



Care of Older People with HIV: Goals and Progress

18th Graying of HIV Symposium

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Weill Cornell Medicine
September 22, 2023



Get the facts. Learn about the prevention challenges. Find out what CDC is doing.

www.cdc.gov/hiv



Training Goals and Objectives

1. Learn how approaches to care of older people with HIV are evolving
2. Recognize the opportunities offered through new models of care

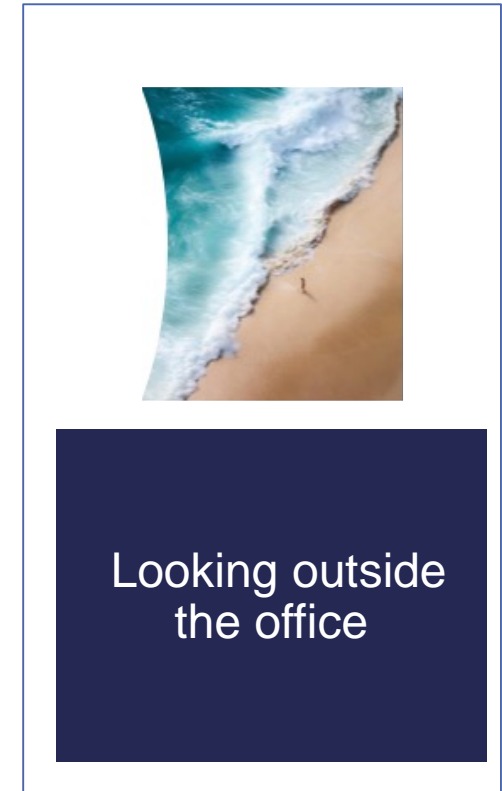
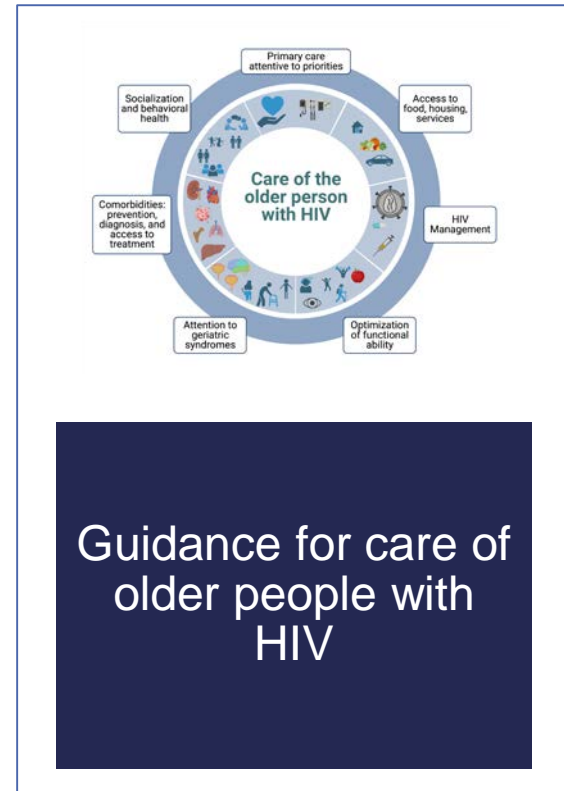
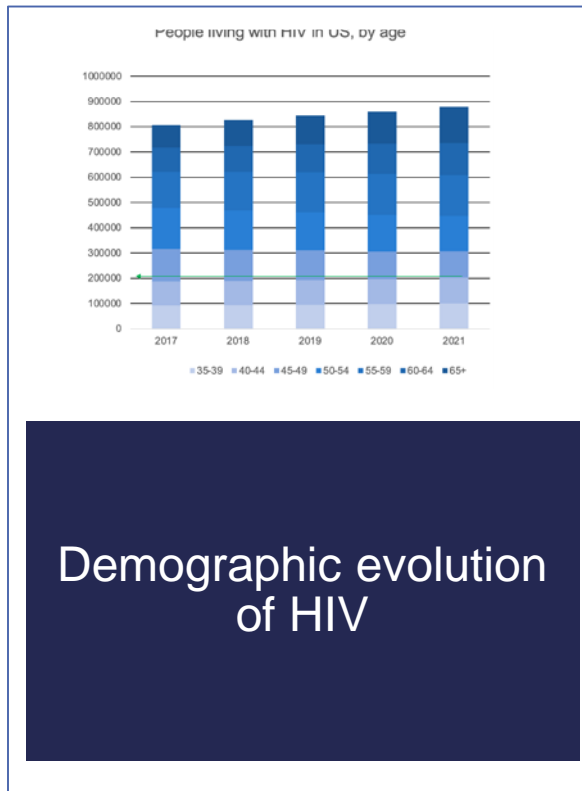


