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(60 minutes)

Elder Abuse: Detection, Management, and Prevention

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AMA PRA CATEGORY 1: UP TO 2 CREDITS

This activity is designed for primary care physicians, geriatricians, and other healthcare professionals who provide care to elderly patients.

CME CREDIT DESIGNATIONS

ACCME The Network for Continuing Medical Education is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

AMA NCME designates this educational activity for a maximum of 2 category 1 credits toward the AMA Physician's Recognition Award. Each physician should claim only those credits that he/she actually spent in the activity.

AAFP This activity has been reviewed and is acceptable for up to 1 Prescribed credit by the American Academy of Family Physicians. *Term of approval is for one year from beginning distribution date of October 7, 2005, with option for yearly renewal.*

AOA This activity is eligible for up to 2 hours of credit in category 2-A of the American Osteopathic Association.



Elder Abuse: Detection, Management, and Prevention

Elder abuse is one of the fastest-growing forms of domestic violence in the United States. Each year, an estimated 1 to 2 million elderly Americans are victims of physical, emotional, financial, or other abuse. Americans over the age of 80 years are 2 to 3 times more likely to suffer abuse than are younger adults; yet most cases of elder abuse go undetected. In this video program, Dr. Barbara Paris, an international expert on elder abuse and a long-time advocate for the rights of elders, explains how to recognize elderly patients who are at risk for or who are victims of mistreatment, and presents steps that can be taken to protect and monitor elderly patients who are victims of abuse or neglect.

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LEARNING OBJECTIVES

After taking part in this activity, participants should be able to:

- categorize risk factors for elder abuse and neglect;
- recognize the various indicators of physical, emotional, sexual, and financial abuse in elderly patients;
- identify indicators of abusive neglect and abandonment in elderly patients;
- interview an elderly patient to determine whether abuse has taken place; and
- intervene as appropriate to help and protect victims of elder abuse.

SUGGESTED READING

- Cammer Paris BE. Violence against elderly people. *Mt Sinai J Med.* 1996;63(2):97-100.
- Dyer CB, Pavlik VN, Murphy KP, Hyman DJ. The high prevalence of depression and dementia in elder abuse or neglect. *J Am Geriatr Soc.* 2000;48:205-208.
- Kahan FS, Paris BEC. Why elder abuse continues to elude the health care system. *Mt Sinai J Med.* 2003;70(1):62-68.
- Lachs MS, Pillemer K. Abuse and neglect of elderly persons. *N Engl J Med.* 1995;332:437-443.
- Lyness JM. Treatment of depressive conditions in later life: real-world light for dark (or dim) tunnels. *JAMA.* 2004;291:1626-1628.
- Paris BE, Meier DE, Goldstein T, Weiss M, Fein ED. Elder abuse and neglect: how to recognize warning signs and intervene. *Geriatrics.* 1995;50(4):47-51.