



**CONCURRENT SESSION PROPOSAL FORM**

Please complete this form and submit electronically to Glenda Rogers at [grogers@capcog.org](mailto:grogers@capcog.org) indicating "2010 TCoA Session Proposal" in the subject line. Should you have questions about the proposal process, please contact Glenda at 512.916.6053.

**Proposals are due by Friday, October 30, 2009 and may only be submitted via email.**

SESSION INFORMATION	
<b>SESSION TITLE:</b> <i>(The session title should simply be a one-line heading for your session.)</i>	Taste and smell dysfunction in the elderly : Diagnosis,Prognosis, Treatment and its effect on quality of Life
<b>PRIMARY PRESENTER NAME:</b> <i>(Individual who develops, arranges for co-presenters, oversees and attends the session.)</i>	Ronald Devere MD FAAN
<b>TITLE:</b>	Board certified Neurologist and Director of The Taste and Smell Disorders clinic,and Alzheimers Disease and Memory Disorders Center in Austin Texas
<b>ORGANIZATION:</b>	Private clinical neurology practice
<b>ADDRESS:</b>	1200 Lakeway Drive #8 Austin,Texas 78734
<b>TELEPHONE:</b>	Cell 5127993768 Office 5122617909
<b>EMAIL:</b>	rdevere @austin.rr.com
<i>(Attach a brief, maximum one-page, biography or vita for this presenter.)</i>	See accompanying Letter
<b>SESSION DESCRIPTION:</b> <i>(Please write a concise, action oriented description that provides important facts and generates excitement about the session. Focus on your primary session objective and let potential participants know what you expect will happen as a result of the session. Focus on issues and outcomes rather than the speakers. Please limit your description to 50 words. This description will be the basis of text used in promotional materials.)</i>	As we age our smell capabilities decline greater then taste,Medical conditions that can worsen this decline include:Diabetes,hypothyroidism,some prescribed medications,disorders of the nasal and sinus system(allergies,polyps,viral infections),head trauma,parkinsons and alzheimers disease among others.Smell and taste alteration may be symptomatic(complaints of smell loss and impaired flavors) with inability to enjoy eating.Smell and taste alteration may be asymptomatic(without complaints)but lead to decreased appetite,weight loss and depression.Regardless of presentation,quality of life is very impaired .Inability to smell smoke ,identify spoiled foods,or detect some home chemicals can lead to problems with health and safety,.A thorough diagnostic evaluation of the cause,information on prognosis and available treatment can improve outcome and quality of life in many cases.
LEARNING OBJECTIVES AND RELEVANCE TO FIELD OF AGING	
<b>LEARNING OBJECTIVES:</b> <i>(What do you want the audience to learn? Please indicate 2 or 3 learning objectives, being as specific as possible. Consider what the audience is likely to be looking for at the conference when crafting the session</i>	<b>By the end of this session, attendees will:</b>
	1. Understand Smell and taste changes in normal aging and why does it occur?

<p><i>objectives.)</i></p>	<p><b>2.</b> Learn common causes of smell and taste impairment in the elderly .How these various conditions are diagnosed and treated. Tests that are available for smell and taste testing are discussed and demonstrated how they work.How quality of life is impaired with taste and smell impairment and how they are treated.</p>
	<p><b>3.</b> <i>Learn how changes in food preparation can help people with these disorders get more enjoyment out of eating. .Learn General ways to prepare different foods and specific recipes found to be helpful from our patients are discussed. How to recognize and understand the risks of smell loss and suggestions for treatment</i></p> <p><i>How asymptomatic smell loss detected on a smell tests can be associated with increased risk for future cognitive decline, ,what people with mild cognitive impairment are on their way to developing alzheimers disease . Smell testing is one of the tests to help separate the diagnosis of classic parkinsons disease from other related Parkinson like disorders.</i></p>
<p><b>RELEVANCE TO FIELD OF AGING:</b> <i>(How will your session add value to the field of aging? Briefly respond –a few sentences per question.)</i></p>	<p><b>1. Why would those working or interested in aging-related issues be interested in this session?</b></p> <p><i>People help to take care of or evaluating the elderly, whether it be family members, ,nurses, ,social worker , counselor,or nutritionist need to know that many of the elderly they see may be at risk for their safety and, nutrition because of impaired taste and smell. Weight loss,decreased appetite and depression are not always due to medication,underlying cancer etc.</i></p> <p><b>2. How will the session explain a program implementation strategy and identify lessons learned in replicating it for others?</b></p> <p>This topic and session will educate professionals about common causes of taste and smell disorders in the aging population,about prognosis,treatment and ita ffect on quality of life. Receiving handouts on the topic and reviewing them periodically will increase their recognition of this common disorderand refer individual patients for further help.</p> <p><b>3. How is the specific issue or strategy in your session connected to other work being done on this issue, or how does it represent a change?</b></p> <p>The field of taste and smell disorders is poorly recognized in the medical field because of minimal education on this topic in graduate and undergraduate training.Ent physicians have the most knowledge in the field but are only interested in the surgical aspects of these disorders. The majority of the causes are not surgically related . Long term medical follow up is necessary and this is not an interest in the ENT field. There are a handful of specialtyclinics around the country including mine. The food and restaurant industry is also poorly informed about this subject. I spend much of my time educating all specialties including family practice in these issues. I and my copresenter have the first book in publication that is written for patients,caregivers,health care providers etc on the subject of Taste and smell disorders.</p>
<p><b>ADDITIONAL PRESENTER(S)</b></p>	
<p><i>We <u>prefer</u> sessions that have no more than two presenters due to the limited time available per session. <b>NOTE:</b> Please tentatively confirm each presenter at this time. The final conference sessions will not be selected and announced until December. You may be asked to make changes to the session as proposed.</i></p>	
<p><b>ADDITIONAL PRESENTER NAME:</b></p>	<p>MS Marji Calvert</p>
<p><b>TITLE:</b></p>	<p>Catering manager for the four seasons Hotel in Austin. She is the food consultant for My Taste and smell disorders clinic</p>
<p><b>ORGANIZATION:</b></p>	<p>Taste and smell disorders clinic</p>
<p><i>(Attach a brief, maximum one-page, biography or vita for this presenter.)</i></p>	<p>See accompanying sheet</p>
<p><b>ADDITIONAL PRESENTER NAME:</b></p>	

