



BEST Pearls of The 2024 CMDA Conference!

April 19, 2024

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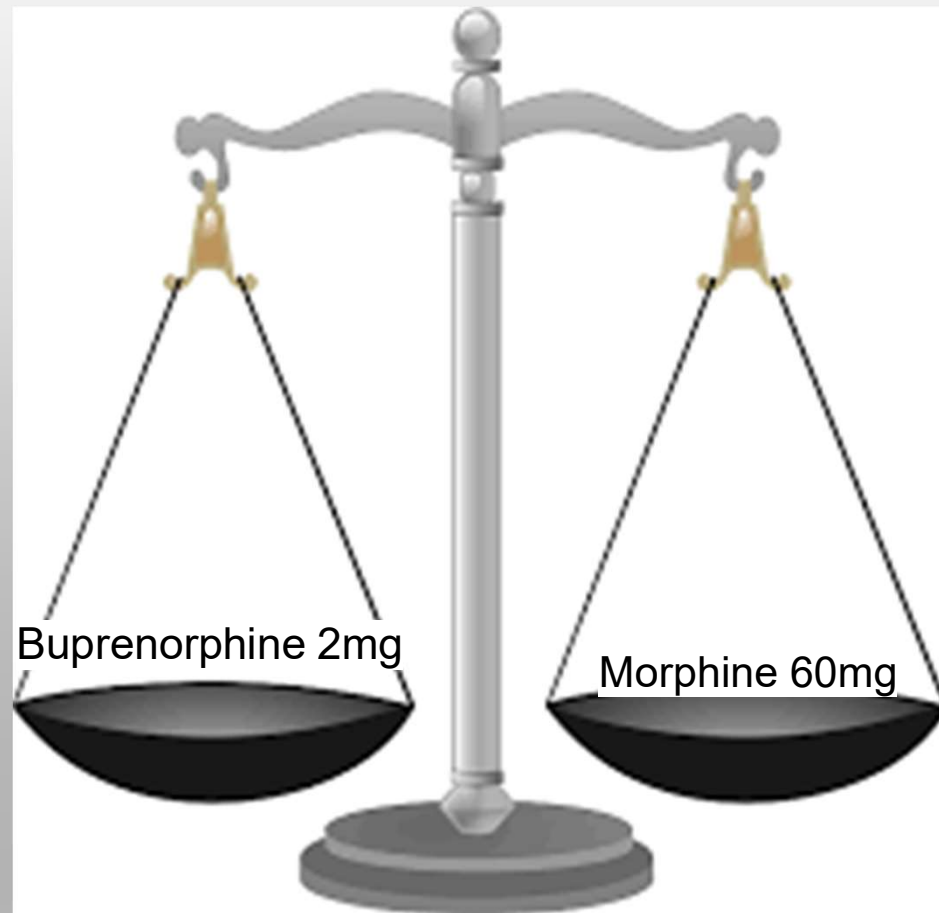
Leslie Eber MD CMD

Pearl #1: Complicated Pain Management

PRO TIP!

Rinse mouth 30 minutes after oral buprenorphine is administered to reduce tooth decay!

