

mediated the relationship between VF damage and fall rates, with VF damage remaining an independent predictor of fall in models including gait and/or balance features (RR =1.36 to 1.48, p-value= <0.001 to 0.005). While balance and gait measures are associated with fall rates, they do not explain why persons with greater VF damage fall more frequently, suggesting the importance of other factors such as hazard perception.

SESSION 7120 (SYMPOSIUM)

FITNESS MATTERS AS WE AGE: A CELEBRATION OF THE VA GEROFIT PROGRAM

Chair: Miriam Morey

Discussant: Cathy Lee

In recognition of the GSA's 75th Anniversary "Why Age Matters" we celebrate the 7th anniversary of the Gerofit dissemination initiative. Gerofit is an exercise and health promotion program for older Veterans that has been declared a Veterans Health Administration (VA) "Best Practice" and been disseminated to 17 VA's across the country. Over 7000 Veterans have participated in Gerofit initiated programs and have reported robust outcomes including improved quality of life, physical and mental health, and high levels of satisfaction with the programs. For this symposium, we focus on newly acquired program outcomes that emphasize the importance of fitness as we age. The first paper compares hospitalization and emergency room visits between individuals participating in Gerofit for 12 months compared to a matched control group. The second paper describes four-year trajectories of physical performance to highlight the impact of becoming fit over expected normative trajectories. The third paper examines outcomes of a home-based geriatric walking clinic. The fourth paper describes the impact of exercise adherence on chronic pain. The fifth paper describes changes in medication utilization compared to a matched control group following 12-months of supervised exercise. These papers highlight the importance of fitness as a contributor to overall health during the aging process and celebrates that fitness matters, no matter when you start!

DOES GEROFIT EXERCISE REDUCE VETERANS' USE OF EMERGENCY DEPARTMENT AND INPATIENT CARE?

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Little is known about the relationship between exercise and health care utilization in older adults. This study examined hospitalizations/emergency Department (ED) visits

in the 12 months prior to and during 12 months of active Gerofit participation (across 5 sites). Data were compared for each outcome to a propensity matched nearest neighbor sample from the same site [Mean, 95% CI]. Of the 226 Veterans who were active in the program for ≥ 12 months and enrolled in VA and Traditional Medicare for 12 months prior to Gerofit participation, hospitalizations/ED visits were greater prior to (15.3%/42.0%) than during (6.8%/37.1%) Gerofit participation. Gerofit participants were 8% less likely to have a hospitalization in the 12 months following enrollment than controls [-0.08 (-0.14, -0.02)] but no between-group differences in ED use [-0.00 (-0.11, 0.10)] were observed. Participation in Gerofit may reduce hospitalizations, but its impact on ED use is inconclusive.

TRANSLATING EXERCISE BENEFITS OVER TELEHEALTH

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Background: Gerofit-Geriatric walking clinic is a home-based program that helps older veterans engage in regular walking via different platforms to improve access. The objective was to compare the outcomes of face-to-face visits to telehealth visits. Methods: Older Veterans (N=646) and walking-buddies (N=154) were seen either face-to-face or via telehealth at baseline, 2-, and 6-months. The primary intervention, pedometer feedback and motivational phone calls were delivered remotely. Results: Demographic data were similar in both Veteran groups and 47% were seen via telehealth. Compared to face-to-face, a higher proportion in the telehealth group had walking buddies (10% vs. 27%; p<0.001), received exercise counseling (75% vs. 95%; p=0.001), and reported perceived barriers (40% vs. 67%; p=0.004). There were statistically significant improvements in step-counts at 2- and 6-months compared to baseline (57% and 99% improvement; p<0.01) with no significant between-group differences. Conclusion: Tailored activity promotion programs via telehealth are effective in reaching older veterans.

CREATING AND KEEPING EXERCISE GAINS INTO YOUR 70S, 80S AND 90S

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