

Pennsylvania at the end of 2020.

**Design/Methodology:** Charles Morris Nursing and Rehab (CMNRC) was a non-profit 93-bed NH affiliated with the Jewish Association on Aging. Like many SNFs, the long term financial problems with Medicaid payment were exacerbated by the pandemic. The decision to close was made in November 2020. At this time there were 56 long term residents, and Social Work assisted with disposition of these patients. The transition between levels of care was tracked.

**Results:** 71% of patients were female, and the average age was 87 years old. 63% were Medicaid, 23% were private pay, and 14% were Medicaid/Community Life. 43/56 (77%) were transitioned to the same level of care at other local SNFs. 5/56 (9%) were transitioned to ALFs. 4/56 (7%) were transitioned to PCHs. 4/56 (7%) were transitioned to HBCs.

**Conclusion/Discussion:** At the close of CMNRC, not all patients were transitioned to the same level of long term care. Many of these transitions were impacted by restrictions and limitations due to the COVID-19 pandemic. 23% of patients were transitioned to a lower level of care. This may suggest that ALF, PCH, and home based services may serve as potential substitutes for patients who have greater financial resources and strong family support. The COVID-19 pandemic has provided an opportunity to re-evaluate the role of long term care for older adults.

**Disclosures:** All authors have stated there are no financial disclosures to be made that are pertinent to this abstract.

### Utilization of Life Enrichment Activities During the COVID-19 Pandemic and Their Effects on Nursing Homes Residents



**Presenting Author:** Hadeel Awad, MBBS, MPH, Michigan State University, Tele- Geriatric Research Fellowship

Abdalmahmoud Alwali, MBBS, Michigan State University, Tele- Geriatric Research

**Author(s):** Alaa Abdelsamad, Varda Choudhry, MBBS, Avinash Bakhtiarपुरi, MBBS, Nadir Abdelrahman, MD, CMD, Amna Elkhidir, MBBS, Afrah Al Sharaby, MBBS; and Wiam Osman, MBBS

**Introduction/Objective:** Life enrichment (LE) activities are highly preferable among nursing home residents (NHRs). Unfortunately, they were widely restricted during the COVID-19 pandemic due to safety measures, health precautions, and social isolation. This pandemic had its toll on the mental health of NHRs. Little is known about the changes or adjustments of the recreational programs during this pandemic. This study aims to assess the utilization of recreational activities in nursing homes and their effects on the residents in 3 states during the COVID-19 pandemic.

**Design/Methodology:** A cross-sectional study design used phone-reported questionnaires to enquire about the utilization of the recreational activities in the nursing homes during the COVID-19 pandemic and their effects on the residents in the following states: Texas, Florida, and California. The sample selection was purposive since the 3 most COVID-19-affected states were selected. A total of 41 responses were collected from nursing home life enrichment staff from August to October 2021.

**Results:** We found that the most common hallway activities were Bingo and Trivia by 85.4% and 53.7% respectively, while the most used devices for other activities included residents' smartphones (63.4%), iPads (58.5%), and tablets (53.7%). To communicate with their family members virtually, NHRs mostly used Facetime (90.2%) and Zoom (51.2%). The residents' morale and engagement with activities were decreased in 51.2% of the responding facilities. About 63.4% of the activity staff members revealed difficulty in offering activities to the residents largely due to limited time that allowed them to be in the residents' rooms and the limitation of the group activities. Interestingly, a decline in the residents' cognition due to loneliness and boredom was reported in 41.5% during the pandemic.

**Conclusion/Discussion:** Recreational activities for nursing home residents are important, especially during the COVID-19 crisis. Staff who offered these activities faced many challenges such as decreased morale and engagement among the residents in addition to the limitations in the group activities due to COVID-19 restrictions. There was a good use of technology in keeping the residents' communication with their families, but still the immense impact of COVID-19 was largely undefeatable.

Further studies are needed to shed more light on the activities offered to nursing home residents.

**Disclosures:** All authors have stated there are no financial disclosures to be made that are pertinent to this abstract.

### Variability of Anti-Seizure Medication Concentrations in Older Adult Nursing Home Residents



**Presenting Author:** Ilo Leppik, MD, University of Minnesota

**Author(s):** Angela Birnbaum, PhD; and Silvia Illamola, PharmD, PhD

**Introduction/Objective:** Approximately 10% of nursing home (NH) residents are taking an anti-seizure medication (ASM), and 7.8% have an epilepsy/seizure indication. In one recent study, levetiracetam (LEV) and phenytoin (PHT) were the most commonly prescribed ASMs in US NH residents. There are major differences in pharmacokinetics (PK) among ASMs. PHT has complicated PK and its absorption is pH-dependent, and LEV is very water-soluble with few drug interactions. The side effect profiles also differ, with PHT being associated with ataxia and LEV with behavioral problems. This study was done to evaluate the intra-individual variability of (LEV) and phenytoin (PHT) plasma levels in nursing home (NH) residents, and characterize the association between blood concentrations and its variability, with the presence of falls and seizures.

**Design/Methodology:** This was a prospective study that involved collection of 3 ASM concentrations 4 or more weeks apart, a neurological examination, and review of medical records for seizures, falls and other medical issues. Because of HIPAA rules, medication records were reviewed by staff, residents receiving PHT or LEV identified, and approached to obtain consent to allow the research team to discuss the study with the resident. Drug concentrations were measured while on stable steady-state doses. The relationship of ASM blood concentration and variability with the presence of falls or seizures were analyzed.

**Results:** Only 42 individuals (69.1% women) were included: 21 receiving LEV and 21 PHT were recruited because in some NH, none were entered, and only a fraction of eligible subjects consented. Median (range) daily doses were 1000 (500 – 3000) mg/day for LEV and 380 (100 – 600) mg/day for PHT. Concentrations between the 3 visits varied widely, ranging from 3.5% to 61.4% for LEV, and from 5.7% to 33% for PHT (coefficient of variation). Percentage of individuals with concentrations lower and higher than the laboratory published ranges was 18.1% and 16.9% for LEV, and 36.9% and 13.1% for PHT. PHT was the ASM associated with the highest percentage of individuals experiencing falls but n was too small for statistical analysis.

The study represented 14.6 patient years; 5 seizures occurred (0.34 seizures per year), 1 seizure each in 4 individuals on PHT and 1 individual on LEV.

**Conclusion/Discussion:** This study raises several observations and questions.

- 1) With considerable variability in concentrations of LEV and PHT in older adult NH residents what is the role of obtaining ASM levels?
- 2) Falls appeared to be more common with PHT, but are the side-effects of behavioral issues with LEV less of a problem?
- 3) Seizures were quite infrequent, even with low ASM levels. Given the rare occurrence of seizures and potential for side-effects from ASMs, studies are needed to determine if ASMs are used appropriately and if initiation of an ASM after a single seizure is warranted in all cases.
- 4) The low number of subjects illustrates the difficulties performing studies in NH environment.

**Disclosures:** This research is funded by NIH grants P50 NS 16308 and R01-AG026390 from the National Institute on Aging (NIA)