



Drug Take Back Day – Senior Care Corner Show Transcript

Barry: Welcome to the Senior Care Corner Show. I'm Barry.

Kathy: And I'm Kathy. Thanks for joining us.

Barry: You'll find us online at SeniorCareCorner.com with solutions, resources and information for family caregivers of senior adults.

Well Kathy, I think we've got another interesting episode for folks today. We've come across an even that isn't really well known and I think it should be because it's some important information. We'll talk about that and have a conversation with an expert in our feature segment. But before we get to that, I believe you have some news items for us?

Kathy: I do indeed have news items for you that I have searched long and hard to find that I thought would be of interest.

So here's our first one:

Studies Examine Doctor-Patient Communication about End of Life Care

Two recent studies found that a frank, honest discussion between a person and doctor can help terminally ill cancer patients make informed treatment choices that may lead to a better quality of life in the time remaining.

Researchers say that it is very helpful for conversations to happen relatively early, not in the last days of life or when the person is very sick but when there's still time to make informed decisions.

Doctors should listen to patients and help them think through their values so they can determine goals for medical care.

One of the studies measured the amount of aggressive end of life care received by terminally ill cancer patients. These aggressive actions were meant to prolong life not make the patient more comfortable. They included chemotherapy, multiple hospitalizations or ER visits during the last month of life, being hospitalized for at least 14 days in the final month of life, and an admission to the ICU with the use of resuscitation, ventilation or intubation.

Researchers point to the idea that aggressive care is life-prolonging and is potentially a misconception at the time spent in hospital is time not with family.



It's true many people want to feel they did everything and doctors should talk with patients about options to be sure they're understood and the choices are done with eyes open.

Terminally ill cancer patients who talk to their doctors about end of life care at least a month before they die are more likely to choose therapy that is less aggressive aimed at making them feel better rather than prolonging life. These people were more likely to receive hospice care where symptoms are managed and often aggressive therapy discontinued.

The discussion should be initiated by doctors soon after making a diagnosis of incurable cancer to give patients time to process choices about their care.

The second study found that many people thought that getting chemotherapy meant that their cancer could be cured -- 69% for lung cancer and 81% for colon cancer patients. People with advanced lung or colon cancer receiving chemotherapy will not likely be cured according to these researchers. It may relieve their symptoms and allow them to live weeks or months longer. Therefore researchers feel that a realistic understanding of the benefits of chemotherapy is needed to make an informed decision about treatments and possibly prepare for death.

Barry: Wow, that's a lot to think about at a rough time. But it's good information and hopefully family members will use that as a spring board to go out and learn more themselves.

Kathy: Right! And also have an open discussion with your doctor.

Our next news item:

New hybrid grapefruit developed in Florida

Many seniors have given up grapefruit to avoid potentially dangerous interactions with their prescription medications. They may soon be able to enjoy this fruit again without risk.

New hybrid grapefruit developed in Florida were found to have very low levels of the organic compounds that cause what is called the "grapefruit juice effect".

More than 85 drugs may interact with standard grapefruit, 43 with serious effects. Among the drugs that interact with grapefruit include cholesterol lowering statins, some cancer and heart drugs and antibiotics.

Chemicals in grapefruit are thought to inhibit enzymes from breaking down certain medications resulting in a higher concentration of these drugs entering the blood stream causing an overdose.



The new hybrid grapefruit known as UF914 was found to have a small fraction of this chemical compared to standard grapefruit. Also found not to cause the same harmful side effects.

The new hybrid grapefruit will need to undergo human testing to be absolutely sure of its effects.

The researchers are in the process of commercializing the hybrid which is a cross between pomelos and red grapefruit to go into production likely seven years from now. The hybrid was created not thinking it would be used for those currently avoiding grapefruit, but to find a variety that was sweeter and less bitter.

It is also a seedless fruit, larger and juicier than standard grapefruit that has been well received even by people who don't like grapefruit.

Barry: That's interesting. I didn't realize there were foods that you had to avoid with certain drugs, so that's informative on two accounts.

Kathy: So many people are avoiding grapefruit. Our third news item:

Age related Height Loss linked to Cognitive Health

Researchers from the University of Southern California have identified surprising factors linked to how we shrink as we grow older.

The overall height loss for men is 3.3 cm (1.3 in) and 3.8 cm (1.5 in) for women.

Using data from more than 17,000 adults beginning at age 45, they found that adult lifestyle choices and not just the body we're given influence how much height we lose as we age.

Investigators in the study state that it's not only early-life events but also health decisions later in life that affect our loss of height.

They also find an especially strong relationship between height loss and cognitive health. Participants who lost more height were also much more likely to perform poorly on standard tests of cognitive health including short term memory, ability to perform basic math and awareness of the date.