<b>TITLE:</b>			
<b>ORGANIZATION:</b>			
(Attach a brief, <b>maximum one-page</b> , biography or vita for this presenter.)			
<b>SESSION FORMAT AND A GENDA</b>			
(Briefly respond – a few sentences per question).			
<p><b>1. PLEASE DESCRIBE THE FORMAT OF THE CONFERENCE SESSION:</b>     <b>power point presentation with allowed questions and answers anytime during the presentation and after the presentation.</b></p> <p>The topics covered will be :The basic anatomy and function of the normal taste and smell system,Briefly discuss and show what tests are available for testing taste and smell, Discuss briefly some of the more common causes of taste and smell loss including prognosis,and treatment,and their impairment in quality of life.</p> <p>Case examples will be given to illustrate many points.</p>			
<p><b>2. HOW WILL YOU ENGAGE YOUR AUDIENCE?</b> Audience can ask questions any time during the presentation.Audience participation will also occur by asking them questions about their own or family members experience with taste and smell symptoms and its affect on their life. I lost part of my smell after a viral infection in 1996. I have struggled with this and have a brief story to tell about changes in my quality of life and why I have developed a major interest in this subject and started a Taste and smell disorders clinic.</p>			
<p><b>3. PLEASE PROVIDE A SESSION OUTLINE THAT DETAILS HOW THE SESSION TIME WILL BE SPENT:</b></p> <p>Session outline:</p> <ol style="list-style-type: none"> <li>Briefly describe my own smell loss and how it led me to specialize in it. Also discuss the advantages and disadvantage of smell and taste impairment in my experience.</li> <li>2.Briefly describe the prevalence of taste and smell disorders in the aging population</li> <li>Briefly describe the anatomy and function of the human taste and smell system with simple drawings</li> <li>How the systems work and how they change in aging.</li> <li>How to test for taste and smell changes with demonstration of the tests</li> <li>Briefly describe the common disorders that affect taste and smell function in the aging population and their prognosis</li> <li>Discuss the changes in quality of life in the patient with disorders of taste and smell that include safety, nutritional and occupational impairments</li> <li>Discuss treatment available for specific disorders. Such a replacing low thyroid,and B12,removing offending medication etc.</li> <li>Discuss changes in food preparation that is so important for compensating for taste and flavor loss. There a general suggestions and a list of recipes that many of our patients have given us because of their effectiveness in improving their eating enjoyment.</li> </ol> <p>(Marji Calvert my co-presenter will discuss item 9 in detail . It is one of the most important topic in this outline.)</p>			
<b>AUDIOVISUAL NEEDS</b>			
(For cost considerations, please indicate below only the A/V equipment that you actually plan to use. Flip charts, easels, LCD projectors, and laptops will be available upon request. We will attempt to supply other equipment as possible.)			
	Flip Chart		Easel
x	Laptop Computer	x	LCD Projector
	Other (please list)		Other (please list)



The need for Special Accommodations will be respected. Please note what considerations you will require:

**THANK YOU FOR YOUR SESSION PROPOSAL**