GOOD afternoon and thanks for joining us. I'm Judy Simpson. It's no secret that a population is getting older. The aging demographic shift has major implications socially and economically and both the state and national level. This afternoon we're going to talk about aging and learn about the center for aging at the University of Vermont. Joining me is Dr. Bill Pendlebury. Dr. Pendlebury is a director of the center for aging and he also serves as the director of Memory Center at Fletcher Allen Healthcare. Welcome to you and thanks for being here. This is a major issue. There's a lot of the implications of the aging population. Can you talk a little bit about that?

Dr. Pendlebury: It's a well-known fact that over the next 20 to 30 years the population of people over the age of 65 is going to grow to about 25%. Currently, it's probably in the 12% range so it's going to double in the next 20 to 30 years. It's going to happen sooner in Vermont probably in the 20 year time. Not the 30 year time period. By one measurement that is median age for Vermont is already the second oldest state in the United States, and as a percentage of people over the age of 65 by about 2020 or 2025, we're going to be number six or seven, so we are aging very rapidly. Both locally and nationally, this has implications for entitlement programs such as Social Security, Medicare and also it's going to have a major impact on the delivery of Health Care in the United States.

Judy: Talk a little bit about some of the entitlements. As there are fewer younger people paying into the system, there are more older people who need the services?

Dr. Pendlebury: Exactly and that's the key points that as the ratio of the number of workers who are paying into programs like Social Security and Medicare is going down rather dramatically. It used to be in the teens per retired. The number of people working was in the teens for every retired person. It's now in the single digits and it's continuing to go down.

Judy: What about Health Care delivery? Are we going to have to change some of the ways that happen?

Dr. Pendlebury: I think the main implication for the aging population is related to dementia and disorders like Alzheimer's disease. We're clearly going to see a significant rise in the numbers of people who have dementia and to have a Alzheimer's disease and
that's going to generate a major expense for healthcare delivery in the United States over the next 20 to 30 years.

Judy.: Do you think there's going to be more of an emphasis to have people stay at home if they can?

Dr. Pendlebury.: No question about it and that's one of the things that we're working on at the center of aging is trying to develop strategies that allow people to live as independently but in a safe place for the vast majority of their life.

Judy.: So it's in this context that some of these issues that the center for aging was established?

Dr. Pendlebury.: Exactly the center of aging has a history at UVM that goes back to the seventies but we're really able to get off the ground in 2008 based on a generous gift from Lois McClure one of our local philanthropist. She's pictured on the screen here for our viewers. Based on her five million dollar gift to the University of Vermont we've been able to revitalize the center and begin to move our programs forward.

Judy.: Why is it important for UVM to have a center on aging?

Dr. Pendlebury.: I think for the reasons we've already discussed at the beginning of the program. We clearly have to have initiative that are going to in a positive way affect the quality of life for Elders and I think the center on aging is poised and already beginning to establish programs to help move that along. Not only within the university but also with partners in the community and with the state.

Judy.: What is the mission of the center?

Dr. Pendlebury.: I'm going to read that I haven't memorized it. The mission of the center on aging at the University of Vermont is to forge an ongoing collaboration among faculty students staffed and programs within the University of Vermont fletcher Allen healthcare and Vermont community to promote a sense of well-being and a high quality of life for older adults. The center seeks to engage interested parties who wish to partner in the development and execution of programs that facilitate the health and welfare of older adults.

Judy.: It's interesting that you mention the students to include them why is that so important?

Dr. Pendlebury.: I think one of the things that's going to have to happen over the next 20 years is to get more people interested in research education and employment around elder issues. One of the main goals of the center is to try to stimulate students both of the undergraduate and graduate levels to become interested in careers that will have an impact on Elders in hopefully a positive way.

Judy.: Who is involved in the center on aging?

Dr. Pendlebury.: Right now we're fairly small; the number of people working on a daily basis is five including myself our program manager and associate director for education an associate director for policy we also have a position, the associate director for research, but
presently that position is not filled because our associate director just left for another university so we're in the process of filling that position. We also have a group of people in the community who function as a community advisory council to make sure we stay on track and we have our priorities straight and we have a governance committee call the faculty executive committee that helps us govern the center.

Judy.: It sounds like a lot of what you do is to listen to what's actually going on in the community around you.

Dr. Pendlebury.: Exactly we definitely want to make sure that the work we are doing is focused in the correct way and we need our community partners to help us do that.

Judy.: Can you give me some of the examples of some of the things you're hearing?

Dr. Pendlebury.: We've been involved the number of programs both developed and in development. One example is a program called supports and services for at home which is a program that's being developed by a partnership with cathedral square corporation the VNA in the community health foundation. That program is basically a program to develop services to be proactive and preventative to make sure that Elders do not get into trouble in independent living situations and it keeps them out of the hospital out of the emergency room and out of nursing homes.

Judy.: Maybe you can talk a little bit about how important that is? Because once an elderly person has had a fall and ends up in the hospital there's a chain reaction of events that make it very hard for them to get back to the home setting.

Dr. Pendlebury.: Exactly so sash as is called supports and services at home is intended to direct intention of things like nutrition mobility social integration poly pharmacy depression and cognition so that those kind of issues are recognized early before it causes an elder to get into trouble. We provide services or sash provide services to maintain function at a high level as possible and to prevent things like falls which you said usually triggers a downward spiral.

Judy.: Can you describe the core initiatives that are sponsored by the center since it was started?

