FOR THE PAST FOUR AND ONE HALF YEARS THE ADMINISTRATION ON AGING AND THE PUBLIC HEALTH SERVICE HAVE BEEN WORKING TOGETHER THROUGH A MEMORANDUM OF UNDERSTANDING INVOLVING ALL 50 STATES. A NUMBER OF HIGH PRIORITY AREAS ARE BEING ADDRESSED WHICH FOCUS SPECIFICALLY ON HEALTH PROMOTION AND DISEASE PREVENTION. FOR EXAMPLE:

- **SMOKING CESSATION PROGRAMS FOR OLDER PEOPLE**

SMOKING IS RELATED TO MANY HEALTH PROBLEMS AND REMAINS ONE OF THE LEADING CAUSES OF INDUCED DEATH AND DISEASE. SMOKING AFFECTS THE HEALTH OF SMOKERS OF ALL AGES, ALTHOUGH FOR OLDER PEOPLE SMOKING CAN ALSO COMPLICATE EXISTING ILLNESSES OR DISEASE CONDITIONS WHICH ARE LIKELY TO BE MORE PROMINENT IN OLDER PEOPLE THAN IN
YOUNGER POPULATIONS. UNTIL RECENTLY THE DANGER OF LONG-TERM SMOKING WAS GENERALLY THOUGHT TO BE IRREVERSIBLE AND PERMANENT. WE NOW HAVE DOCUMENTED EVIDENCE THAT SMOKING CESSATION IN OLDER PERSONS CAN PRODUCE POSITIVE HEALTH EFFECTS. STRATEGIES HAVE BEEN INTRODUCED NATIONWIDE THAT ENCOURAGE SMOKERS TO QUIT. ONE 5-YEAR CESSATION EQUALS CORONARY CARDIAC RISK OF NON-SMOKERS.

DRUG USAGE

- OLDER PERSONS ARE MORE LIKELY THAN OTHERS TO TAKE MEDICATIONS FOR MULTIPLE MEDICAL CONDITIONS.

- OLDER PERSONS ARE MORE LIKELY THAN OTHERS TO SEE MORE THAN ONE PHYSICIAN FOR THEIR MULTIPLE MEDICAL CONDITIONS, AND THE COMMUNICATION AMONG THESE PHYSICIANS IS OFTEN LESS THAN IDEAL.
INFORMATION ABOUT TAKING MEDICATIONS IS OFTEN INSUFFICIENT: VITAL INFORMATION CONCERNING MEDICATIONS TAKEN FOR CHRONIC AS WELL AS ACUTE MEDICAL CONDITIONS EXCEEDS THE SPACE AVAILABLE ON PRESCRIPTION DRUG LABELS, AND VERBAL INFORMATION FROM THE PROVIDER IS EASILY FORGOTTEN.

IN ADDITION TO THE MEDICATIONS THAT ARE PRESCRIBED AND DISPENSED BY HEALTH CARE PROVIDERS, OLDER PERSONS USE A VARIETY OF OVER-THE-COUNTER (NONPRESCRIPTION) DRUGS WHICH HAVE A DEFINITE IMPACT ON THEIR OVERALL MEDICAL CARE.

PUBLISHED MATERIALS REGARDING MEDICATIONS ARE AVAILABLE IN THE MARKET PLACE, BUT BECAUSE PRINTING AND DISTRIBUTION TEND TO BE COSTLY, THESE AIDS ARE NOT WIDELY DISTRIBUTED.
MOST OLDER PEOPLE DO NOT MAINTAIN A DOCUMENT OF THEIR USE OF MEDICATIONS THAT IS THEN AVAILABLE FOR REFERENCE AND REFERRAL AND THAT IS COMPLETE, CURRENT, OR COMPARATIVE.

THE PHS HAS DEVELOPED TWO AIDS FOUND TO BE HELPFUL IN THIS REGARD. THESE ARE A PERSONAL HEALTH AND MEDICATION RECORD AND A DAILY PERSONAL MEDICATION SCHEDULE. WHEN KEPT CURRENT, THESE DOCUMENTS PROVIDE A SOURCE OF READILY USABLE PERSONAL MEDICATION INFORMATION FOR BOTH THE CONSUMER AND THE HEALTH CARE PROVIDER.
MATERIALS FOR THE MEDIA