Some other factors linked to height loss included:

- Less height loss in urban dwellers than rural dwellers.
- Completion of primary school was associated with less shrinkage in both men and women

- But completing high school meant an addition 1 cm less in shrinkage.

People do shrink differentially. All humans go through physical changes with age such as increasing body fat and decreasing bone mass. Decreased height is made worse by arthritis, inflammation of the spine and joints or osteoporosis which are all affected by diet, exercise levels and smoking.

Barry: You mean it really is possible that my grandparents got shorter? You know we joked about it all the time but we thought that it was just that we were getting bigger.

Kathy: No, they were shrinking. Our final news item today:

More Dietary Fiber May Help Thwart Stroke

According to a new study tracked over more than twenty years, eating more fiber-rich foods appears to lower stroke risk.

For every 7 gram bump in daily fiber intake, the risk for experiencing an initial stroke appears to drop by 7%.

Researchers stress the importance of this data because most people do not eat enough fiber rich foods. Total intake of dietary fiber should be 25 - 30 grams a day from food but more people average half this amount every day.

It's thought that increasing by 7 grams a day would not be difficult as there is a wide range of every day foods to help people reach their goal. Fiber rich foods include whole wheat pasta, fruit, nuts, vegetables, and whole grains. These foods can curb key factors that raise stroke risk such as high blood pressure and elevated bad cholesterol or LDL.

The overall conclusion was that the more total dietary fiber eaten, the lower the risk of a first stroke. They found no particular fiber rich food giving the most benefit. They did feel that fiber supplements would provide the same benefit as eating fiber rich foods since the amount of total fiber was found to be of benefit.

Easy changes include switching from white to whole wheat bread, from cornflakes to bran flakes or whole fruit instead of juice. The goal is to eat four to five cups of fruit every day, and making half your grains whole grains. Dietitians say they know this works and encourage food sources of fiber since they also contain other nutrients for good health compared to fiber supplements.

Barry: Interesting, well you really gave us a lot to think about with these news items today Kathy. Brains are on overload here now.

Well we're going to give you even more to think about with our feature segment here folks.



We often hear people talk about how many prescription drugs they have and especially their older loved ones have in the medicine cabinet and how they've accumulated them over time and they just don't know what to do with them. Well that's become an increasing problem now especially with teens taking those and using them for purposes for which they're really not supposed to be used. And the fact that taking drugs that are expired can often be harmful for those who we love.

The industry together with the DEA has addressed that the last few years with the National Take Back Initiative; to take back those drugs that are no longer being used or are expired. For 2013, the Take Back is April 27 and there are a number of locations that we'll talk about in a few minutes. But to learn more about this, we had a conversation with a real expert, Dr. Carmen Catizone, the executive director of the National Association of Boards of Pharmacy.

Now this we found as a very interesting organization because the purpose is to assist the state boards of pharmacy and to protecting health and welfare. We found that, you know, it was really interesting that a national organization there to assist state agencies. And they also want to serve as an information and disciplinary clearing house for transfer of licensing among the states and provide model regulations for the states to use.

Now Dr. Catizone himself is the executive director and he graduated from the College of Pharmacy at the University of Illinois at Chicago. We were fortunate to get a conversation with him a couple days ago, which we recorded. We're going to go ahead and play that conversation now.

Begin Recording

Valerie Cardaci: On the line we have Barry and Kathy from Senior Care Corner and Dr. Catizone, the executive director of National Association of Boards of Pharmacy who is also a licensed pharmacist. And he'll be taking Barry and Kathy's questions today. We'll be doing this to help spread awareness about ways we can properly dispose of our prescription medications once they are no longer needed. Let's get started! Barry, why don't you kick things off with your first question?

Barry: Well Dr. Catizone we were wondering and we ask this of everybody with whom we talk just because there's usual an interest, what got you involved with this initiative?

Dr. Catizone: Well Barry, we, one of our primary purposes is to assist the states in protecting the public. So ensuring that people take the prescription medications appropriately and then disposing of those was the primary reason. One of the overriding reasons and probably the most important was that we're facing a significant epidemic with prescription drug abuse. And too many patients are being injured and even dying



from prescription misuse. And much of this misuse is occurring because people are not disposing of their medicines properly or leaving medicines in their medicine cabinet and other members of their family or other people that have access to their homes are taking those medications and using them inappropriately and that inappropriate use is resulting in a significant problem here in the United States.

Barry: Well what exactly is Drug Take Back Day and how did it get started?