Disclosures

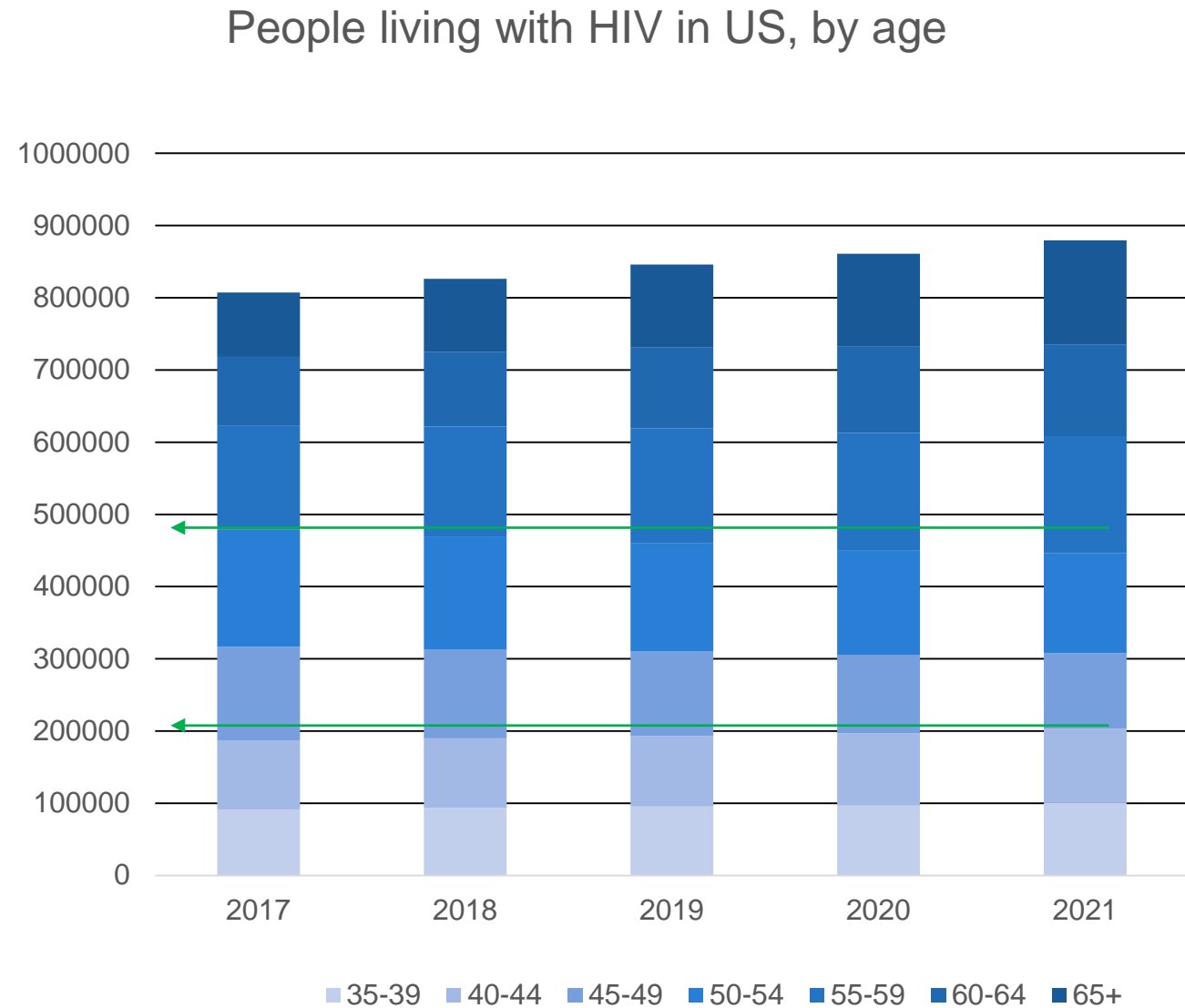
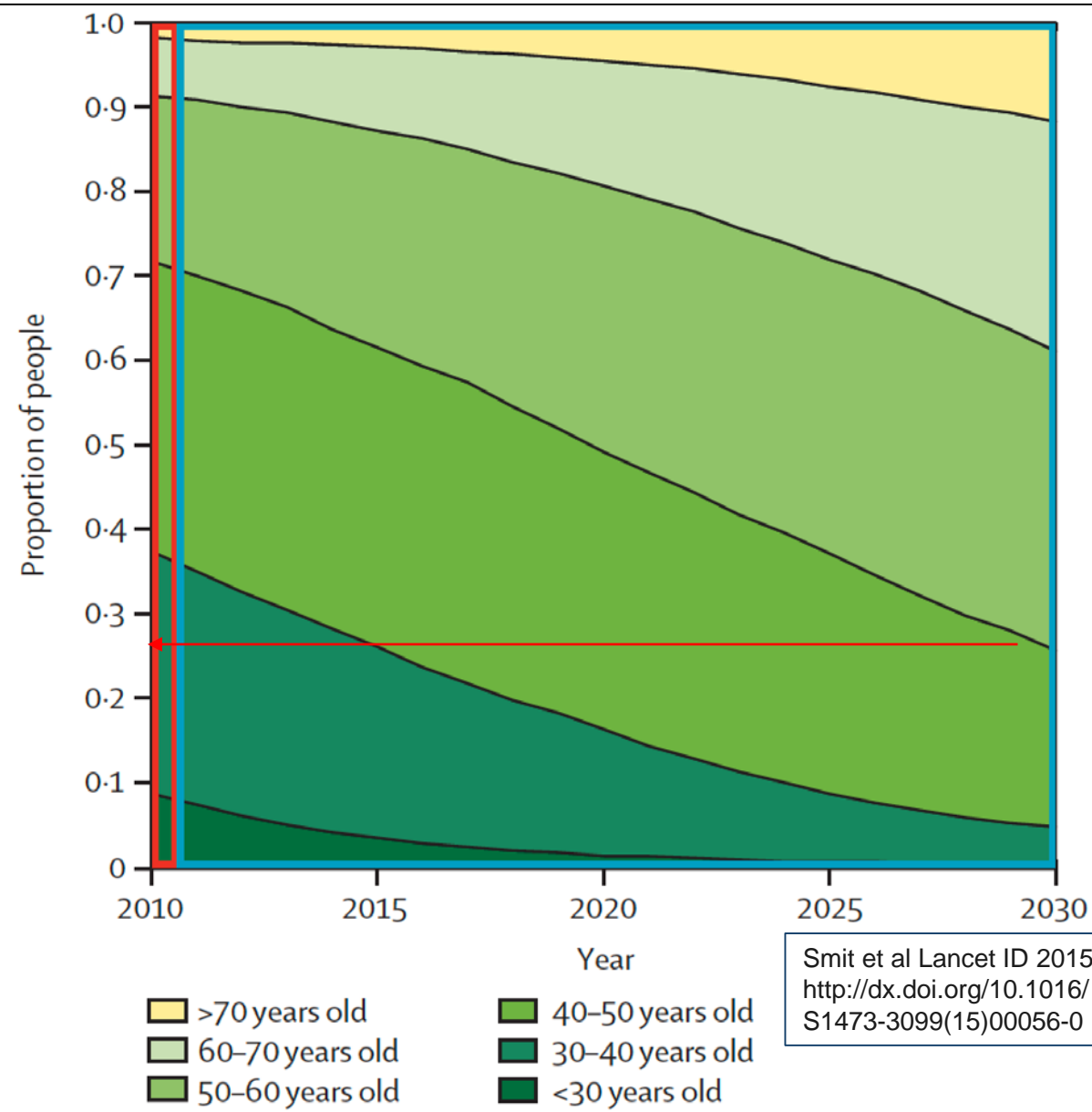
I am a consultant to the NYS DOH AIDS Institute Ryan White SPNS HRSA-22-027 and have support from the NIA.

