LIVING A LONGER, HEALTHY LIFE

CNY's top geriatrician, Sharon Brangman, 59, on five things you should do to live longer.
Plus a profile of the doctor

Priceless

INSIDE: Skaneateles Doc, a Ping-Pong Champ
Making the Golden Years Glitter

Sharon Brangman, CNY's top geriatrician, focuses on well being of the older set

By Lou Soreno

Aging with grace. With the absence of a magical fountain of youth, elderly Americans are searching for ways to extend and enhance the quality of their lives.

This is when Sharon A. Brangman steps in. She is a foremost geriatrician at Upstate University Hospital in Syracuse whose pragmatic and practical approach to medicine forms a blueprint for a long and prosperous life.

Brangman is professor of medicine at Upstate Medical University and division chief of geriatric medicine at Upstate University Hospital. She coordinates geriatric services with the department of medicine and Upstate University Hospital.

"When I first was getting started in medicine, I had a lot of younger people who were coming to me asking for notes so they could stay home from work, and they had very relatively minor problems," she said. "I was getting very frustrated because I was writing these notes for people I knew really should be out working."

On the other hand, Brangman encountered older people who had a whole myriad of problems and just wanted to stay independent and functional.

"I really resonated with that age group and their problems and their strength to get through things even when they had a lot of real problems," she noted.

Brangman said she loves the diversity her job features.

"That's what keeps things interesting. Each day is a little bit different," she said.

"Some days I am taking care of patients, some days I am helping to develop programs that help take better care of a broader group of patients, and some days I do teaching so that others can get the skills to take care of older people," she added.

She has also advocated on a national level while addressing policy issues that would benefit older people.

"I've taken a lot of different slants," she said.

Brangman, 59, is originally from Brooklyn. Her family moved to Syracuse and she attended Levy Middle School and Nottingham High School. She lives with her family in DeWitt.

"I think my parents wanted to get us out of the big-city environment," Brangman said. "I think when growing up, it's more manageable to be in a medium-sized city."

She said affordable housing and a beautiful environment are features that attract her to the Syracuse region.

"There are lots of opportunities for cultural and outdoor activities," she said. "I like being in a college town which gives a lot of academic and sports opportunities. It's also easy to get around to the big cities when I want to."

"One of the things I like so much about geriatrics is that each of my patients has their own story. It's very interesting," Brangman said.

"They survived a lot of things that would floor many people," she said. "They have made it into their 80s and are doing well, or they've survived things that other people would have said, 'Just take me out back and shoot me'."

"I always find it very interesting to see what their stories are and how they have their own personal tales of endurance," she said.

Brangman is past president of the
Geriatrician Sharon Brangman, then president of the American Geriatrics Society, addresses members at an annual scientific meeting. Photo was taken May 12, 2010. Courtesy of SUNY Upstate.

American Geriatric Society and is on the board of the Syracuse chapter of the OASIS Institute.

**Action-packed schedule**

Brangman’s job is a combination of patient care, teaching, research and administration.

Brangman said more than half her time is spent on the clinical end, while some weeks it is almost all clinical.

“It varies, but I see patients all the time,” she noted.

She has been on the faculty at Upstate since October 1989.

“It’s just a lot of fun to help students catch that spark,” she said.

“I also like to share my experience with others.”

“There are not enough geriatricians around, so it’s important that all healthcare professionals and students get a perspective on geriatrics so they can include it into their practices,” she added.

Brangman said the short supply of geriatric specialists stems from the low number of medical students going into primary care specialties.

“Primary care specialties feed into geriatrics, so usually you do a residency in internal medicine or family medicine and an additional year training in geriatrics,” she said.

Brangman said there are fewer students choosing primary care, internal and family medicine as opposed to other specialties within the field.

She also noted there is a lack of exposure during medical training to older people.

“Not every medical school has a curriculum that includes substantial contact time in the right setting with older adults,” she said. “People just don’t have a perspective of geriatrics as a career.”