Dr. Catizone: The Drug Take Back Day is a relatively new concept and it's something that the individual states and the Drug Enforcement Administration has put together because patients were coming to pharmacies and they were coming to law enforcement officials and they were saying "we have all these medications. We don't know what to do with them. And we hear conflicting reports as to what we're supposed to do to get rid of them. Some people tell us we can simply flush them down the toilet while others say we're supposed to mix them with coffee grinds and dispose of them in the garbage. And others are telling us that all those methods are detrimental to the environment and we shouldn't do any of those methods in order to dispose of our medications. So what are we to do?"

In response to that question, the DEA and the state agencies have put together programs where they set up centers where patients can bring their medications and without any question, without an inventory simply drop off those medications at those centers to the appropriate law enforcement officials. And those centers and those officials will then take those medications and dispose of them properly through EPA-Environmental Protection Agency approved sites as well as methods so that there's no danger to the environment and no danger to anyone that may be handling those medications.

Kathy: That is important. Why, why should seniors and their family caregivers be concerned and want to take part?

Dr. Catizone: It's a critical issue for seniors for a couple of reasons. One I know that people are facing a real dilemma with trying to afford medications in some cases and trying to make ends meet with some other expenses and so sometimes people will get a prescription particularly seniors and they'll hold onto that medication in case they need it again. And in some cases that may be appropriate if they have a medication that doesn't expire or doesn't change over time that may be okay; but for the overwhelming majority and just as a general rule, probably not good to save those medications. So when seniors save those medications, things could happen with the medications break down and they become dangerous or they cause a senior citizen to become ill. Or the issue that we're talking about if they're left in their medicine cabinets and somebody has access to them, their grandchildren or someone else that doesn't realize that these are dangerous products; and they take those medications and are harmed. That's something



that we want to prevent and I think something that senior citizens are very concerned about and want to make sure they avoid happening.

Kathy: And that is happening. I hear of that through people that I meet that grandchildren especially older grandchildren coming in and taking away their medication.

Dr. Catizone: Unfortunately, it's a situation that we hear far too often and it touches so many homes and there's at least one person that you know that that's happened to or they had their grandchildren over just for a split second, they've lost contact with them or went to do something and in that short span of time; that grandchild has gotten into those medications or they've been in the cabinet or on the shelf or somewhere else. And just that split second of period they're able to swallow a bottle of pills and then it's an emergency situation that never should've happened.

Kathy: Right.

Barry: And it's just that same person who might have you know, even days or weeks before said "You know, I think I'm going to hold onto this just in case I need it again."

Dr. Catizone: Right.

Barry: You hear that as well.

Dr. Catizone: Right.

Barry: How can caregivers find a collection site near them?

Dr. Catizone: Now whenever there's going to be a Take Day Back or whenever there's a collection site that's operational, it's really publicized well in local newspapers sometimes it's on the televisions, news stations but what they could always do if they can't see any information through those sources is call their State Board of Pharmacy. And their State Board of Pharmacy, their phone number and their information is available via the internet or available anytime that they would call a general government information number and they can check with their Board of Pharmacy and they'll know where those drop-off sites are or when those Take Back days are occurring.

Barry: That's very helpful that you want to make sure people get all that information. While we've got you here, we're hoping that you can answer another question that comes up for us quite a bit and especially of late. Should seniors and their family members be concerned about the information contained on the labels of the prescription containers? We get the question a lot because there's a concern that there may be other medical or other personal data on there that somebody fishing through the trash could get a hold of and get information we don't want them to have.



Dr. Catizone: That's a great question and a concern. Maybe ten years ago they wouldn't have had to worry about this issue but today it's a real issue because any information on that vial talks about what medications you're taking, or what your doctor's name is, or your name or address can be misused by people going through the trash. And so seniors and everyone should take great care of disposing of those vials. The labels are usually placed on there with some sort of adhesive or tape. However you can take that label off and cut it up or block it out with a magic marker or some other device; that the advice we'd give to people because if someone finds that information, just by the name of the medication alone, they may be able to tell what type of disease or what type of symptom that person has. And if they have that and they have the doctor's name and the patient's address, they have enough personal information about that patient to do things with it that they shouldn't and things that no one would really think of unless they are trying to do them for the wrong purposes.

Kathy: Would you recommend then that seniors take their empty containers also to these Drug Take Back Days?

Dr. Catizone: Yes because those will all be disposed of. That's great advice. They'll be incinerated and all that information will be protected and destroyed.

Kathy: Good.

Dr. Catizone: I would never put it in the trash with the normal garbage and hope that hiding it at the bottom of the bag or putting some newspaper on it would be safe; because people nowadays are going to great lengths to try to find out this type of information and that's not the method that's going to protect people from keeping that information confidential.

Barry: It's like you said, ten years ago it would not have been a concern. Now I guess we've got to be worried about everything.