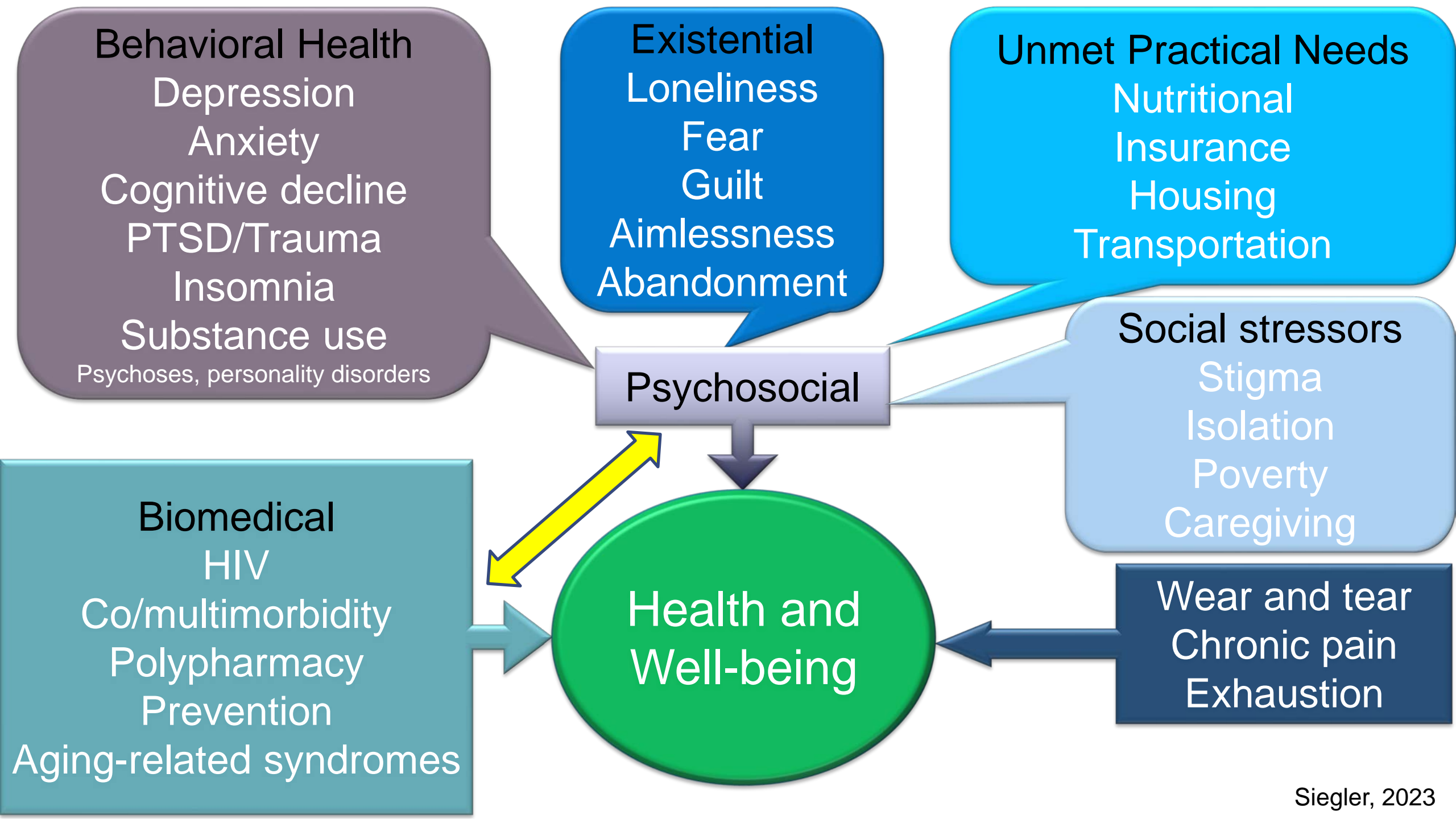


Care of older people with HIV: Where are we now? Where are we headed?



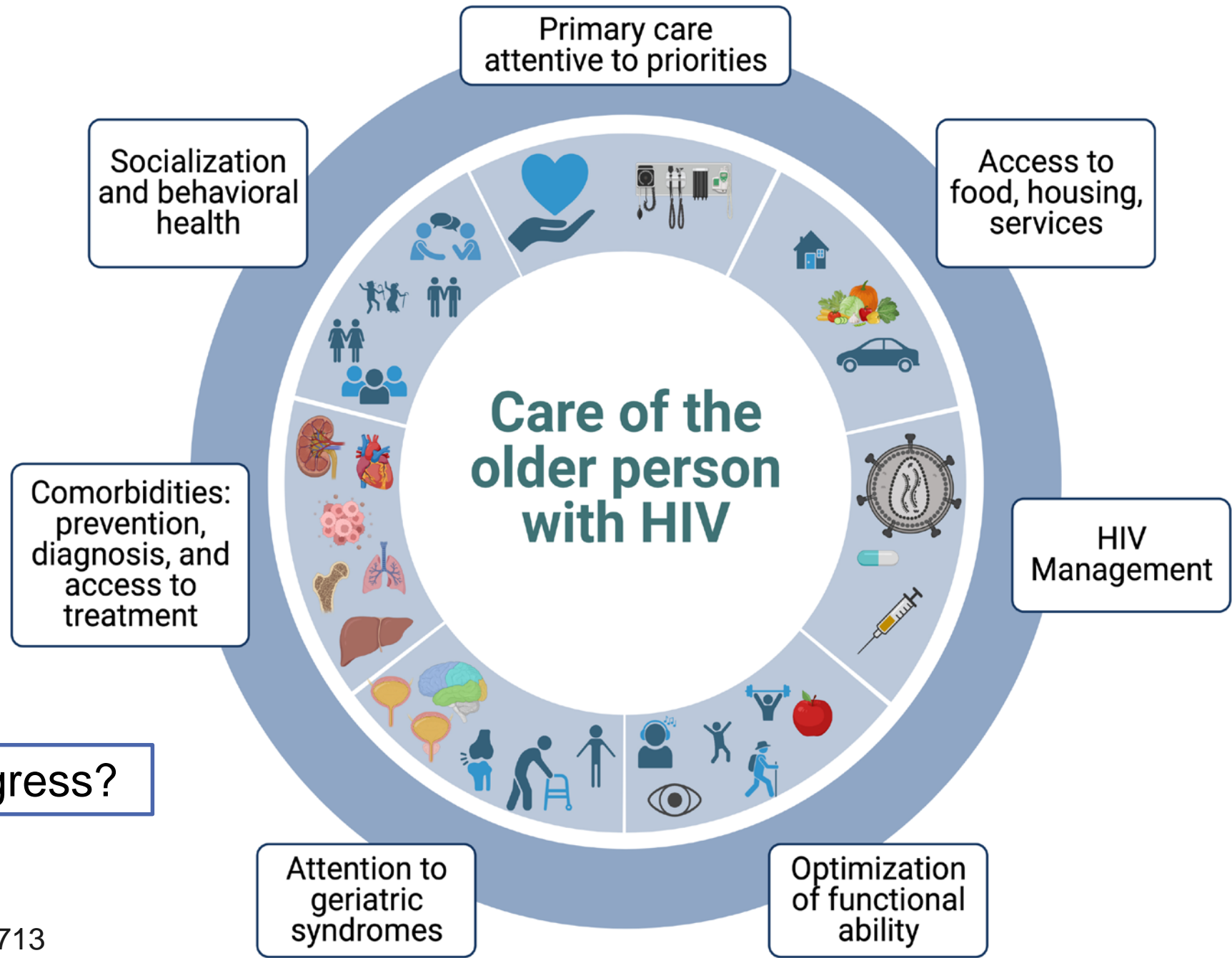
The population with HIV is still growing, and it is aging



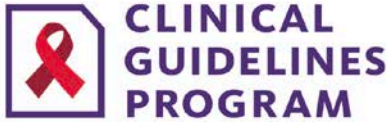


We first must translate needs into care domains

Where have we made progress?



The NYS AIDS Institute Clinical Guidelines Program has updated its HIV and Aging Guidance



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Search ...



<https://www.hivguidelines.org/hiv-care/aging-guidance/>



CLINICAL GUIDELINES PROGRAM

NEW YORK STATE DEPARTMENT OF HEALTH AIDS INSTITUTE | HIV · HCV · SUBSTANCE USE · LGBT HEALTH

Guidance: Addressing the Needs of Older Patients in HIV Care

Reviewed and updated: Eugenia L. Siegler, MD; May 5, 2023

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Committee: [Medical Care Criteria Committee](#)

Date of original publication: July 31, 2020

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We have encouraged providers to ask about:

HIV and Aging



<https://www.oar.nih.gov/nih-hiv-research-program/hiv-aging>



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ted with care



TAKING A SEXUAL HISTORY WITH OLDER ADULTS

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<https://www.youtube.com/watch?v=Ty32IH8Q43o>



We have clarified and de-emphasized the role of the 5Ms

mind
medications
morbidity
safety
most

The 5Ms were originally designed to explain geriatrics to others

JOURNAL OF THE AMERICAN GERIATRICS SOCIETY

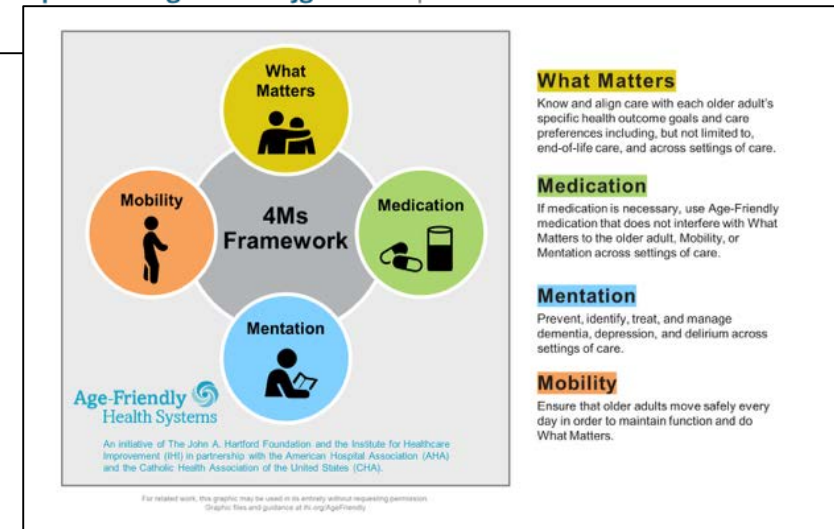
AGS Geriatrics Healthcare Professionals
Leading Change. Improving Care for Older Adults.

