# GAPNA Contemporary Pharmacology and Prescribing in Older Adults Conference

Event Agenda

Friday, March 27, 2015 at 7:45am ET - Saturday, March 28, 2015 at 4:00pm ET

### 1 All times listed in Eastern Time (US & Canada).

Friday, March 27, 2015

7:45am - 6:30pm Registration Open

7:45am - 8:45am Continental Breakfast/Networking

#### 8:45am - 10:15am

**101: Pharmacogenomics:What'sinYourGenes Matters!** Calvin H. Knowlton, PhD, MDiv, BSPharm 1.5 CE Credits

In order to reduce medication misadventures, especially preventable adverse drug events, the migration from preference-based and evidencebased (or population-based) medication selection to personalization of such incorporates an array of science-centered components, including pharmacogenomics. This session will explore an overview of these components, while discussing in-depth the emerging domain of pharmacogenomics.

# 10:15am - 10:45am Coffee Break/Networking

# 10:45am - 11:45am 102: Medication Therapy for Pulmonary Disease in Older Adults Maureen George, PhD, RN, AE-C, FAAN 1.0 CE Credit

This session will compare and contrast asthma and COPD to identify similarities and differences in pharmacologic management by comparing the recommendation from evidence-based guidelines based on age and severity.

## 12:00pm - 1:00pm Industry-Supported Presentation Theater Supported by AstraZeneca

No continuing education credit will be provided for this event.

#### 1:00pm - 2:30pm

**General Session 103: Medication Therapy for Hypercholesterolemia** Neil Stone, MD, MACP, FAHA, FACC 1.5 CE Credits

This session will review the latest 2013 Prevention Guidelines from ACC and AHA and will explore, through case studies, the role of the nurse clinician in evaluation and treatment of appropriate patients.

## 2:30pm - 3:30pm 104: Medical Management of Heart Failure Lisa Rathman, MSN, CRNP, CHFN, CCRN 1.0 CE Credit

Heart failure is a common clinical syndrome representing the end stage of a number of different cardiac diseases. It is the leading cause of hospitalization in the elderly and is accompanied by high direct and indirect costs for treatment. This session will provide a comprehensive overview of the current strategies for the pharmacologic treatment of heart failure.

#### 3:30pm - 4:00pm

#### **Refreshment Break/Networking**

#### 4:00pm - 5:30pm

**105:** Antibiotic Prescribing in Older Adults in the Era of Antimicrobial ResistanceJason Gallagher, PharmD, FCCP, BCPS1.5 CE Credits

This session will discuss the safety and efficacy in the use of antibiotics in older adults. Issues regarding the treatment of bacterial infections in patients with resistant infections and a discussion of the "downstream" consequences of antimicrobial use will be included.

#### 5:30pm - 6:30pm

## **106: An Update in Approaches to Glycemic Management for Older Patients with Type 2 Diabetes** Tyan Thomas, PharmD, BCPS 1.0 CE Credit

This session will serve as a brief overview of the current treatment guidelines for older people with type 2 diabetes. Discussion will include evidence of cardiovascular risk factor improvement with GLP-1 analogs and DPP-IV inhibitors and agents for type 2 diabetes recently brought to market or currently being studied.

# Saturday, March 28, 2015

7:00am - 12:30pm Registration Open

7:00am - 8:00am Continental Breakfast

8:00am - 9:00am 201: Alcohol and Substance Addiction in Later Years David Oslin, MD 1.0 CE Credit

This session will explore the issues related to addiction in the older adult population. There will be an emphasis on the epidemiology of alcohol and opioid abuse and methods for screening/ assessment particularly in nonpsychiatric settings such as primary care or hospitals. Treatment options in all types of care settings will also be discussed.

#### 9:00am - 9:15am Coffee Break

# 9:15am - 12:15pm 202: Pain Management and Opioid Prescribing Rasham Shah-Ortiz, PharmD Deborah Way, MD, CMD, FAAHPM 3.0 CE Credits

This interactive 3-hour didactic and case-based session will provide a review of pharmacotherapy of pain management. The focus will be on the unique needs of the geriatric patient across the care continuum.