochester Medical Center in Rochester, New York and one of the few geriatric hematologists and oncologists in the country. Dr. Loh is board certified in internal medicine, geriatrics, hematology, and oncology and specializes in caring for older adults with myeloid malignancies. Her research focuses on developing, adapting, and testing behavioral and supportive care interventions to improve outcomes for older adults with hematologic malignancies. Guiding her work is a patient and caregiver stakeholder group that Dr. Loh created herself and she has received grants from the NCI (K99/R00), NIA (GEMSSTAR R03), American Society of Clinical Oncology, American Cancer Society, and others to pursue it. She has published over 160 peer-reviewed articles and presented over 150 oral and poster



presentations, the majority of which are in geriatric hematology; received over 30 research and travel awards; and delivered over 20 national and international talks. Dr. Loh's contributions are a testament to her expertise and dedication in the field of geriatrics and geriatric hematology. An active member of the AGS since 2012, Dr. Loh has served on multiple committees and subcommittees including the Research Committee, National Institute of Aging Subcommittee, and Research Methods Subcommittee as well as the President of the Residents' Section from 2013-2015. In 2021, she was awarded the Health in Aging Foundation New Investigator Award from the AGS and in 2020 she was the Arti Hurria Memorial Award for Emerging Investigators in the Subspecialties of Internal Medicine recipient as well as a Tideswell Emerging Leaders in Aging Program Scholar.

The Outstanding Junior Investigator of the Year award this year also honors **Ashwin Kotwal, MD, MS**, who is dually

board-certified in geriatrics and palliative care and an Assistant Professor of Medicine at UCSF. Deeply interested in the social well-being of older adults, Dr. Kotwal's research focuses on understanding and addressing loneliness and social isolation among this population, including persons with serious illness or dementia. He has received



extensive funding, including an NIA K23, GEMSSTAR, Pepper Multi-Site Pilot, and other funding from the National Palliative Care Research Center, multiple foundations, and the California Department of Public Health. He has published 27 first- or senior-authored research papers, 9 commentaries, given over 50 local, national, or international presentations and was recently named to the Scientific Advisory Council for the Foundation for Social Connection. His research on loneliness and isolation during the COVID-19 pandemic garnered national media attention from NPR, the *New York Times* and for which he received the JAGS 2020 Editors' Choice Award. He has received awards for mentorship and is the Associate Director of UCSF's T32 Aging Research Fellowship. He first attended the AGS Annual Meeting in 2011 as an MSTAR student, and has since presented 25 posters, 4 oral presentations, 2 symposia, and is now serving on the JAGS Editorial Board.

The Outstanding Junior Research Manuscript Award

Dr. Katharina Jungo is honored this year for her study "Optimising prescribing in older adults with multimorbidity and polypharmacy in primary care (OPTICA) – cluster randomized clinical trial," published in *BMJ* in 2023. Dr. Jungo's cluster randomized clinical trial enrolled patients

aged 65 or older with three or more chronic conditions and five or more long term medications. The study was designed to compare the effects of discussion about medication in line with usual care with a primary care medication review intervention centered around an electronic clinical decision support system on appropriateness of medication and the number of prescribing omissions in older adults with multimorbidity and polypharmacy. Although the results were inconclusive, this study is important because inappropriate prescribing is highly prevalent in older adults with multimorbidity.

She is a Postdoctoral Research Fellow in the Division of Pharmacoepidemiology and Pharmacoeconomics (DoPE) and the Center for Healthcare Delivery Sciences (C4HDS) at Brigham and Women's Hospital and Harvard Medical School. Prior to that she was a postdoctoral researcher and team leader at the Institute of Primary Health Care of the University of Bern, Switzerland. Dr. Jungo was awarded a Postdoc Mobility grant from the Swiss National Science Foundation, which funds her postdoctoral research at DoPE and C4HDS. Her research interests include the use of high-risk medications in older adults, novel digital health interventions to optimize prescribing practices that leverage new possibilities and patient-centered approaches to deprescribing. The findings of the OPTICA trial raise important questions about the use of novel digital health interventions with the aim of improving medication use in primary care settings. The publication exemplifies Dr. Jungo's research goal to build an evidence base to drive policies and care model delivery to ensure that inappropriate medication use is reduced in older adults.

