

For the last several years, Drs. Winter and Kerns, two family physicians at VCU - Shenandoah Family Practice Residency, have been investigating evolving dementia care in nursing homes. Specifically, they have been evaluating for changes in prescribing and outcomes since CMS debuted the National Partnership to Improve Dementia Care in Nursing Homes. The National Partnership is a CMS initiative focusing on reducing the use of antipsychotic medications in nursing facilities. One policy change stemming from this federal initiative is the federally mandated requirement for facilities to publicly report the use of all antipsychotic drugs. An unintended consequence of the National Partnership, which the Front Royal researchers have described here in Virginia, is an increase in the use of alternative medications as antipsychotic drugs are used less. These alternative medications, namely mood-stabilizing antiepileptics like valproate, carbamazepine, and lamotrigine, are not safer or more effective in treating dementia symptoms in nursing homes but are not reported to CMS. To evaluate whether this prescribing phenomenon is occurring nationally, and to explore possible health and safety outcomes related to this trend, Dr. Winter and Dr. Kerns, together with collaborators at the VCU Department of Family Medicine and Population Health, were awarded a 5-year R01 grant from the National Institute on Aging. Beyond improving dementia care in the Commonwealth and nationally, the investigators hope to contribute to a movement shifting a fraction of the national research investment away from researcher-clinicians sited in urban tertiary care institutions and towards rurally oriented clinician-researchers. Dr. Winter and Dr. Kerns have both been part of the ACORN research network for more than a decade, and making research opportunities available to all clinicians in all locations of care is part of the ACORN network's mission.

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