The demand for geriatric services is growing each day, Brangman said.

“The oldest of the baby boomers have been turning 65 at the rate of 10,000 per day for several years now,” she said.

“People are living longer, and you need someone who understands the difference between normal aging and disease processes that can help evaluate medications,” she said.

As people get older, they require more medications, she said.

“Sometimes those can lead to side effects that can impact quality of life, especially as you get older,” Brangman said.

“The elderly need someone who can do an assessment of medications to make sure they are appropriate for the age and medical condition of a patient,” she said.

The healthcare sector will also need geriatricians who can evaluate functional status, both physical and cognitive, with the goal of keeping individuals independent for as long as possible and living in their own homes and communities, she noted.

“We also do a good deal of prevention to help people avoid things that can lead to trouble, such as preventing falls,” she said. “We want to help people maintain a healthy life so they can age well.”

**Skills that are needed**

In terms of skill sets needed to be an effective geriatrician, Brangman said it is imperative to have the ability to understand normal aging versus a disease process.

“You also need skills to manage multiple medical problems at the same time, because most older people begin to have a series of medical issues one on top of the other,” she said.

Another skill needed is being able to manage multiple medications, and then keeping track of what someone’s

SUNY Honors
Sharon Brangman as Distinguished Service Professor

Sharon Brangman, M.D., professor of medicine and chief of geriatrics at Upstate Medical University, has recently received the Distinguished Service Professorship from SUNY Chancellor Nancy Zimpher.

The Distinguished Service Professorship is granted to individuals who have demonstrated extraordinary service at SUNY and in their community, as well as through regional and state outreach. Appointment constitutes a promotion to the State University’s highest academic rank, and it is conferred solely by the State University Board of Trustees.
Dr. Brangman’s Thoughts

On major challenges in healthcare:

“I think that one of the biggest challenges are the shortage of geriatricians. The need is huge out there and it’s hard to meet all those needs.

“There are lots of policies that make it easier for people to receive care in hospitals and not in their own home, where they would prefer to have it.

“Another challenge is helping people understand what all their illnesses mean and what the best ways are to manage them.”

On electronic medical records:

The advent of electronic medical records has proved challenging to many healthcare providers.

“I’ve been trying to adapt and I’m getting better every day. I don’t want to be that person who is moaning and talking about the old days all the time. There have been some benefits for having an electronic record.

“The challenges involve the whole technical piece of how to use it and then how to make sure it reflects the information that I need to know about my patients.”

On hospital-based TV shows:

Brangman says she tries to avoid hospital-related TV shows.

“They make me crazy. They make mistakes, although some of them are accurate. When I have down time, I don’t need a reminder about what the workday is like.

“Some of them give misconceptions because they always come up with an answer in 30 to 60 minutes, depending on how long the show is. I think it makes people have unrealistic expectations.”

The battle with Alzheimer’s

Brangman is also director of the geriatric medicine fellowship program and is director of the Central New York Alzheimer’s Disease Assistance Center.

The ADAC is one of nine centers funded through the state Department of Health. It helps patients and caregivers get educated, diagnosed and managed appropriately with Alzheimer’s and related dementias.

The center covers a 15-county region that extends from Watertown to Binghamton. It is a referral base in Central New York for patients who have any form of dementia.

“There is no immediate cure down the road and there is a lot of research trying very hard to figure out what’s going on with Alzheimer’s disease,” Brangman said.

She noted researchers do have a sense of what is starting to go wrong in the brain.

“Right now, we are recommending that people do things that keep their heart healthy so they also keep their brain healthy because it seems to be connected,” she said.

“Probably one of the most important things you can do is exercise every day and not think of it as a chore, but something you do that is just as vital as combing your hair and brushing your teeth,” she added.

Brangman said there are changes that happen in blood vessels as people get older that change the way blood flows to the brain. When the brain senses subtle changes in blood flow, it can cause a cascade of events that can cause problems, she added.