- TELEVISION PUBLIC SERVICE ANNOUNCEMENTS (PSAs). Last summer, five television PSAs on exercise, safe use of medicines and nutrition were distributed to the state contacts. State contacts are responsible for the timing of the distribution of the PSAs to television stations in their states. In some states, American Association of Retired Persons (AARP) health advocates have assisted in PSA distribution. The Healthy Older People staff placed the PSAs with the national commercial and cable television networks. Included with the PSAs were instructions on PSA distribution and a folder for station directors containing fact sheets and storyboards on the three PSA topics.
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0 **RADIO PSAs.** Eight radio PSAs have been produced on nutrition, exercise, smoking cessation, using medicines safely and wearing seatbelts. State contacts will receive these PSAs soon, along with a targeted list of radio stations in their states, information packets for radio program directors and instructions on distribution and tagging. Again, some states may rely on AARP Health Advocates or other organizations to help with the distribution. The Healthy Older People staff will handle national network distribution.

0 **TELEVISION MODULES AND PRODUCER’S GUIDE ON HEALTH AND AGING.** Healthy Older People has produced a videotape containing five 90-second news clips on exercise, nutrition, medicines, home safety and smoking cessation. This tape includes interview footage with older people and federal officials. A “Producer’s Guide” with program ideas and additional
BACKGROUND INFORMATION AND RESEARCH ON EACH OF THE FIVE TOPICS WILL ACCOMPANY EACH MODULE. THESE PROGRAM MODULES WILL BE SENT TO ALL STATE CONTACTS, ALONG WITH DISTRIBUTION INSTRUCTIONS AND A SPECIAL "TECHNICAL REVIEW NOTE" ON WORKING WITH THE BROADCAST MEDIA. HEALTHY OLDER PEOPLE STAFF WILL DISTRIBUTE THE MODULES TO NATIONAL COMMERCIAL AND CABLE TELEVISION NETWORKS. ON REQUEST, THE MODULES CAN ALSO BE MADE AVAILABLE TO LOCAL TV STATIONS OR TO GROUPS ABLE TO WORK WITH A STATION TO GET THE MATERIAL ON THE AIR.

- **RADIO MODULES.** HEALTHY OLDER PEOPLE HAS ALSO PRODUCED A RADIO MODULE ON HEALTH AND AGING TOPICS, CONTAINING ONE TO TWO-MINUTE NEWS CLIPS ON EXERCISE, NUTRITION, MEDICINES, INJURY PREVENTION AND SMOKING CESSATION. AGAIN, EACH OF THESE MODULES WILL BE ACCOMPANIED BY A "PRODUCER’S GUIDE" GIVING PROGRAM IDEAS AND FURTHER INFORMATION AND RESEARCH ON EACH
TOPIC. THE RADIO MODULES WILL BE DISTRIBUTED TO STATE CONTACTS WHEN THE TELEVISION MODULES ARE DISTRIBUTED; THE HEALTHY OLDER PEOPLE STAFF WILL HANDLE NATIONAL RADIO NETWORK DISTRIBUTION. STATIONS OR GROUPS WORKING DIRECTLY WITH RADIO STATION PERSONNEL CAN ALSO REQUEST COPIES THROUGH THE HOTLINE.

- NEWSPAPER KIT. EACH STATE CONTACT WILL RECEIVE 10 COPIES OF A NEWSPAPER MEDIA KIT, INCLUDING A SAMPLE OP-ED ARTICLE AND FIVE FEATURE ARTICLES ON EXERCISE, NUTRITION, MEDICINES, SMOKING CESSATION AND INJURY PREVENTION. EACH ARTICLE HAS BEEN WRITTEN SO THAT INFORMATION ABOUT LOCAL PROGRAMS AND EXPERTS CAN BE ADDED. THE KIT WILL ALSO INCLUDE INSTRUCTIONS FOR DISTRIBUTION AND A "TECHNICAL REVIEW NOTE" ON WORKING WITH THE PRINT MEDIA. DISTRIBUTION OF THE PRESS KITS IS THE
SOME REGIONAL DISTRIBUTION IN AREAS NOT COVERED BY STATE CONTACT PROGRAMS PLACE THIS SUMMER.

A SPECIAL SUPPLEMENT ON HEALTH PREVENTION. THE INDIVIDUALS RESPONDING TO THE NATIONAL SAMPLING (MORE THAN 9,000 HOUSEHOLDS DURING QUARTER'S SURVEY) WERE GROUPED BY AGE OF RESPONDENT YEARS OF AGE AND OLDER WERE ONE OF THE GROUPINGS.

