nursing tasks. This presentation highlights new research conducted as part of a second Home Alone study to look closer at the family caregivers who perform these complex tasks with a specific focus on key medical/nursing tasks, including incontinence care, special diets, as well as certain sub-populations (e.g., multicultural communities, men, Millennials). An analysis of the increasing complexity of the challenges facing family caregivers who perform medical/nursing tasks in addition to assisting with instrumental activities of daily living and activities of daily living, will be shared. Presenters will also discuss its findings and the implications for individuals, their family caregivers and the healthcare providers who work with them.

ARE POLICY AND PRACTICE CHANGE TO SUPPORT FAMILY CAREGIVERS ON THE RISE?

Lynn F. Feinberg¹, 1. AARP Public Policy Institute, Washington, District of Columbia, United States

The challenges and pressures of family caregiving for older relatives or friends are a reality of daily life. Better recognition of and support for family caregivers has emerged as a national health, economic and social priority that can no longer be ignored. Unlike previous generations, most (60%) family caregivers work at a paying job today in addition to caring for older relatives with a serious health condition or disability. Building a better system of care for older adults means changes in workplaces as well as health care and LTSS settings. This paper presents an analysis of the key challenges that family caregivers face, and highlights policy developments and practice change at the federal and state levels since 2015. The presentation addresses the importance of personand family-centered care in everyday practice, and discusses the road ahead to change the culture of care.

THE ECONOMIC VALUE OF FAMILY CAREGIVING: NEW NATIONAL ESTIMATES AND STATE VARIATION

Ari Houser, and Ari Houser, 1. AARP Public Policy Institute, Washington, District of Columbia, United States

The economic value of family caregiving, by any measure, dwarfs actual expenditures on formal long-term services and supports (LTSS). This presentation discusses new estimates of the number of caregivers, intensity of caregiving, and the total economic value of family caregiving in 2017 in the United States, and in every state, the District of Columbia, Puerto Rico, and the Virgin Islands, based on a meta-analysis of recent nationally representative surveys of family caregivers. Previous analyses of this type have found that the total economic value of family caregiving has increased steadily from \$350 billion in 2005 to \$470 billion in 2013. State variation in the incidence, intensity, and economic value of caregiving will be discussed, and key predictors of this variation will be identified.

SESSION 3455 (SYMPOSIUM)

NIH PATHWAYS TO PREVENTION WORKSHOP: RESEARCH GAPS FOR LONG-TERM DRUG THERAPIES FOR FRACTURE PREVENTION

Chair: Lyndon Joseph, National Institute on Aging, Bethesda, Maryland, United States

Co-Chair: Faye Chen, NIAMS/NIH, Bethesda, Maryland, United States

The NIH Pathways to Prevention Workshop was held on October 30-31, 2018 to present scientific evidence, as well as physician and patient perspectives to better understand the benefits and harms of drug therapies for osteoporosis fracture prevention. Osteoporotic fractures lead to substantial morbidity, mortality, and economic costs. The underlying medical condition, is a skeletal disorder characterized by compromised bone strength predisposing to increased fracture risk. Several medications approved by the U.S. Food and Drug Administration to prevent osteoporotic fractures have been effective when taken by people who are at high risk of fracture. These include bisphosphonates, denosumab, teriparatide, estrogens, and selective estrogen-receptor modulators. However, rare but serious adverse events, such as atypical femoral fractures and osteonecrosis of the jaw associated with bisphosphonates have raised questions regarding the safety of their use. There is limited evidence on the benefits and harms of long-term osteoporosis drug therapy, including the timing and duration of drug discontinuation or drug holidays. It is not clearly known which patients will benefit or may be harmed from continued drug intervention, who should and should not be put on drug holiday, how to identify such patients and properly treat them, and how to predict their outcomes. Key scientific areas covered by the workshop included: the benefits and risks of osteoporotic drugs with short-term and long-term use and factors that influence outcomes; the impact of drug discontinuation and drug holidays on outcomes; and patient and clinician factors that impact the use of and adherence to osteoporotic drugs.

CURRENT STATE OF SCIENCE ON DRUG THERAPIES FOR OSTEOPOROTIC FRACTURE PREVENTION

Sundeep Khosla¹, 1. Mayo Clinic, Rochester, Minnesota, United States

During the workshop, experts discussed the state of the science. The U.S. Food and Drug Administration (FDA) has approved several medications to prevent osteoporotic fractures. These include bisphosphonates (BPs), denosumab, teriparatide, estrogens, and selective estrogen-receptor modulators. BPs are a first line of pharmacologic treatment for most women and men who have osteoporosis. Despite the efficacy of short-term use of BPs and other osteoporosis medications, treatment rates are low and appear to be decreasing. This talk would describe the problem/epidemiology of fracture prevention in the United States; the importance of drug therapy and their effectiveness; the limited evidence regarding long-term use of drug therapies; the questions surrounding the application of drug holidays; and the complex physician and patient factors that impact the use of and adherence to osteoporotic drugs.

REPORT ON SYSTEMATIC EVIDENCE REVIEW

Howard Fink¹, 1. Minneapolis VA Health Care System, Minneapolis, Minnesota, United States

During the workshop, results from a systematic evidence review prepared by an Agency for Healthcare Research and Quality Evidence-based Practice Center to inform the workshop were presented, focusing on long term osteoporosis drug treatment. This talk will describe the goals of the systematic