

# The GeriJournal



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## **Prolia – Don't be Late**

COVID has created some interesting research projects. Prolia® (denosumab) is a unique osteoporosis drug, given its 6-monthly s.c. administration schedule. During COVID, physician's offices have been less accessible, and patients are reluctant to visit due to safety concerns. In addition, elderly patients may forget upcoming appointments, especially for diseases like osteoporosis, which display no symptoms until a fracture occurs.

An *Ann Intern Med* study published this month examined fracture risk linked with delays in Prolia® administration. Data from 2,594 U.K. patients was analyzed. Compared to patients receiving Prolia® on time, those receiving doses at least 16 weeks late had roughly four times the risk of vertebral fractures (10.1 fractures per 1,000 patients vs. 2.2 fractures per 1,000).

We are fortunate that in LTC, Prolia® doses are scheduled, administered consistently, and on time. It is important to recognize that there are

consequences when drugs are given improperly or administration is delayed.

## **Vaccinate to Prevent Dementia**

Potential COVID vaccines are headline news these days, but flu vaccine season is just around the corner and it will nudge its way into thoughts soon enough. While preventing viral infections is our primary goal, we now have another reason to promote vaccination. Two large observational studies presented at this year's virtual *Alzheimer's Association International Conference* showed a connection between Influenza and pneumonia vaccination and reduced development of Alzheimer's Disease (AD).

The first study compared more than 9,000 adults who received Influenza vaccine at least once to a matched group who had not. Being vaccinated for Influenza reduced future AD development by 17%. Multiple vaccinations corresponded to a further 13% benefit. Each of these results was statistically significant. Protection seemed to be strongest in those vaccinated at a younger age (i.e. 60 vs. 70).

The second, similar study of over 5,000 individuals evaluated the benefit of pneumonia + Influenza vaccine in AD prevention. Pneumonia

vaccination reduced AD risk by 30%, and multiple vaccinations for Influenza combined with pneumonia resulted in a further 12% reduction. It would be difficult to construct an ethical prospective study to confirm these results, however, as the control group would be left without vaccine protection.

The reasons for this AD benefit are unclear. The authors speculate that routine vaccination activates the immune system to make it more responsive to many infections. Also, Influenza can have devastating effects in the elderly, so prevention can improve overall health throughout the aging process.

## **Better than Netflix – GeriatRx Training Videos**

We know many facilities have hired new staff, and existing staff require "refreshers". To ensure everyone is fully trained on all GeriatRx systems, we have created a comprehensive catalogue of videos.

These videos include, but are not limited to: *Full Orientation, Digital Drug Record Book, Digital Pen and Website Portal, Incident Reports and Hypoglycemic Events*, etc. All videos will be posted in the DOC and Administrator sections of the GeriatRx web portal next week, so they can be transferred to education platforms, such as Surge Learning.

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