The Outstanding Mid-Career Clinician Educator of the Year Award

This year, the AGS recognizes **Martine Sanon, MD** for her significant leadership roles, strong interest in mentorship, and for playing an active role in the career development of junior faculty, as well as serving as a role model for her students, residents, and fellows (especially women and students and faculty of color) who may need encouragement to pursue careers in academic medicine. The Director of the Inpatient Geriatric Medicine Clinical Services, and



the Geriatric Liaison to the Department of Emergency Medicine at Mount Sinai Hospital in New York City, she is a master clinician-educator with academic interest in models of care for older adults in the acute care setting, improving patient care transitions from the hospital to the community, and providing optimal care for older adults in the emergency department. Dr. Sanon served as the Geriatrics Lead for the CMMI award GEDI WISE (Geriatric Emergency Department Innovations in Care through Workforce Informatics and Structural Enhancements). She has also been involved in multisite quality improvement projects such as EQUIPPED, which focuses on improving prescribing practices of emergency providers for older adults in the ED, as well as various initiatives to improve clinical work flow and education in geriatric emergency medicine care. She has an interest in geriatric models of care and is currently working on developing inpatient surgical co-management models for older hospitalized patients and standardizing care across clinical sites and the necessary training to work with our surgical colleagues. Her goal is to lead as an academic geriatric clinician expert clinician-educator, who focuses on the training of physicians in the care of older adults in the acute care setting. She is highly regarded by the Emergency Department as a colleague, a collaborator, and a champion for the promotion of Geriatric Emergency Medicine.

Health In Aging Foundation New Investigator Awards 2024 Recipients

Sandra Shi, MD, MPH is a geriatrician, Instructor of Medicine at Harvard Medical School, and an Assistant Scientist at the Hinda and Arthur Marcus Institute at Hebrew SeniorLife. Dr. Shi's research focuses on frailty and post-acute care outcomes in skilled nursing facilities and leveraging large databases, including national surveys and Medicare claims data. Her AGS Annual Meeting abstract entitled "Frailty and Time at Home after Post-Acute Care in Skilled Nursing Facilities" investigated the impact of pre-existing frailty on post-acute care outcomes. The study concluded that clinical frailty assessments may provide valuable risk stratification for postacute SNF care. An active member of the AGS, Dr. Shi serves as an Editorial Board Member for the *Journal of the American Geriatrics Society*, Question Author for the *Geriatrics Review Syllabus*, and is a member of the Junior Faculty Special Interest Group. Dr Shi was an NIA Butler-Williams Scholar and currently holds an R03



GEMSSTAR award for studying time at home after post-acute care and an Older Adults Independence Center Research Education Core award to design and implement a multicomponent intervention for frail older adults in skilled nursing facilities. Her goal is to improve the quality of life for frail older adults by combining geriatrics and rehabilitation sciences in post-acute rehabilitation interventions within skilled nursing facilities.

Snigdha Jain, MD, MHS, NIA GEMSSTAR awardee and Butler-Williams Scholar, is an Assistant Professor in Pulmonary, Critical Care, and Sleep Medicine at Yale. Her post-doctoral research, published in *Annals of Internal Medicine*, elucidated socioeconomic disparities in patient-centered outcomes of older adults after critical illness. With 40+ publications, she has established herself as an equity-focused leader at the intersection of geriatrics and pulmonary and critical care medicine. Her submitted abstract "Association between Social Determinants of Health and Delivery of Post-Acute Rehabilitation to Older Survivors of Critical Illness" explored whether delivery of rehabilitation differed by social determinants among older ICU survivors referred for post-acute care. An active member of the AGS Junior Faculty and AHEAD Special Interest Groups, she led a highly well-received symposium on incorporating equity considerations for investigators at #AGS23 and serves on the AGS Diversity in Research Subcommittee.