Letter to the Editor | [Free Access](#)

The Geriatrics 5M's: A New Way of Communicating What We Do

Mary Tinetti MD, Allen Huang MDCM, Frank Molnar MDCM

First published: 06 June 2017 | <https://doi.org/10.1111/jgs.14979> | Citations: 65



Modifiable has been proposed as a 6th M by Erlandson and Karris

<https://britishgeriatricsociety.wordpress.com/2017/10/13/the-geriatric-5ms-the-5-simple-words-every-geriatrician-needs-to-know-the-new-mantra/>



The 5Ms do not map perfectly onto functional domains



ADL

Ambulation
Bathing
Eating
Dressing
Grooming
Toilet

IADL

Finances
Food Preparation
Housekeeping
Laundry
Medication
Shopping
Telephone
Transportation

<https://britishgeriatricsociety.wordpress.com/2017/10/13/the-geriatric-5ms-the-5-simple-words-every-geriatrician-needs-to-know-the-new-mantra/>

The 5Ms can be very constraining

They don't offer structure for CGA

Use them as an explanatory framework



They can help you choose a screening tool, but they don't capture geriatric syndromes

Or as a communication tool



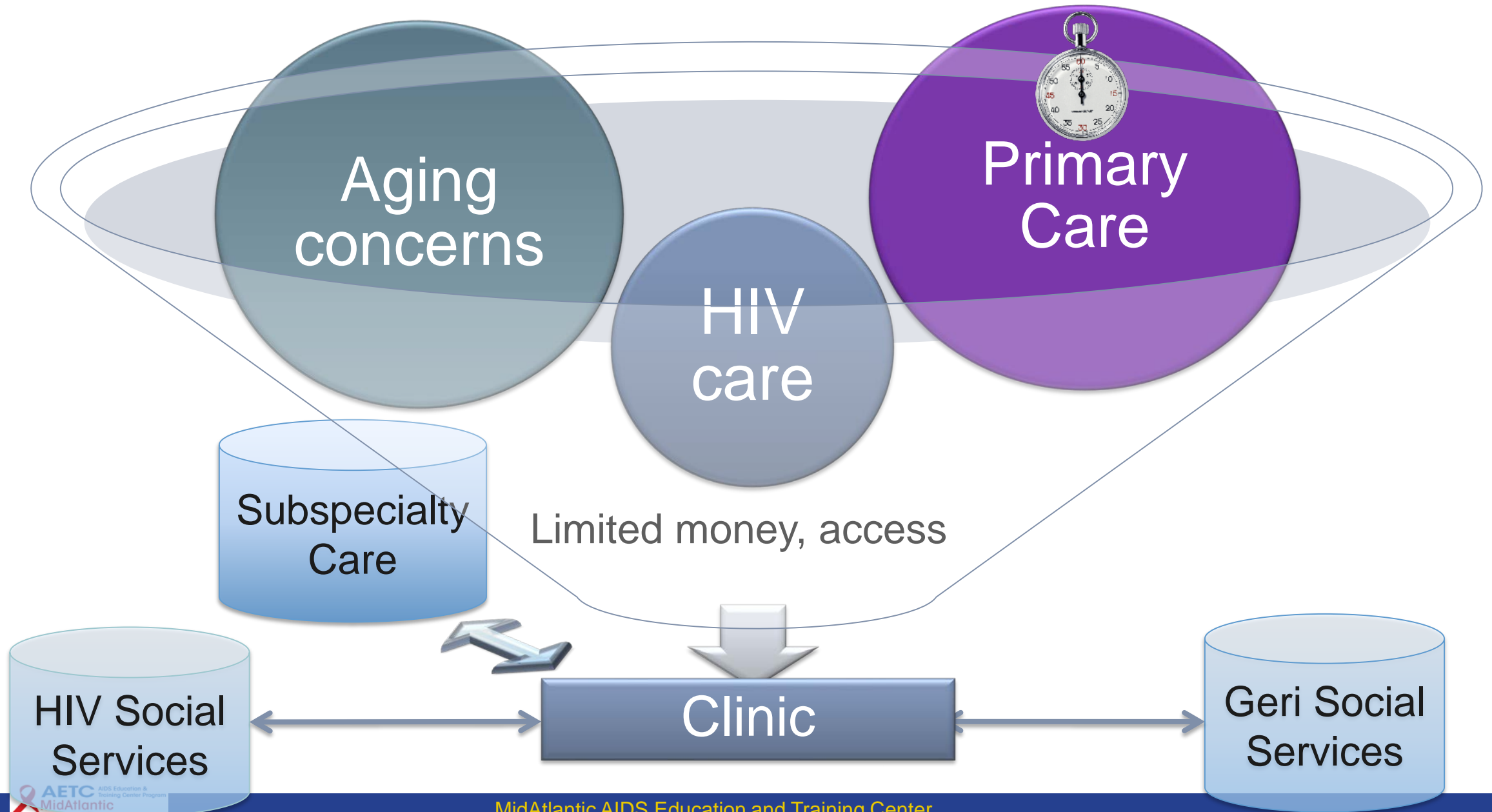
We have added more suggestions for good practice

- Taking a proactive approach to aging to help prevent or slow functional and social decline.
- Screening for frailty or functional decline to enable early identification of at-risk patients.
- Including nonpharmacologic measures, such as exercise, nutrition, and socialization is essential.
- Facilitating and simplifying access to care and services to improve overall adherence and satisfaction.

<https://www.hivguidelines.org/hiv-care/aging-guidance/>



How can aging concerns be addressed?



There are other ways to organize and provide care

Aging
concerns

HIV
care

Primary
Care

Subspecialty
care

Care coordination

HIV Social
Services

Geriatric Social
Services

There are many ways to integrate the components of care

Care
coordination

Food/
nutrition

Psychosocial
support

Comorbidity
management

Case
management

Housing/
legal

HIV care

Long term
Care

Mental
health

Substance
use services



Major funders are underwriting programs

What has changed?

- **Quantity and support** of educational content and technical assistance – fed, state, city
- **Commitment** to improve care
- **Funding** of demonstration projects in different sizes and locations

What are the roadblocks?

