

UC San Diego

SCHOOL OF MEDICINE

The Division of Geriatrics, Gerontology & Palliative Care Newsletter



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Spotlight:

EB Sladek, MD and the VA San Diego CLC



What is your current profession/role?

I serve as the Medical Director of the Community Living Center (CLC) and Geriatrics Section Chief at the Jennifer Moreno San Diego VA. My focus is on post-acute care, taking care of Veterans in that murky space between hospital and home. I'm also honored to be on the core faculty for the Internal Medicine Residency and Geriatrics Fellowship, working with the best-of-the-best to recruit and train the next generation of geriatricians.

What initially inspired and motivated you to pursue a career in Geriatrics?

One of my big motivating factors is what I call the Tale of Two Grandparents.

I have had many incredible older adults in my life, including my paternal grandparents, to whom I was very close. My grandfather, Tite, was diagnosed with advanced bladder cancer when I was six years old. His primary care provider, having known him and his "what matters" for decades, suggested that hospice care might be the best option for him. Tite agreed and moved into our house for the last few months of his life where we enjoyed countless after-school popsicles and knock-knock jokes, snuggling in the big Laz-y-Boy where he spent most of his final days. I howled so much at his funeral that I had to be physically removed from the service. But in retrospect, I came to see that his final journey was capped by a beautiful, dignified death, facilitated by a provider who knew him and helped enable his preferences until the very end. That Laz-y-Boy still has a prominent place in my living room.

Sixteen years later, after a period of progressive decline, my grandmother, Coca, sustained a hip fracture and was treated by a hospitalist she had never before met, discharged to a SNF under the care of a provider she only saw once, and then ultimately died suddenly and alone in an unfamiliar nursing home, likely from a pulmonary embolism. I was applying to medical school at that time and was appalled by the idea that we had gotten death so right for Tite nearly two decades earlier and then gotten it so wrong for Coca in what was ostensibly the most advanced period of time the world has ever seen.

Not all progress is forward, particularly in under-resourced parts of the healthcare world. Until that point, I had been very interested in pursuing a career in international medicine (I was, in fact, working on a Fulbright project in Mauritius when Coca died). But seeing firsthand the need to improve care in our domestically underserved geriatric population changed that for good.

What parts of your work have been particularly inspiring or rewarding for you?

There was a survey that came out years ago revealing that four out of five older adults would rather die than end up in a nursing home. At that time, I quipped that four out of five physicians would rather die than end up practicing in a nursing home. But after getting a taste of nursing home care in fellowship, I was fully hooked.

Being a SNFist is like being a doula. After a whirlwind inpatient stay, folks who sustain a major injury or receive a new catastrophic diagnosis are transferred to a SNF and left laboring to understand what lies ahead. SNFists receive them in this time of transition, get to help them process their new set of circumstances, and then "deliver" them to a new world of often uncharted territory. The "baby" at the end of this tenuous metaphor varies. Sometimes it is a full recovery and unmitigated joy. Sometimes it means going home but with new hardware, like a walker, often accompanied by new humility. And sometimes it means that home will never again be an option.

What is inspiring to me is the way the human spirit gamely grapples in this context and so often comes through to a place of reconciliation. The capacity for human adaptation is remarkable. And to be a part of that journey, in a setting that allows for truly integrated interdisciplinary work, is beyond rewarding.

What is your go-to stress relief activity during a busy workweek?

My favorite stress-reliever of late is mountain biking with my family. I am by far the slowest antelope in the pack, but watching my oldest son fly down a trail makes my heart swell with joy. And the feeling of the flow as I embark on my much slower descent over rocks and bumps and turns is truly sublime.

If you had to choose a different profession, what would it be?

So many options, so little time!

For the last two years, I have coached my younger son's Lego robotics team, which is one of the most satisfying roles I've ever filled. I love watching 10-year-olds troubleshoot mechanical missions and brainstorm project ideas and learn to work together as a team. There's something about kids that is uniquely inspiring, particularly when parts of the world can feel hopelessly broken. I have already volunteered to serve as the part-time science teacher at Jefferson Elementary when I retire from the VA.