Matthew E. Growdon, MD, MPH is a geriatrician and Assistant Professor of Medicine in the UCSF Division of Geriatrics. Dr. Growdon's health services and implementation science research is focused on improving the quality and safety of prescribing for older adults, particularly those with cognitive impairment and social vulnerability. He is currently supported by NIA GEMSSTAR R03 and UCSF K12 awards and has published 28+ peer-reviewed journal articles, including work in *JAGS* concerning polypharmacy among older adults with dementia that was featured in *NEJM Journal Watch*. His submission "eConsultation for deprescribing among older adults: Evaluating barriers to and facilitators of implementation" elicited clinician perspectives on barriers to and facilitators of using eConsults for deprescribing among



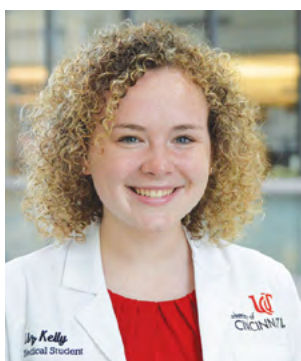
older adults within a large university health network to develop a deprescribing eConsult intervention. A member of AGS since 2018, he has served as a MSTAR research mentor and currently participates on the AGS Research Committee and as part of the JAGS Junior Reviewer Program. A former chief resident and emerging leader in geriatric medicine, he currently serves as the Quality Improvement Lead for the Age-Friendly ED Program at the San Francisco VA Medical Center.

Reuben Ng, PhD is an Assistant Professor at the Lee Kuan Yew School of Public Policy and Lead Scientist at the Lloyd's Register Foundation Institute for the Public Understanding of Risk, both at the National University of Singapore. Dr. Ng's research has played a crucial role in infusing the field of geriatrics with a critical social dimension. In recognition of his outstanding contributions, he earned the prestigious Margret M. and Paul B. Baltes Foundation Award in Behavioral and Social Gerontology in 2023. More recently, he secured the Mather Institute's Innovative Research on Aging Award for the second time. Recognizing ageism as a significant social determinant of health, Dr. Ng's research focuses on uncovering ageist representations across various forms of media and developing tools to enhance age advocacy. His submitted abstract "Experience of Age Discrimination in 116 Countries" constitutes the largest global analysis on age discrimination to date. His work has sparked much-needed conversations about dismantling ageism and reframing aging.



Clinical Student Research Award

Elizabeth Margaret Ann Kelly is the 2024 Clinician Student Research Award recipient for her submission, "Early Dementia Care Through the Patient Portal". Her study analyzed medical advice portal messages of patients aged 65 or older in the first 12 months after a dementia diagnosis, sent from patients or caregivers to PCPs or dementia specialists. She found that understanding common topics addressed through this medium can inform technology- and portal-based strategies to improve dementia education and care while reducing clinician burden. A second-year medical



student at the University of Cincinnati College of Medicine, Ms. Kelly's dedication, creativity, and research acumen position her as an emerging leader in aging research and clinical care as her career progresses.

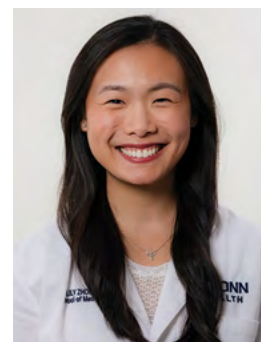
The Scientist-in-Training Research Award

This year's recipient of the Scientist-in-Training Research Award is **Christina Reppas, MD**, an early-career geriatrician and PhD student in clinical epidemiology and health care research at the University of Toronto. Her research is focused on improving delirium care for older adults and improving health care delivery to older adults whose preferred language is not English. In her recent study, "Association of non-English language with surgical wait time and post-operative outcomes among older adults with hip fracture", Dr. Reppas conducted a population-based, retrospective cohort study to see whether non-English preferred language was associated with prolonged surgical wait time and post-operative outcomes in older patients undergoing hip fracture repair. She has authored 23 peer-reviewed publications (13 as a first author) in high impact journals including *JAMA Network Open*, the *Journal of the American Geriatrics Society*, *Age and Ageing*, and *BMJ Open*. She co-authored a book chapter in "Hazzard's Geriatric Medicine and Gerontology" and has been awarded several honors including the prestigious Canadian Institutes of Health Research Vanier Graduate Scholarship. She is well positioned to lead a successful and productive career as a clinician scientist in geriatric medicine promoting functional and cognitive well-being and advancing the quality of aging for older adults.