With Gratitude,
Your local friendly DDS



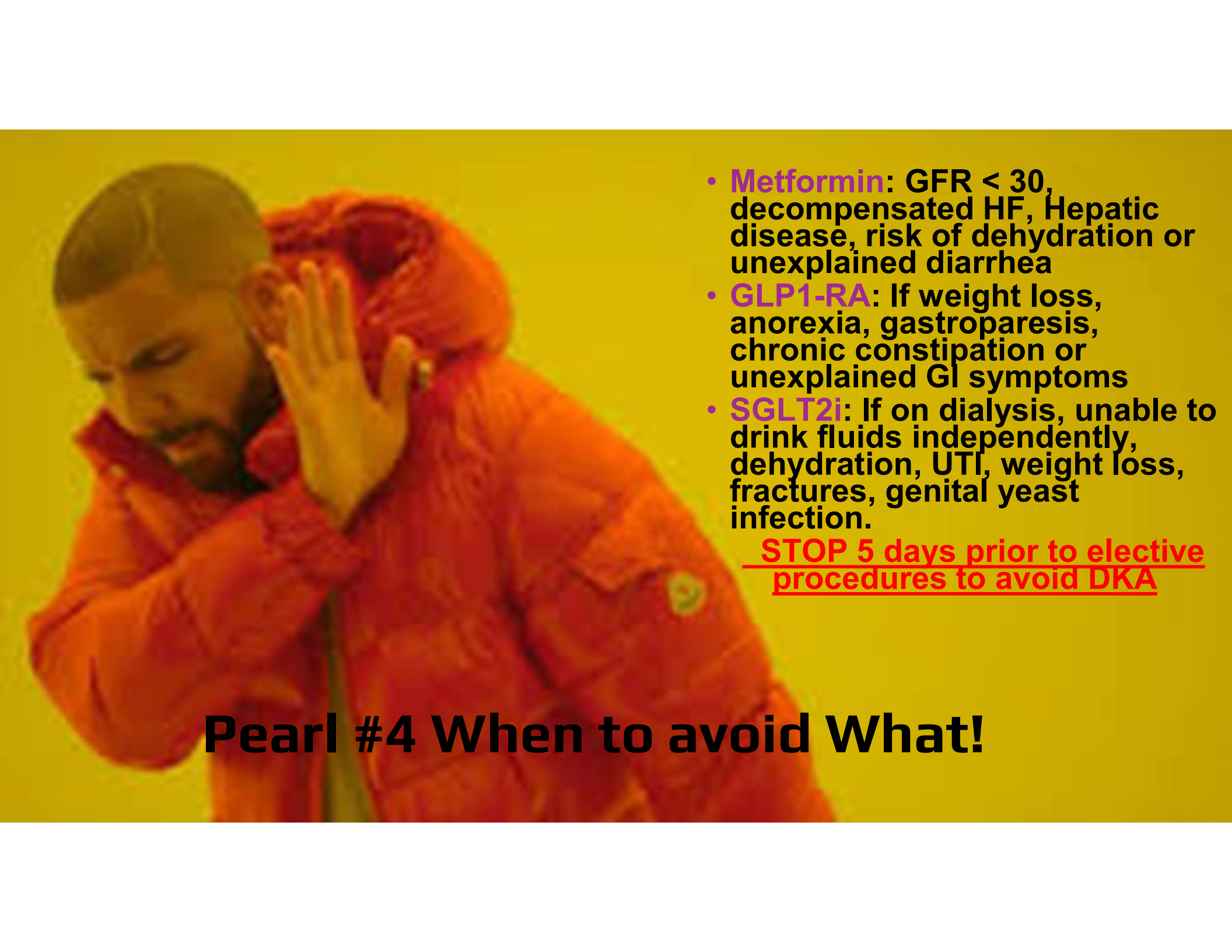
Pearl #2: Medications can affect swallow!

MEDICATION	POTENTIAL EFFECTS
Antispasmodics and Antispastics	Neuromuscular Blocking Agents / Direct effect on striated muscle
Antibiotics, Steroids, NSAIDS, Bisphosphonate, Bronchodilator, Anticholinergics	Esophagitis / Esophageal Injury / GERD
ACE inhibitors, antihypertensives, antinauseant, antianxiety, antihistamines, diuretics, antidepressants, SSRIs, antiepileptics, opioids	Xerostomia / Dry Mouth
Sedatives, steroids, Benzodiazepines, narcotics/opioids, Antiparkinsonian	CNS Depression ~ confusion, AMS, drowsiness
Neuroleptics, antipsychotics	Tardive dyskinesia, dizziness, drowsiness
Dopamine, Calcium Antagonists, Nitrates	Can decrease lower esophageal sphincter pressure

Pearl #3: When to use what!