“There also seems to be a link with diabetes and certain forms of dementia,” she said. “There has been a huge increase in diabetes in our society and this can also have implications for maintaining brain health.”

She said uncontrolled hypertension is also being looked at as another cause of dementia.

“There are things we can do to optimize our health that may also keep our brains healthy as we get older,” she said. “It is not normal to have memory loss as we get older. As we get older, it may take longer to process information and retrieve it from the recesses of the brain. But it is not normal to have memory loss.”

While exercise is critical to keep the mind healthy, so is a diet low in
sugar and high in protein and good fats, Brangman said.

It’s also essential to “reduce stress and maintain good contact with people around you. In other words, don’t sit in a room looking at your computer all day. Get out and interact with people, volunteer and keep connected to the world around you. It’s more than just doing crossword puzzles and Sudoku.”

**Balancing life, work**

Brangman said the majority of her job stress stems from “trying to meet all the needs that are out there.

“I have to make sure I balance that with my own exercise, rest and doing things unrelated to work. I exercise every day and I work out with a trainer twice a week,” she said. “I try to maintain activities that are unrelated to medicine. It definitely is a challenge, and some days I’m better at it than others, but that’s my overall goal.”

She noted it’s a “daily juggling act.”

“It’s a challenge. Sometimes you have to say no to something even if it sounds interesting because I just can’t do everything,” she said.

She is married and has two adult children, one of whom is doing a medical residency in San Francisco.

“Certainly my kids were exposed to the medical field from the beginning, but they had the choice of doing whatever they wanted,” she said.

**Brangman received her undergraduate degree in biology from Syracuse University and her medical degree from SUNY Upstate Medical University in Syracuse in 1981.**

She completed residency training in internal medicine at Montefiore Medical Center in The Bronx, where she also completed fellowship training in geriatric medicine.

She is a fellow of the American College of Physicians and the American Geriatrics Society, and was elected to the board of the American Geriatrics Society in May 2002.

Brangman enjoys kayaking, reading, exercising and meeting up with friends.

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**Health Pros Weigh In**

“I have known Sharon Brangman over 20 years and my admiration and affection for her continues to grow. I marvel at her combination of work ethic, modest demeanor and remarkable accomplishments.

“She has made extraordinary contributions to the community and is a wonderful resource for the people who live here.

“Dr. Brangman is a leader who leads by doing and inspiring and she makes me proud to be at Upstate.”

**Dr. Gregory L. Eastwood, interim president at Upstate Medical University:**

“Dr. Sharon Brangman has been involved in leading the American Geriatrics Society for over 20 years. She was an early innovator for AGS focusing on developing content and programming that would address the needs of a diverse population. She led efforts to develop our Doorway Thoughts series that focuses on helping healthcare professionals to better understand how to communicate and work in partnership with people with different ethnic and cultural backgrounds.

“Sharon has served in multiple leadership roles at AGS, including as a president and now serving as president of its academic organization, the Association of Directors of Geriatric Academic Programs.

“She has been a member of the AGS Health in Aging Foundation board since 2007.

“Sharon serves as a liaison between the AGS and the Centers for Medicare & Medicaid Services which is not just a support, but a friendship. She has been a stalwart supporter of the AGS.”

**Dr. Gregory L. Eastwood, interim president at Upstate Medical University:**

“I have worked with Sharon for over 20 years and she is both a mentor and friend.

“She has taught me that one of the keys to leading a membership organization is being accessible to members and staff. Her pragmatic and collaborative approach to addressing issues is something I look to emulate as I take on leading the AGS.

“I think that I still have much to learn from Sharon and I look forward to continuing to work with her in her ongoing leadership roles here at AGS.”

**Nancy E. Lundeberg, chief executive officer for the American Geriatrics Society:**

“Dr. Brangman is an exceptional health care professional because of her commitment to the science and art of medicine and her care of her patients. She exemplifies lifelong learning, always striving to be the best, to learn more, to push the boundaries of what is known.