The Edward Henderson Student Research Award

Lily Zhong, a third-year medical student at the University of Connecticut School of Medicine, is the 2024 Recipient of the Edward Henderson Student Research Award. Ms. Zhong is recognized for her leadership and proven commitment to geriatrics through her extensive scholarship in aging research. As an MSTAR Scholar at Harvard Medical School, she conducted a systematic review on the efficacy of cardiovascular interventions in frail patients, resulting in an AGS poster presentation and publication of a paper in *JAMA Cardiology*. She also co-authored a paper in the *Journal of Frailty and*



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WHY I'M AN AGS MEMBER

Mariu Duggan, MD

I've always had an affinity for older adults. As a little girl visiting nursing homes to play piano for the residents, I was so impressed that such a small thing, like playing a simple song (usually with a handful of wrong notes!), could bring such joy to the residents' faces and light up their lives—even if just for a moment.

In college, Lewy body dementia took the best of my Puerto Rican poet-grandfather's mind. Being hundreds of miles away, unable to help besides phone calls, I volunteered locally in Boston at a nursing home run by the Little Sisters of the Poor, who offer the neediest elders a home, caring for them as family. While visiting with residents weekly, I was inspired by the love that the sisters put into their care and by the great impact they had on residents through small acts of service and companionship.

As I progressed through my medical training, I kept coming back to the older adults and the impact that small acts with great love could have on their lives. I learned that by stepping back and taking a 50,000-foot view I can often see small things to tweak that would greatly enhance their quality of life. I became more and more interested in geriatrics from a cognitive standpoint through my education, but I can say that it originally started in the heart and out of an affinity for serving older adults.

Why did you first join the AGS?

I first joined the American Geriatrics Society during my first year of medical school because of my mentor, Dr. Jim Powers. Jim, still an active AGS member today, was my research mentor and a model physician. He brought the opportunity to start an AGS student chapter to my attention and that is where my involvement with

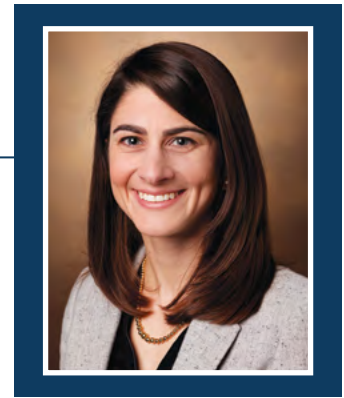
the AGS began. With his support, I started a student chapter at Vanderbilt University in Nashville, Tennessee. The chapter held a few events a year, learned about geriatrics together, and got to meet with different geriatricians.

My favorite aspect of being a member of the AGS?

When I was a Fellow, I attended my first AGS Annual Scientific Meeting. There, I was exposed to many of the offerings that the AGS provides and was able to meet people like me, who were in a similar place in their careers, education, and development as well as meet experts who were presenting about different innovations and cutting-edge advancements in the field.

The AGS Annual Scientific Meeting is one of my favorite parts of being an AGS member because it gives you the opportunity to connect with others and experience how wonderful the geriatrics community is—friendly, warm, supportive, and collaborative. Being able to connect and learn with others is so important, especially in our field, where there are so few geriatricians that we are often isolated and without a community of peers or mentors. The AGS Annual Meeting brings together geriatricians and geriatrics professionals alike for an incredibly edifying and communal experience.

My second favorite aspect of being a member of the AGS is the online community. I belong to a few different AGS online communities, where I get regular updates on recent posts through the Daily Digest email. I find these online communities to be a really great feature because not only can you ask a question and receive responses from others, but you can learn from other people's questions. It is a great way to regularly receive new information right to my inbox.