- Competition with **EHE** message
- Too many **silos**
- Too many **restrictions**
- Inadequate plans for **sustainability**



HRSA is funding a SPNS to develop HIV and Aging programs

- Boston Medical Center
- Mt. Sinai/Beth Israel
- Centro Ararat
- Colorado Health Network
- Empower U
- Family Health Centers of San Diego
- University of Chicago
- UPMC
- Wake Forest
- Yale

Number of PLWH 55+ per 100,000 population 55+, 2019

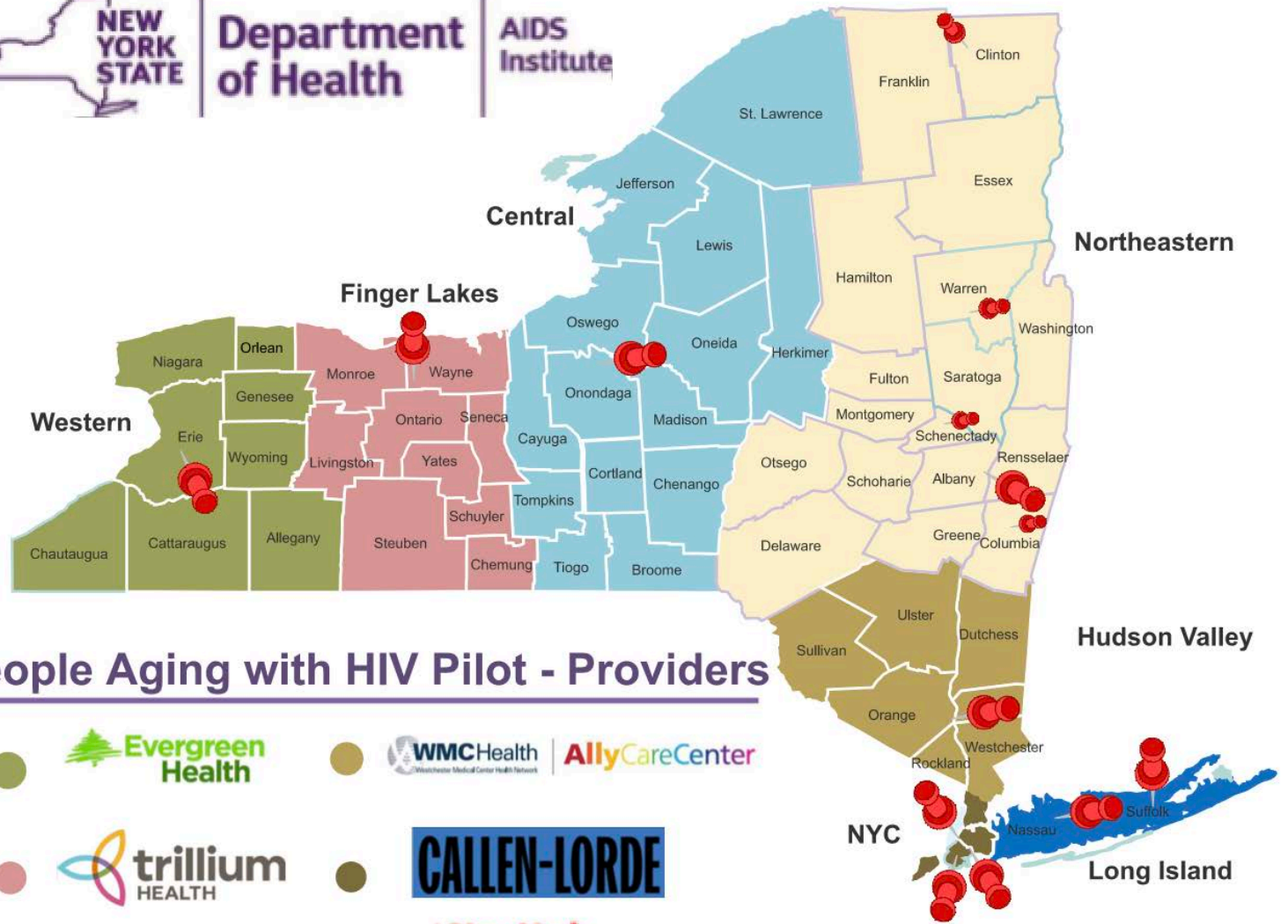


New York State is funding pilot programs



Department of Health

AIDS Institute



People Aging with HIV Pilot - Providers



Who is eligible?

- Adults over the age of 50, and
- Living with HIV/AIDS, and
- Income lower than 500% of the federal poverty level, and
- Residents of: Albany, Clinton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Otsego, Rensselaer, Saratoga.

Help for wherever you are



Care Coordination

Connecting you with care across multiple specialties and helping you stay on track.



Technology Coaching

Teaching you how to use the technology you need.



Health Education

Education groups to address the unique needs of people aging with HIV



Social Support Groups

Forum for group discussion about shared life experiences with topics relevant to aging with HIV.



Community Support Services

One-on-one support and resources from Community Support Specialists



Referrals

Referrals to internal and external resources to address the many challenges facing those aging with HIV

Aging Challenges

Published: June 13, 2023 • <https://www.hiv.gov/blog/hhs-announces-phase-1-winners-of-two-national-hiv-and-aging-challenges/>

HIV and Aging Challenge:
Innovations for Needs of People Aging with HIV/Long-term Survivors in Urban Communities

\$500,000 Rural HIV and Aging Challenge

- Community-driven solutions for older PWH
- Address non-biomedical needs
- Funded by the Minority HIV/AIDS Fund
- Challenges split into two phases:
 - First phase: \$15,000 each for design concept.
 - Second phase: Development of solutions; small-scale testing

Phase 1 Challenge Winners (in Urban communities)



<https://www.hiv.gov/blog/hhs-announces-phase-1-winners-of-two-national-hiv-and-aging-challenges/>



Phase 1 Challenge Winners (in Rural communities)

RURAL WINNERS



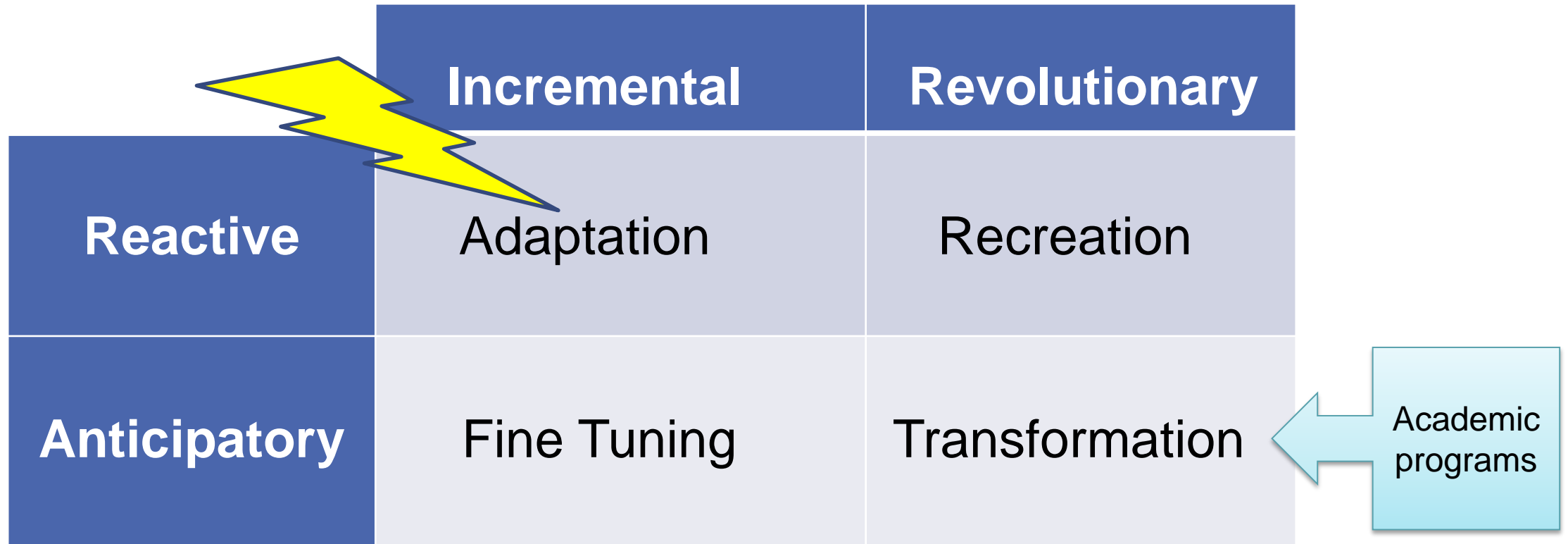
Not listed on map

- HUGS for Rural Caregivers of Loved Ones Aging with HIV & Dementia
- LiveStrong.AI - SMS AI ChatBot to Engage Those Living with HIV in Rural Areas