“She translates this knowledge into expert care of her patients with a compassion that is rare and moving to those who watch her in action. She is one of the most passionate patient advocates I have ever met.

“Dr. Brangman has influenced my career through her expertise in geriatrics. There are very few passionate people who care for older adults, and when I ‘found’ Dr. Brangman, it was a breath of fresh air — finally someone who understood what I cared about so much.

“Our collaborations have been stimulating and our research inspiring. She is a phenomenal team player and an enthusiastic collaborator.”

**Dr. Dale Avers, associate professor of physical therapy, College of Health Professions at Upstate Medical University:**

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People are always asking me for tips to stay healthy as they get older. Many are worried when they can’t find their car keys or they notice a new wrinkle or more gray hair. We have to remember that aging is a natural process, and considering the alternative, it is something we should all aspire to.

We tend to focus on external signs of aging as we see our bodies wrinkle or sag. There is nothing wrong with dyeing your hair or getting a surgical lift, if that makes you feel better. However, you should not ignore the measures you can take to age well on the inside.

I’ve watched my oldest patients over the years and have been making a list of the characteristics I see in those who age well.

This doesn’t mean that these patients don’t have medical problems or have not faced some real challenges, but they do have some common traits that we should all try to incorporate into our lives.

It is never too late to get started, and I encourage my patients at any age to follow these suggestions.

Middle aged adults should also begin to think about how they would like to be when they are in their 70s, 80s and beyond. The earlier you get started, the better.

So here are some things, in no particular order, that I have observed in those who age successfully, that has also been supported by research.

**1. Stay socially connected with others in your community.** Get out of the house and get involved. Maybe volunteer, join a book club or a choir. Think about ways to connect with people who are not only in your age group, but who are also younger and older than you are. Remember that as much fun as Facebook might be, face-to-face real life interactions are the best ways to connect with others.

**2. Be curious about the world around you.** Try to learn something new on a regular basis. Our brains respond to novelty and new activities stimulate the development of new brain connections. Consider taking up a hobby, which usually leads to learning lots of new information and skills. You will probably find others who share the same hobby. You
get a double bonus if your hobby also keeps you socially connected.

Be resilient. Don’t underestimate your ability to adapt to life’s circumstances and challenges as you grow older. I’ve had many patients who have rebounded pretty well, even after some devastating experiences. If you are inflexible and rigid and don’t adapt to change, you won’t age well. I had a patient many years ago who was losing his vision due to macular degeneration. I fully expected him to sink into a deep depression, but instead he told me that he always wanted to learn Braille, and that’s exactly what he did!

Reduce stress. We all experience stress. What stresses me may not stress you at all. Stress, especially if it lasts for a long time, has a bad effect on the body in so many ways. If you can’t rid yourself of the source of your stress, then it is important to offset it. Try meditating, prayer, yoga or exercise...which brings me to the next tip.

Exercise every day. Our bodies were made for movement and the more you move and exercise, the healthier you will be. You may have heard that sitting is the new smoking. Get up off the couch and get moving! Exercise does not mean you have to train to run a marathon or bench press 500 pounds. Walking every day for 30 minutes and lifting weights twice a week has more health benefits than most of the prescriptions I write every day for various pills and tablets.

Do you know the most important muscles that could keep you out of a nursing home? It’s the quadriceps. These are the leg muscles that help you get in and out of a chair and on and off the toilet. Strong quadriceps will keep you independent and living in your own home. There are other exercises that help maintain balance to reduce the risk of falling. Falls are a huge cause of disability in older people. There are few downsides to exercise, and even those in their 90s have been shown to benefit.

This is just a few of the items about aging well that I’ve been collecting over the years. Naturally, there are many other items on the list. The most important thing to remember is that the key to aging well is well within reach and it is never too late to get started.