Dr. Catizone: It's so true Barry. It's such a changed world. And some of the things that you imagine or don't imagine people doing, they are doing and they're taking advantage of unfortunately the senior citizens are the group of people that they try to pry on the most.

Kathy: That's true. So let me just kind of reiterate some things because I think this is what I hear a lot and it's very important. We don't want anyone to dispose of their prescription medications down the toilet anymore, correct?

Dr. Catizone: Correct.



Kathy: So they really need to find a Drug Take Back Day in their area or is there another way if there isn't one close to them that they can dispose of the prescription drugs?

Dr. Catizone: Yes, the other recommended advice is for them to mix those medicines up, crush them if they can, with coffee grounds or cat litter and then put that into some kind of plastic bag or container and then dispose of that in the trash. The idea there is that mixing it with the coffee grounds or the cat litter will destroy the medication so if somebody actually had access to it and it would take away that potency and take away the harm it may cause or take away the ability for it to be abused. It's also thought by doing that that some of the chemicals that may cause cancer or some of the problems that the Environmental Protection Agency have would also be mitigated or lessened to some extent; and so that's another acceptable but not as acceptable as the take back programs.

Kathy: Right, that's their first line of defense. Get in touch with the Take Back Program.

Barry: And I guess even there isn't a Take Back Day near them, this is a great avenue to educate a large number of people so it's a fantastic idea and we appreciate you doing it.

Dr. Catizone: Oh it's my pleasure. Any time we can help and anything that we can do to make sure people take their medicines correctly and that we can avoid some of the problems that we're seeing, that's what we're here for.

Barry: Well we really appreciate your time today and we'd love to help you spread the word and we're going to do that and get it out there and let's hope that we can catch everybody before they do something that they'd rather not do or see the drugs end up in the wrong hands.

Dr. Catizone: Well thank you Barry and Kathy for this opportunity. And thank you for all that you're doing to get the message out and helping to keep people safe.

Kathy: Our pleasure, thank you.

End Recording

Barry: Well I hope you found that discussion with Dr. Catizone as informative as we did. One thing that we did find afterword in going out onto the DEA's site; they have a page that you can go and put in your location and find out if there are any Take Back locations near you for the Take Back Day. We found some near us and some around so there are a number of those. And we'll go ahead and put a link to that as well as putting a link to the Take Back Day page in the show notes here.

Now Kathy, why don't you wrap us up with your quick tip?



Kathy: I will and keeping in the topic today, our quick tip:

Safety Tips for You and Your Senior Loved One when Using Prescription Medications - How to Prevent Poisoning

Each day more than 87 people die and over 2200 are treated in the emergency room for poisoning, most in the home. Here are some tips to follow to help keep your senior safe.

These tips for safe drug and medication use come from the American Association of Poison Control Centers:

1. Only take prescription medications that are prescribed to YOU by your healthcare professional.
2. Always follow the instructions, don't take more or less dosage or more frequent doses of your prescription medications especially for those intended for pain.
3. Don't share or sell your prescription drugs.
4. Be aware of the warnings on the labels and follow the precautions.
5. Keep medicine in their original containers out of reach of children.
6. Participate in the National Drug Take Back Days in your community.
7. Follow federal guidelines for how to dispose of unused, unneeded or expired prescription drugs.

We'll give you information specific to that in the show notes today.

And remember if a poisoning occurs: remain calm.

If the victim has collapsed or is not breathing, call 911.

If the victim is awake and alert dial 1-800-222-1222 for the poison control center.

We'll put that up in our show notes too.

Barry: Well Kathy, is it just a coincidence that you had that after our discussion with Dr. Catizone?

Kathy: Naturally.

Barry: (laughs) Thank you for joining us here at the Senior Care Corner show folks. We hope you found it informative, if you're like me your brain is on overload right now with all this information we took in. We've got a lot there in the show notes for you so you can follow up and of course, check back soon and we'll have a transcript if you'd like to see a lot of that in writing.



Don't forget to stop by and see us at SeniorCareCorner.com. Again you look for this episode and that's where the transcript will be. Also you can check us out and leave your comments with us and thoughts for future episodes on our Facebook page at Senior Care corner. And again stop by the Senior Care Corner Bookstore for some more resources that you can use to learn about becoming a more effective caregiver but also again caring for yourself as a caregiver.

We'll leave you with this thought: Keep in mind the Drug Take Back Day, find out where there is one in your community, go through not just your senior loved one's medicine cabinet but also your own just to see what might be there that you don't want to have there anymore. There are too many dangerous things that can happen now with unused and unneeded drugs, so we ought to go ahead and get rid of them.

And until we talk to you next time we hope you have a great day.