<https://www.hiv.gov/blog/hhs-announces-phase-1-winners-of-two-national-hiv-and-aging-challenges/>



Changing care: Models developed for large systems may not be successful in smaller clinics



Is a geriatrician necessary?

YES	No
They really understand aging-related problems	Our patients don't want to go to geriatricians (or yet another doctor)
They are trained in collaboration	Geriatricians may not know about HIV and aging
Medicare allows time-based billing	I can't find one
Their expertise is essential (?)	We can do this ourselves

We will never have enough geriatricians

Viewpoint

ONLINE FIRST

August 4, 2023

The Paradoxical Decline of Geriatric Medicine as a Profession

Jerry H. Gurwitz, MD¹

» Author Affiliations | Article Information

JAMA. Published online August 4, 2023. doi:10.1001/jama.2023.11110

<https://www.nrmp.org/wp-content/uploads/2023/04/2023-SMS-Results-and-Data-Book.pdf>

Fellowship Match Trends by Specialty and Appointment Year

Geriatric Medicine



In 2023:
ID: 441 positions, 328 filled
Cardiology: all 1152 filled

Other barriers to geriatric care



Inaccessibility



Lack of consensus

Patient reluctance



Lack of PCP interest

A geriatrician is not needed to implement a basic screen



daniel.belanger@health.ny.gov

Patient Name & DOB:	Screener Name:	Screening Complete?	Date:
MODIFIED WHO ICOPE SCREENING TOOL			
<i>Assess fully any domain with a checked box.</i>			
MEMORY	1. Remember three words: flower, door, rice (for example)		
	2. Orientation in time and space: What is the month, day, and year today? Where are you now (home, clinic, etc.)?		Wrong to either question or doesn't know
	3. Recalls all three words?		No
MOBILITY	1. Are you able to get around without difficulty?		No
	2. Do you require durable (e.g., cane, walker) medical equipment for moving around?		Yes
	3. <i>*In Person Only* Chair rise test: Rise from the chair five times without using arms. Did the person complete 5 chair rises within 14 seconds?</i>		No
NUTRITION	1. Weight: Have you unintentionally lost more than 3kg/6.6lbs over the last three months?		Yes
	2. Appetite: Have you experienced loss of appetite?		Yes
	3. Are you able to eat without difficulty?		No
VISION	1. Are you having trouble seeing, even when wearing glasses or contacts?		Yes
	2. Have you had an eye exam in the last 12 months?		No
HEARING	1. Are you having trouble hearing, even with hearing assistance (e.g., hearing aids)?		Yes
	2. <i>*In Person Only* Hears whispers (whisper test) OR Screening audiometry result is 35 dB or less OR Passes automated app-based digits-in-noise test</i>		No
MOOD	1. Over the past two weeks, have you been bothered by:		
	- Feeling down, depressed, or hopeless?		Yes
	- Little interest or pleasure in doing things?		Yes
	- Feeling lonely or isolated?		Yes
NOTES	<i>Space for other comments.</i>		

The WHO defines healthy aging as developing and maintaining the functional ability that fosters well being