That's probably all I have time for in this life. But in the next one, I'd like to write more. Perhaps in a way that is compensated for by exotic travel and food. And in a world with a time machine, I'd go back and get my JD and fix the opiate crisis before it started.



VA San Diego Geriatrics and Palliative Care: Growing to Meet Veteran Needs

Our division not only includes our medical team practicing at UC San Diego clinical locations, but also our amazing colleagues providing medical care and teaching at the VA! The VA San Diego Geriatrics

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spectrum palliative services, has had an exciting few years of growth! Over the past decade, we have expanded from two to ten providers with a team that now includes six board-certified in geriatric medicine and two board-certified in palliative care, broadening our reach across inpatient, post-acute, and palliative care. We welcomed Dr. Kristie Hsu in 2025, who quickly became a key member of our team and helped establish San Diego VA as an official Gerofit site. Beginning in October, she will serve as the Director for this program, which is a data-driven approach to improving mobility and reducing falls in community dwelling Veterans. We are also preparing for the opening of our new Community Living Center (CLC) later this year, with a projected 50% increase in beds. To support this expansion, we are excited to welcome two homegrown trainees, Dr. Jean Guan and Dr. Will Fleming (both completed geriatrics fellowship here at UC San Diego), who will help expand our age-friendly health system inpatient geriatric consultation services and lay the groundwork for an Acute Care for the Elderly (ACE) Unit.

Our palliative care services have grown in parallel, with a formal end-of-life unit led by Dr. Zaida Albarracin, an expanded outpatient clinic under Dr. James Templeman, and a strengthened inpatient consultation service led by Dr. Shin Lin. We have also benefited enormously from Dr. Sarah Evans' cross-bridge role between the VA and UC San Diego. Meanwhile, our ICT-SCOUTS (Supporting Community Outpatient, Urgent care and Telehealth Services) program, led by Dr. Tomasz Beben with support from Dr. Sheila Bhavsar (both of them also UC San Diego geriatrics fellowship alumni), continues to provide geriatrics expertise to high-risk Veterans discharged from the La Jolla VA Emergency Department. We are proud of this remarkable growth and, most importantly, grateful to our team and partners who continue to help us build innovative services for San Diego's aging Veteran population.

Falls Prevention Awareness Month

September is recognized nationwide as Falls Prevention Awareness Month, with Falls Prevention Awareness Week taking place this week (September 21–25). It provides an opportunity to raise awareness about the impact of falls on older adults and the steps we can all take to help prevent them. One in four older adults (65+) fall each year and as we get older, we are more likely to fall. In 2016, over 20,000 older adults were treated and discharged from the Emergency Department and an additional 7,000 were admitted for inpatient care in San Diego alone. Falls are not an inevitable part of aging, and addressing risk factors early can help older adults maintain their independence and quality of life. Simple strategies such as staying active and working on strength and balance, reviewing medications, keeping vision and hearing up to date, and making the home environment safer can make a meaningful difference. Falls prevention is a team effort, and even small changes can help older adults stay on their feet and continue doing the things they love.



Falls Prevention Awareness Month



Take simple steps to prevent falls

- ✓ Stay active
- ✓ Check medication side effects
- ✓ Have your vision checked
- ✓ Stay hydrated
- ✓ Make your home safer

[More about Falls Prevention Awareness Month](#)

Helpful Resources

San Diego County Aging & Independence Services - Fall Prevention Programs

FALL PREVENTION
AWARENESS MONTH
2026



Join the San Diego Fall Prevention Task Force for educational events focused on preventing falls among older adults. Learn proven strategies to lower your risk and stay safe!

[Visit San Diego Fall Prevention Website](#)

CDC's STEADI: Older Adult Fall Prevention



STEADI

Overview of STEADI and video resources for older adults, health care providers, and caregivers.

[Learn More >](#)

Patient & Caregiver Resources

This page is a collection of patient and caregiver resources relating to older adult falls.

STAND STEADI Videos

This video series highlights how STEADI prevents falls among older adults.

Success Stories

Read success stories of how STEADI is helping older adults age without injury.