THE NATIONAL CENTER FOR HEALTH STATISTICS, PHS, (NATIONAL HEALTH INTERVIEW SURVEY RESULTS)

DISCUSSES SUCH AS PERCENT OF SALTS SUCH AS PERCENT OF PHYSICIAN INTERESTS OF AMERICANS. ITS 1985 NATIONAL HEALTH SURVEY INCLUDES A SPECIAL SUPPLEMENT ON HEALTH PREVENTION. THE INDIVIDUALS RESPONDING TO THE NATIONAL SAMPLING (MORE THAN 9,000 HOUSEHOLDS DURING QUARTER'S SURVEY) WERE GROUPED BY AGE OF RESPONDENT YEARS OF AGE AND OLDER WERE ONE OF THE GROUPINGS.
MORE THAN HALF (54 PERCENT) OF THE PEOPLE OVER AGE 65 SAID THEIR HOMES HAD WORKING SMOKE DETECTORS, BUT 42 PERCENT OF THEM REPORTED THEY NEVER USED SEATBELTS. SEVENTY-FOUR PERCENT DID NOT KNOW AT WHAT TEMPERATURE (128°) WATER COULD SCALD THEM.

ONLY 27 PERCENT OF ALL PEOPLE OVER AGE 65 REPORTED THAT THEY EXERCISED REGULARLY, WITH WALKING (41 PERCENT) BEING THE MOST COMMON FORM OF EXERCISE.

SOME 36 PERCENT SAID THEY "DIDN'T KNOW" HOW MANY DAYS A WEEK A PERSON SHOULD EXERCISE TO STRENGTHEN HEART AND LUNGS AND 45 PERCENT SAID "DON'T KNOW" WHEN ASKED HOW MANY MINUTES AT A TIME PEOPLE SHOULD EXERCISE TO INCREASE CARDIOVASCULAR STRENGTH.
AS A GROUP, PEOPLE OVER THE AGE OF 65 HAVE THE FEWEST CURRENT SMOKERS (16 PERCENT); 36 PERCENT SAY THEY ARE FORMER SMOKERS. OLDER PEOPLE ALSO DRINK LESS ALCOHOL: 59 PERCENT SAID THEY HAD NOT HAD A DRINK DURING THE PAST YEAR, COMPARED TO 24 PERCENT OF THOSE AGE 18-29, 26 PERCENT OF PEOPLE AGE 30-44 AND 38 PERCENT OF THOSE AGE 45-64.

THIS MATERIAL IS INCLUDED IN ADVANCE DATA FROM VITAL AND HEALTH STATISTICS, NO. 113, DHHS PUB. NO. (PHS) 86-1250, NOVEMBER 15, 1985. SINGLE COPIES ARE AVAILABLE FROM THE HOTLINE (1-800-626-5433) WHILE THEY LAST.
REGULAR EXERCISE HAS MANY BENEFITS:

- REDUCES DEATHS FROM CARDIOVASCULAR DISEASE

- INCREASES FLEXIBILITY AND STRENGTH - MAKES EVERYDAY MOVEMENT EASIER

- WELL BEING

- BETTER SLEEP
NUTRITION

- EASIER WHEN NOT USING IMPROPER MEDICATIONS WHICH BLUNT APPETITE

- 20% LESS SALT EQUALS 5-10% LOWER BLOOD PRESSURE

- REDUCING BLOOD CHOLESTEROL LEVELS REDUCES HEART DISEASE RATES

- SO EASY TO FALL VICTIM TO FAD DIETS

- ADD A LITTLE CALCIUM, ESPECIALLY WOMEN -- DECREASES PROBLEMS ASSOCIATED WITH OSTEOPOROSIS

- SEEK COUNSEL OF DOCTOR OR NUTRITIONIST

I COULD GO ON -- AVOIDANCE OF ACCIDENTS; STRESS; EXCESS ALCOHOL
I HAVE RAMBLED ON LONG ENOUGH -- YOU HAVE MORE INTERESTING THINGS TO DO.

I FEEL ABOUT 45 AND I SOMETIMES TALK AS THOUGH I WERE ADDRESSING AN OLDER GENERATION. I’M NOT. THESE OLDER AMERICANS I KEEP REFERRING TO INCLUDE ME -- APPROACHING MY 70TH BIRTHDAY.

THANK YOU FOR LISTENING.