KEY DOMAINS OF INTRINSIC CAPACITY

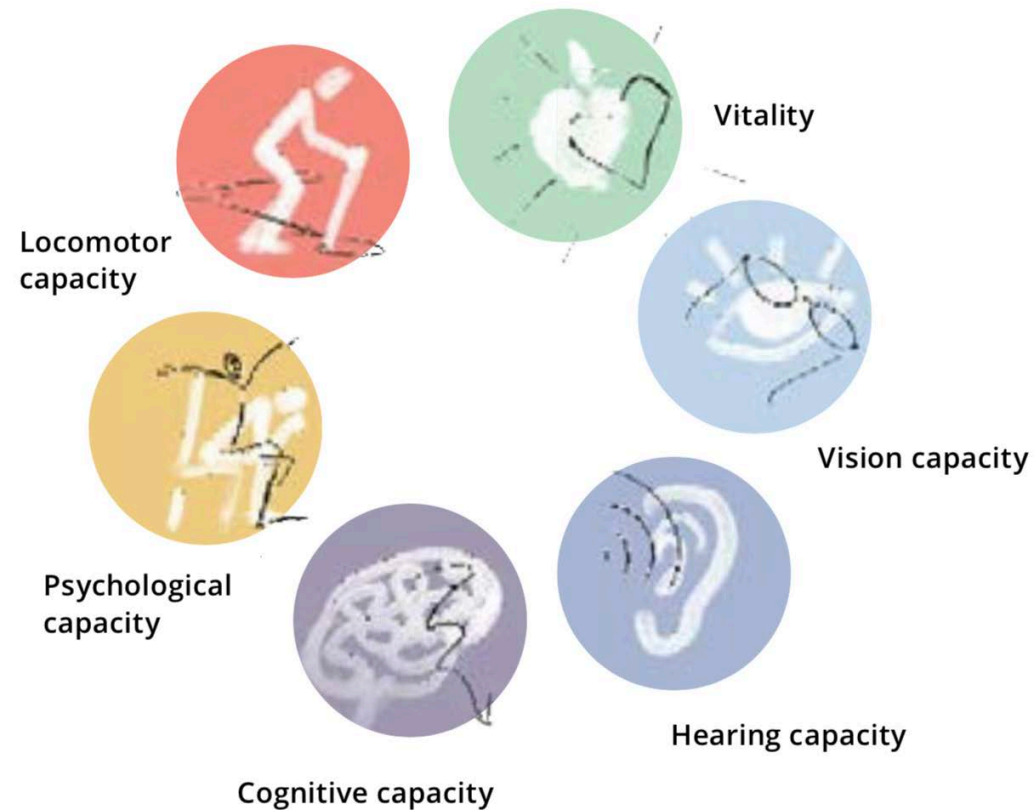
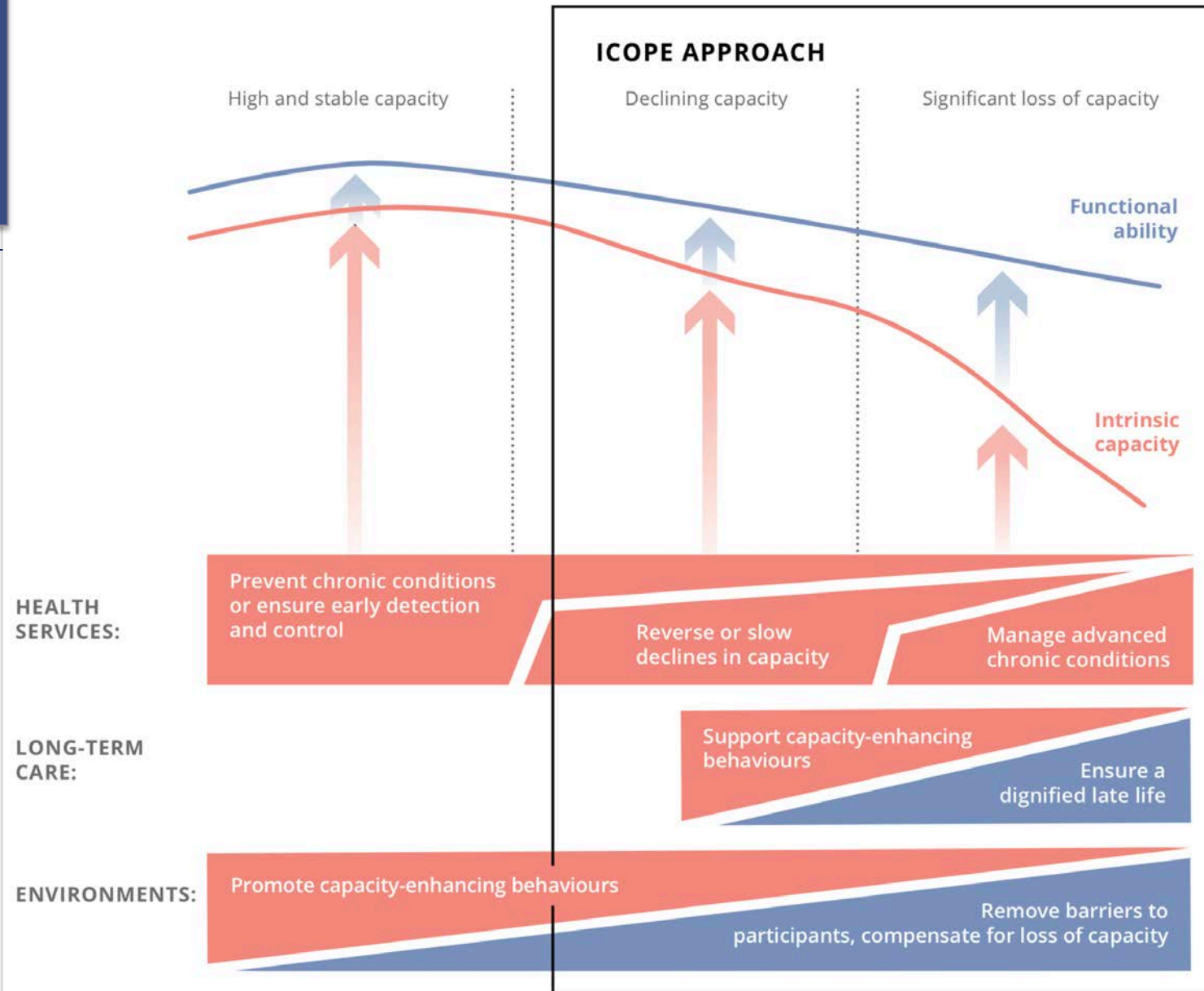


FIGURE 2. A PUBLIC-HEALTH FRAMEWORK FOR HEALTHY AGEING: OPPORTUNITIES FOR PUBLIC HEALTH ACTION ACROSS THE LIFE COURSE



Source: World Health Organization, 2015 (1).

We are encouraging the use of basic screens



daniel.belanger@health.ny.gov

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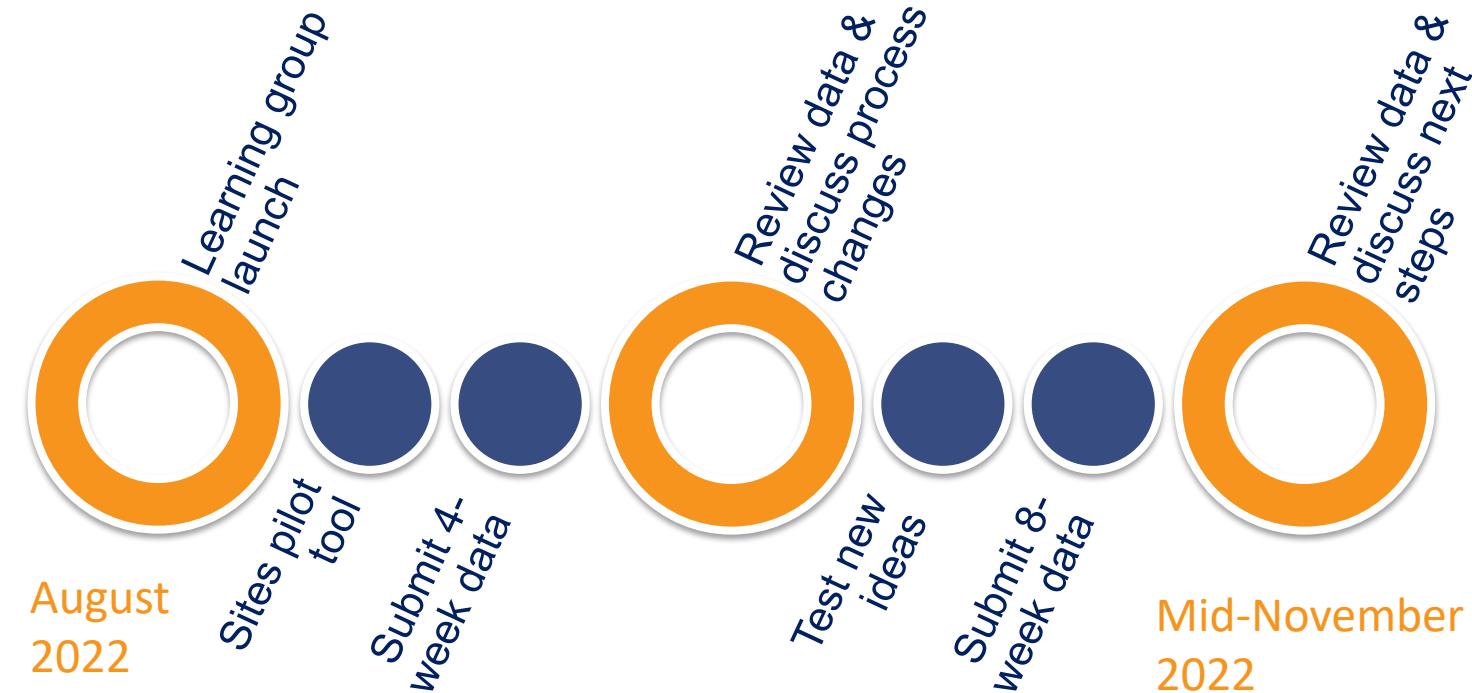
We recruited 14 sites in NYS to pilot a screening tool

Goal

To improve the quality of life and care outcomes for people aging with HIV and long-term survivors of HIV