[Visit CDC STEADI Website](#)

National Council on Aging: Falls Prevention

[Aging Well](#) ▾[Professional Resources](#) ▾[About Us](#) ▾[Get Involved](#) ▾[Donate](#)[Home](#) / [Aging Well](#) / [Health & Wellness](#) / [Prevention](#)

Falls Prevention

Everyone can take steps to prevent falls. You can lower your risk by doing the right exercises, making your home safer, getting regular health checkups, and more. Learn the steps you can take to stay safe.

[Check Your Falls Risk](#)[Maintain Your Medication Record](#)[Home Safety Checklist for Falls Prevention](#)[Visit NCA Falls Prevention Website](#)

What's Happening

Dr. Michael Corley on Good Morning America



Dr. Michael Corley recently joined *Good Morning America* to discuss emerging research exploring whether GLP-1 medications may have a role in slowing aspects of the biological aging process. His appearance highlights the innovative research and clinical expertise happening within our division and the important questions our faculty are helping bring to the broader conversation.

[Watch it here](#)

Wellness Event: Giving Back to Our Community

Our team had a wonderful time volunteering with Feeding San Diego at this past Saturday's Wellness Event! It was a great opportunity to give back to our community, connect with colleagues and families, and enjoy a meaningful day of service together. Thank you to everyone who came out and made the event such a success!



[More about Feeding San Diego](#)

In the News...

Research from Dr. Aladdin Shadyab was published in the Journal of Gerontology: Medical Sciences, exploring epigenetic clocks and their relationship to exceptional longevity. Read it [here](#).

Recent publications from PubMed:

[Loss of Independence Among Racially and Ethnically Diverse Older Adults: An ICF-Based Analysis of NHATS](#)

Background: Preventing mobility-related loss of independence (LoI) is a critical public health priority. While the drivers of LoI are complex, this study examines how personal, social, and environmental factors influence these outcomes to identify actionable preventive targets. We applied the International Classification of Functioning, Disability, and Health (ICF) framework to examine these pathways across racial and ethnic groups. Methods: Using 2023 National Health and Aging Trends Study...

Tue, Sep 15, 2026

[Read more](#)

[Prevalence, risk factors, and racial disparities in probable and possible dementia: the national health and aging trends study](#)

CONCLUSION: The burden of cognitive decline is deeply unequal, proving standardized interventions insufficient for minority older adults. Addressing these disparities necessitates culturally responsive care pathways and the elimination of structural barriers, particularly inadequate insurance coverage for audiology and dental services.

Sat, Sep 12, 2026

[Read more](#)

[Mucosal-associated invariant T cells respond to colonic microbiome alterations during acute HIV infection](#)

Mucosal-associated invariant T (MAIT) cells are an unconventional subset of T cells that respond to vitamin B2 metabolites from a range of bacteria and fungi. We have previously reported that peripheral MAIT cells are activated during acute HIV infection (AHI) in a manner associated with markers of microbial translocation. Here, we characterized peripheral and colonic MAIT cells from people with HIV (PWH) during AHI and after ART initiated during AHI or chronic HIV infection (CHI) and...

Thu, Sep 10, 2026

[Read more](#)

[Cannabis Use Among People Aged 65 and Older: Results From an Intercept Survey in New York City](#)

CONCLUSIONS: Findings suggest that cannabis use among older adults may be more common and clinically significant than suggested by prior evidence. Improved screening, clinician education, and harm reduction strategies are needed to confront emerging risks in this population.

Wed, Sep 09, 2026

[Read more](#)

We want your feedback!

Did you know that the division has a virtual suggestion box where you can provide anonymous feedback? [You can access that here.](#)

You can also access the virtual suggestion box on the division's [website](#) – scroll to the bottom of the homepage and click on the feedback link.

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Please consider donating to our mission. While we continue to make great strides, we are limited on what we can accomplish with existing funds. We encourage you to become involved with the UC San Diego Division of Geriatrics, Gerontology, and Palliative Care. Join us to help older adults live their best lives longer and improve care for individuals with serious illness. By supporting our efforts, you can ensure that our research, education programs, and clinical care keep pace with the needs of our community and remain strong.

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