- Als Job never gets old

As baby boomers head into retirement, geriatrics can help put a glow in those golden years

▶ The specialist: Dr. Al Siu on living longer

As the Ellen and Howard Katz chairman of the Geriatrics Department at Mount Sinai and the Bronx VA Medical Center, Al Siu runs a department that treats almost 5,000 elderly patients a year, 2,500 of them on an outpatient basis and 2,000 inpatient.

Who's at risk:

Geriatrics is the branch of medicine dedicated to improving health care for the elderly. No one is exempt from the risk of aging, but now doctors are paying attention to one group in particular. "The first baby boomer turned 60 about two years ago," says Siu. "We're very focused on that group; not so much because of problems they have when they're 60, but on preparing for their health-care needs when they're 80."

Americans are living longer and are healthier into their old age than ever before. Because of this, doctors don't all agree on an age cutoff that would define when a person becomes elderly. "Traditionally, elderly was 65, but that was because of retirement and Medicare," says Siu. "At 60, most people do not feel like they are senior citizens." At that age, many people are still relatively active. "That's why people say '60 is the new 50,'" he says.

Now, geriatricians are pushing to help improve patients' quality of life while in their 80s. "That's the decade when we really begin to see some of the burdens of physical and cognitive disorders," says Siu. "Yet we have some 80- and 90-year-olds who are perfectly intact, healthy and mobile." Siu includes himself in the generation that can hope to achieve unprecedented longevity: "The goal of most of us is to live into our 80s and 90s in good health."

But you shouldn't wait until you have Medicare benefits at 65 to start thinking about how to maximize health in old age. Your health and lifestyle habits in middle age will play a major role in affecting your health decades later. "People age 35-50 should have discussions with their doctor about their long-term health," says Siu. "Don't wait until you're 65, when you have your welcome-to-Medicare visit."

► Traditional treatment:

Geriatricians fight to improve their patients' health on two fronts: by preventing the onset of chronic conditions over the long term, then managing the complex care of

► What you can do:

Bring in all your medicines to the doctor's office.

It's essential that your doctor knows all the medications you take so he can consider possible drug interactions. "We find it very eye-opening when the visiting nurses go out to the home, and they tell us what's in the medicine cabinet," says Dr. Siu.

Control your blood pressure.

Managing hypertension is the most important thing you can do to prevent a stroke, an incredibly common medical emergency that can be very disabling.

Get screened for osteoporosis.

Doctors now have highly effective osteoporosis medications at their disposal, so by being screened, you give yourself the chance to receive early treatment — which can help protect you from hip fractures and broken bones in the future.

Get screened for colon cancer and breast cancer.

Early detection is your best chance for fighting these common cancers. "Medicine has come a long way to prevent mortality from these things," says Siu.



Dr. Al Siu urges middle-aged patients to think ahead about how they want to live in 10 to 20 years.

EMILY BURKE

these conditions when they do occur.

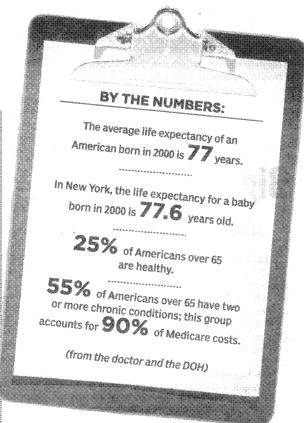
Chronic diseases pose the biggest health concerns for elderly people. "About 25% of the Medicare population — Americans over 65 — is healthy with no significant chronic conditions," says Siu. "In comparison, 55% of that population has two or more chronic conditions. That 55% accounts for 90% of all Medicare costs." Some of the most common and debilitating chronic diseases for elderly patients are heart disease, diabetes, arthritis, osteoporosis and chronic obstructive pulmonary disease.

Middle age is the time to meet with your doctor and discuss what you can do now to protect your health in old age. Siu puts long-term health issues into two groups: problems a doctor can help you with and problems that fall to the patient. "The doctor can help you manage your hypertension, lipids and cholesterol," says Siu. The doctor also can help you set up a screening schedule to make sure you're tested for osteoporosis and common cancers, like colon and breast cancer.

The patient has control over certain lifestyle changes that are essential for preventing the chronic diseases that disable so many elderly people. The big three steps are: quit smoking, lose weight and get exercise. Making these three changes is the most important thing you can do to guard against heart disease, diabetes, pulmonary disease and other disabling chronic conditions.

Maintaining physical activity into old age is another key habit for keeping fit and mobile. "There's a lot of evidence that physical activity can improve mobility in old age," says Siu. "There's even evidence that 80-year-olds can lift weights, or work with exercise bands, and gain improvements in their mobility."

Fear of falling leads some elderly people to abandon exercise. "The falls happen in doing commonplace activities, like getting up and going to the bathroom in the middle of



the night," says Siu. "Falls aren't happening in the middle of tai chi and during walking exercises."

For patients who are coping with multiple chronic conditions, geriatricians can oversee the treatment plan. "People with multiple conditions have to have multiple doctors, so a good chunk of the geriatrician's work is coordinating the other doctors' work and setting priorities," says Siu. "The goal is to help those who have multiple chronic conditions and improve their quality of life."

Research breakthroughs:

In the field of geriatrics, an important development is the new understanding of how much elderly patients can benefit from exercise. "There is accumulating evidence about the benefits of physical activity," says Siu. "Part of my department is the Martha Stewart Center for Living, an outpatient practice that's trying to change how medical care is delivered to the elderly. We have programs in tai chi and yoga."

Other promising research is being done on the genetics of aging and frailty. "One day, it could lead to therapeutics that mimic the effects of interventions that have been shown to prolong life span — such as caloric restriction," says Siu.

▶ Questions for your doctor:

Geriatric medicine is a field that proves the old saying "an ounce of prevention is worth a pound of cure." Dr.
Siu recommends that his middle-aged patients look way down the line and ask, "What can I do to prevent chronic conditions or disability 10 or 20 years from now? Are there preventive measures that I should be taking?" Making smart lifestyle decisions now can help you enjoy better quality of life down the road, he says.

Another good question as you think about long-term medical care is, "What are my options for an advanced directive?" in case of being incapacitated. Siu recommends that patients start thinking about advanced directives early, rather than waiting for an emergency to arise.

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