Dr. Pendlebury.: The three areas that were focused on include education policy and research. In the educational area we've developed symposia which we do on at least a yearly basis sometimes twice yearly the around the state to provide educational opportunities for people who are working with Elders and providing services around policy. We're trying to work with our community partners and with the state to develop good policy for dealing with aging issues and we're hoping that the center will become a clearinghouse at the university where we can begin to do collaborative studies around aging research.

Judy.: I would imagine from the state standpoint having this kind of a resource would be very important?

Dr. Pendlebury.: I think so. The university has great expertise in a number of areas related to aging and I think the state is looking to the university and center to provide collaboration and consultation around aging issues.
Judy.: Is this something that is happening in other states as well?

Dr. Pendlebury.: No question about it were actually a little bit behind. There are many will establish centers on aging at major universities around the United States doing exactly the same work that we're trying to build on here. So we have a lot of work to do but at least we've made a start thanks to Lois McClure.

Judy.: Do you think you mentioned education to do think this is going to become a growing area for young kids who are going to be coming into medical school? Do think there's going to be more interest in these issues?

Dr. Pendlebury.: I think there already is. Over the last several years the faculty at the college of medicine has done a much better job in educating our students around geriatric issues. I'm hopeful as the problem grows in terms of the shifting demographic that more medical students will choose careers in geriatric medicine.

Judy.: It will seem like they're certainly more to do and probably a lot more business.

Dr. Pendlebury.: Absolutely. No question about it.

Judy.: You mentioned one collaboration the center has. What some of the other organizations that are involved?

Dr. Pendlebury.: We partner with pace the program for all inclusive care for the elderly. We also have a major partnership in a relationship with the Alzheimer's Association and of course we partner with fletcher Allen in terms of elder Care Services trying to improve the in hospital care that Elders receive so that one of the goals is to get them in and out of the hospital as quickly as possible and make sure they don't develop things like delirium or have major setbacks that keep them in the hospital longer.

Judy.: Can you give me some examples of that what might be some setbacks?

Dr. Pendlebury.: Certainly delirium is a major issue. I like to tell people that the hospital is a bad place for Elders to be and it's a very chaotic and somewhat foreign environment and it's not uncommon for Elders who are used to our routine at home when they're hospitalized to develop delirium and it can be quite dangerous physically dangerous and it also prolongs hospitalization. Oftentimes Elders who developed a leery of and the hospital don't achieve their previous baseline and it makes going back home and being independent problematic.

Judy.: What kinds of things are under the delirium umbrella as far as how that relates to them being in the hospital?

Dr. Pendlebury.: They become very confused. Delirium is basically an acutely confused state. It's often the tip of the iceberg of someone who has developed early dementia and sometimes the way that dementia and Alzheimer's disease is diagnosed is based on an episode of delirium that occurs in a hospital.

Judy.: Interesting because you always think that your elder was in the hospital then they'd be safer.
Dr. Pendlebury.: I'd like to think so but again it's a very chaotic foreign environment particularly for elderly people. The best thing for Elders is set try to not go to the hospital in the first place. Obviously there times when a person has to go to the hospital and when they do we try to make the environment as comfortable as possible and avoid things like delirium.

Judy.: In the transition at home of course. Are family's equipped now to do that care as far as finishing their elder back into the home?

Dr. Pendlebury.: I think better than five and 10 years ago I think there's still some gaps and I think one of the things we have to build into the Healthcare System of programs that do help families transition Elders back to home. These are being created as we speak. A blueprint in the state is paying attention to that so I think those programs are going to grow and be more evident in the next few years.

Judy.: One of the initiatives that we didn't talk about is research day.

Dr. Pendlebury.: Right the center on aging does sponsor an annual research today in which we tried to encourage anybody who's doing aging research across the university to present their findings in a poster session usually in the afternoon and we tried to have a keynote speaker in the evening to round things out at the end of the day.

Judy.: What are some of the issues that you hear about in the initiatives that are happening?

Dr. Pendlebury.: Certainly there's a fair amount of research on going regarding dementia and Alzheimer's disease. Both clinical and more basic kinds of research across the campus and in the department's in the business school there's major research on going in terms of Elders in the workplace. Keeping Elders working longer new career opportunities for alders and then there's a whole host of so she logical research going on in the department of sociology.

Judy.: Excellent we should mention that these conferences that you have our yearly conferences.

Dr. Pendlebury.: Yearly conferences yes.

Judy.: So is there a way for people to get involved with the center on aging?

Dr. Pendlebury.: Certainly one way is to go to the united way of Chittenden county web site and click on volunteer now and that's a link that certainly very useful. Then the center on aging has its own web site which is now on the screen as well as a phone number if people want to get involved with what we're doing.

Judy.: What are some of the ways that people can help you out?

Dr. Pendlebury.: To give you a very good example we have two volunteers and maintain our web site. So we don't have to spend money on that. Jeannie Hutchins who's our program manager has devoted her time to being the webmaster and we needed to free that up so that's certainly one good example of how were being helped out by volunteers.
Judy.: Excellent. Before we run out of time I also want to note that Dr. Pendlebury is addressing Alzheimer's disease at the UVM community medical school. The community medical school seminars are held Tuesday night's at 630 at the UVM given medical building. Dr. Pendlebury seminar on all signers is on Tuesday, October 11. For more information you can check out the web site that is listed on your screen. Thank you so much for joining me today.

Dr. Pendlebury.: You're welcome Judy.

Judy.: That's our program for today I'm Judy Simpson we will see you again next time on across the fence.

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