Initiative

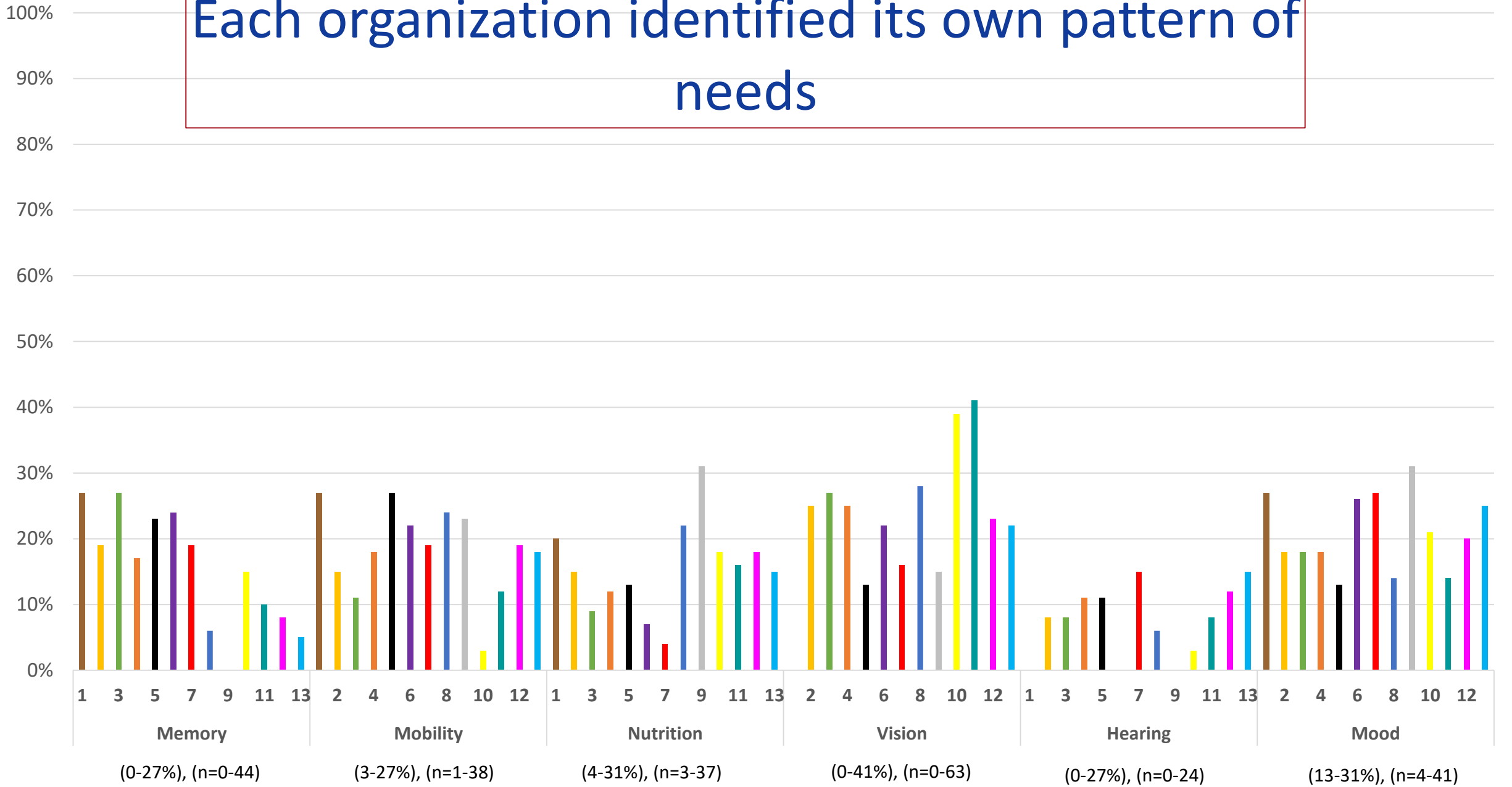
- Test tools and processes that screen PAWH & LTS for health issues and link to ancillary care
- 8-week pilot starting August 1, 2022
- 14 pilot sites - voluntary
- AI role – convener and data reporting



Belanger, 2023

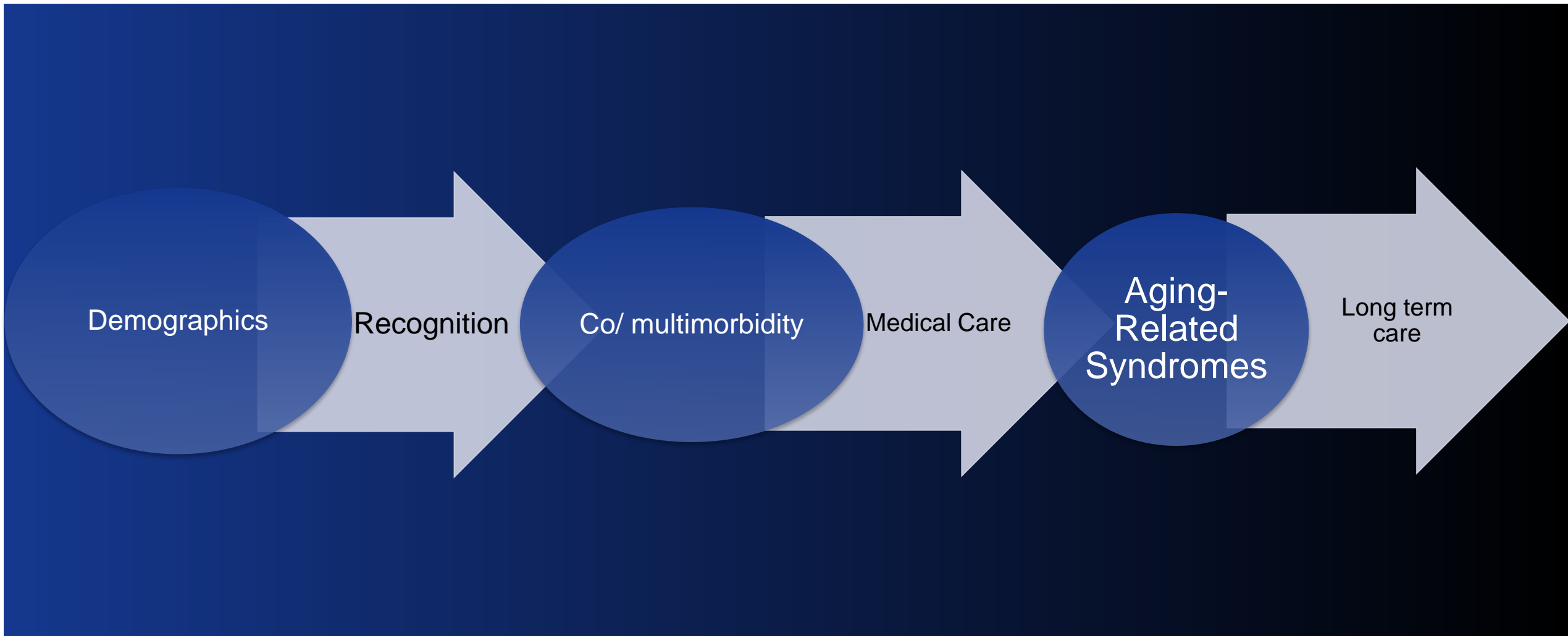


Each organization identified its own pattern of needs



Needs identified for each organization

We must prepare for the future even as we struggle to catch up with care needs now



Care must go beyond office based medical management

Any program can start providing geriatric care

1. Assess the clinic's ability to meet the needs of older patients with HIV
2. Engage older patients with HIV in program planning
3. Consider options and develop protocols for identifying patients in need of aging-related care and services
4. Develop an assessment strategy
5. Develop protocols for referral
6. Link to the Aging Network for services



Questions?