- **USE a GLP1- RA** in patients with **eGFR < 30 ml/min/1.73m²**, as they demonstrated advantageous atherosclerotic cardiovascular and kidney outcomes
- **USE a SGLT2i** in patients with **heart failure** (systolic and/or diastolic), and/or with CKD with **eGFR between 25 - 60 ml/min**,



- 
- **Metformin:** GFR < 30, decompensated HF, Hepatic disease, risk of dehydration or unexplained diarrhea
 - **GLP1-RA:** If weight loss, anorexia, gastroparesis, chronic constipation or unexplained GI symptoms
 - **SGLT2i:** If on dialysis, unable to drink fluids independently, dehydration, UTI, weight loss, fractures, genital yeast infection.

STOP 5 days prior to elective procedures to avoid DKA

Pearl #4 When to avoid What!

Pearl #5: Falls alone are not reason enough to not use a DOAC!

PRO TIP!

For most dental interventions, Neither DOACs nor Aspirin need to be stopped for those with normal bleeding risk

With Gratitude,
Your local friendly DDS



Pearl #6: Every facility needs a DEI assessment

Need help?

Here are
some starter
questions!

How do you identify SDOH needs for your residents?

When & Where do you document SDOH identification?

How do you identify past/current traumas and triggers for your residents?

Is there a process for addressing bias with residents, families, staff, & leadership

How do we support our staff who may experience racial slurs, violent or vulgar language or behaviors?

Oyster #7

Advanced Care Planning Pearls

1. It does not need to be one conversation
2. Assess knowledge and understanding of illness and/or prognosis
3. **Summarize, make a recommendation, and affirm commitment to care**
4. Document the conversation in medical record

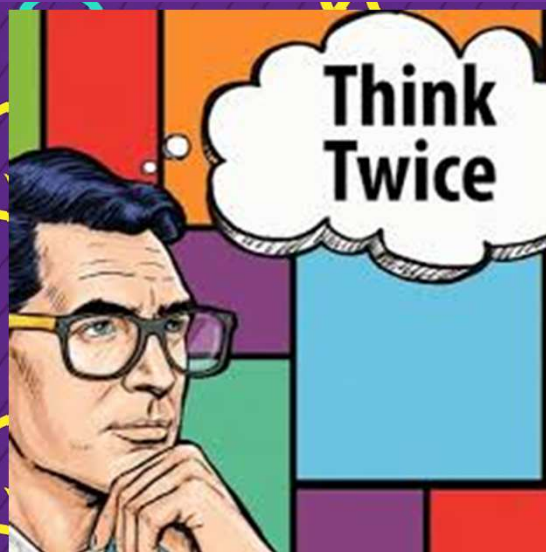


Bonus Pearl!
Akoya
Oysters can
produce up
to 5 pearls!



Pearl #8: What is the bottom line with the new dementia medications?

Based on 19 different publications, currently **none** of the changes for lecanemab, aducanumab, or donanemab, exceed the Minimal Clinically Important Difference (MCID); *with only small improvements noted in cognitive testing over placebo*



Pearl #9:

Notification upon transfer of carrier or infectious status is an excellent infection control strategy to prevent the spread of antimicrobial resistance due to intra-facility transfers



A microscopic view of red blood cells (erythrocytes) in a blood vessel. The cells are biconcave and appear as reddish-orange discs. They are surrounded by a network of fine, fibrous structures, likely representing the vessel wall or connective tissue. The overall color is a deep red, and the lighting creates a sense of depth and texture.

Pearl #10: DOAC is preferred over warfarin **Except** in the cases of:

1. Mechanical heart valve
2. Previous failure of DOAC therapy
3. Moderate to severe mitral valve stenosis

Pearl #11: Tai Chi not only can improve risk of falls but can also help reduce pain, improve sleep, and improve cognition in the setting of mild cognitive impairment!

Tai chi movements may be modeled clearly and simply so that residents with cognitive impairment may follow along without having to remember the moves



Pearl #12: For Patients with Dementia, your approach matters!

- Approaching a dementia patient with behaviors should be done in a slow and calm manner, adapting your approach to what you know about that specific person
- Remember! You may be a stranger every time you approach

Pearl #13: Join us again next year!

**April 25th
2025**



THE COLORADO
SOCIETY FOR
POST-ACUTE AND
LONG-TERM CARE
MEDICINE

**THANK YOU FOR ALL YOU DO FOR
OUR RESIDENTS EVERY DAY!**