When COVID-19 first hit, I posted a question in the ADGAP online community looking for anyone who wanted to explore shared didactics for fellows. A response to that post connected five programs that together would start what would become Geri-A-FLOAT (GeriAtrics Fellows Learning Online And Together) with Anna Goroncy, MD, of the University of Cincinnati; Ryan Chippendale, MD, of Boston University; Josh Uy, MD, of the University of Pennsylvania; and Colleen Christmas, MD, of Johns Hopkins University. Geri-A-Float brings together fellows and faculty from across the country virtually to learn and to support each other. Geri-A-FLOAT makes cutting-edge knowledge accessible across programs by providing an opportunity for fellows to connect with experts and leaders in geriatrics from all over the country and sometimes the world. We've had participants from places like Africa, Mexico, Spain, and Turkey! Geri-A-FLOAT might not have ever come to be if it weren't for the AGS online community connecting me to others.

The teachers' section is great too. I always enjoy learning what other educators are doing across the country through their educator spotlight feature and their sessions during the annual meeting. I also enjoy AGS resources such as the *Geriatric Review Syllabus (GRS)* and *JAGS*, the premier journal for clinical aging research.

As a fellowship program director, it has been beneficial being able to connect with other fellowship program directors from across the country

through the ADGAP online community. That group does a pre-conference before the AGS Annual Meeting and attending those sessions has enabled me to learn about different ways to improve our local fellowship program. Folks share best practices that they have implemented, and we learn from and support each other.

In Closing..

Geriatrics is the best specialty. In my experience, geriatricians and geriatrics professionals are the most compassionate, holistic physicians that I've met, and the community is inviting, warm, and friendly. It has been neat to see the field advancing and becoming more embedded in other areas of medicine and the spread of initiatives like the Age-Friendly Health Systems. All of this coupled with meeting bright and driven learners from all over the country through Geri-A-FLOAT have made me very optimistic about the future of geriatrics. ♦



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2024 Award Recipients continued from page 17

Aging. In addition, she has made significant contributions to developing eFrailty (an educational website featuring 15 validated frailty calculators), presented two first-author case studies at the 2023 AGS Presidential Poster session, and is currently pioneering geocoded heat maps of frailty prevalence and social deprivation index in Medicare beneficiaries, altogether showcasing her commitment to advancing geriatrics research. Dr. Zhong has also served as the President of University of Connecticut's AGS Student Chapter for the past two years, where she has planned and managed various events from nursing home visits to expert geriatrician panel presentations for trainees. With her unwavering dedication to improving care of older adults, Dr. Zhong will continue to positively impact the lives of older adults.

Choosing Wisely Champion Award

The *Choosing Wisely*® Champions program helps expand the *Choosing Wisely*® campaign by highlighting stories of people whose leadership in choosing tests and treatments wisely has inspired others to promote high-quality, person-centered care. For the 2024 award, the AGS congratulates physical therapist, **Paras Goel, PT, DPT, Med, MBA, GCS**. Dr. Goel used *Choosing Wisely* in developing new protocols, leading educational sessions for colleagues, and initiating quality improvement projects in the San Jose, CA region. This led to improved patient outcomes and cost savings, reduced unnecessary interventions, and enhanced patient satisfaction. Dr. Goel is also involved in broader advocacy efforts and community outreach to promote *Choosing Wisely* principles. He plays an active role in leading, inspiring, and implementing these principles in his practice. ♦



AGS24 PRESIDENTIAL POSTER AWARD WINNERS

Congratulations to the following winners:

Case Series & Case Studies: **Margaret M Xu, MD**

Clinical Innovation: **Claudia Szlejf, MD**

Clinical Trials: **Patricia Hewston, PhD**

Epidemiology: **Nathan M. Stall, MD**

Ethics & Qualitative Research: **Lauren Yu**

Geriatric Bioscience: **Mary Caroline Kaufmann**

Geriatric Education: **Kahli Zietlow, MD**

Geriatric Medicine in Other Specialties: **Yi Wang**

Geriatric Syndromes: **Carla T Williams, MD**

Health Services & Policy Research: **Snigdha Jain, MD**

Neurologic & Behavioral Science: **Jayla Calhoun, MS**

Quality Measurement and Quality Improvement:

Lynn McNicoll MD, FRCPC, AGSF



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