Navigating the Intersection of Firearms, Dementia, Depression and Aging

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10/10/23, Eastern Pennsylvania Geriatrics Society
Slides courtesy of Emmy Betz, MD (MARIAN.BETZ@CUANSCHUTZ.EDU)

Background

Prevalence of firearms in the US, risk of firearm-related injury in older adults, and logistics around firearm access in dementia

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Household firearm prevalence (65+)

37.1% (95%CI 34.9–39.4%) of older adult households have firearm(s)
27% own a gun
10% live with a gun owner

Characteristics of older firearm owners (50-80 years)

<table>
<thead>
<tr>
<th>Characteristic</th>
<th>Adjusted OR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>3.64</td>
</tr>
<tr>
<td>White, non-Hispanic</td>
<td>1.88</td>
</tr>
<tr>
<td>Veteran</td>
<td>2.49</td>
</tr>
<tr>
<td>Kids in/visit home</td>
<td>1.45</td>
</tr>
<tr>
<td>Income &gt;$60k</td>
<td>1.74</td>
</tr>
<tr>
<td>Rural</td>
<td>2.84</td>
</tr>
<tr>
<td>Midwest (vs NE)</td>
<td>1.87</td>
</tr>
<tr>
<td>South (vs NE)</td>
<td>2.06</td>
</tr>
<tr>
<td>West (vs NE)</td>
<td>2.32</td>
</tr>
</tbody>
</table>

Also adjusted for age, education, marital status, self-rated health.

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Firearm injury risks in older adults

**Suicide**

- 84% age 50+ firearm deaths due to suicide
- Firearms most common method of suicide among people with dementia
  - 73% vs 50% (all ages)
- Dementia as suicide risk factor

Firearm injury risks in older adults

Homicide

- Dementia can involve hallucinations, delusions, agitation, aggression
  - Depending on symptoms, person with dementia may pose a risk to others

Unintentional

Impaired memory and judgment

No current federal or state law prohibits healthcare providers from discussing firearm safety with patients.
State laws related to dementia & firearms

Prohibits possession if "organic brain syndrome" ... no requirement related to severity or risk, unclear how law applied

“chronic dementia” ... ineligible for license to carry handgun

May still purchase or possess

H.R.S. § 134-7(b)
H.R.S. § 134-2(b)
Texas Gov't Code § 411.172(h)(1)(A)
Texas Gov't Code § 411.172

• Biggest barriers were to asking about firearms were not knowing what to do with patients' answers about access to firearms (72.1%), not having enough time (66.2%), not feeling comfortable identifying patients at risk for firearm injury (49.2%), and not knowing how to ask patients about firearm access (48.6%)

• 51.5% of respondents who had prior medical education about firearm injury prevention reported asking compared with 31.8% who had not received such education

• More than 90% of respondents were interested in further education about interventions, what questions to ask, and legal mechanisms to separate dangerous people from their firearms
• 62% of older adults reported comfort with physicians asking about the presence of a firearm in the home in the context of depression, suicidality, or cognitive impairment, with less than 20% of patients reporting discomfort with questioning.
• Many physicians do not routinely question patients about the presence or safe storage of firearms, although numerous physician groups and publications have called for physician engagement in firearm safety efforts.
• Patients support context-specific questioning more than routine screening.

...given the high rates of suicide among older adults, especially men—the majority of whom, if they die by suicide, will have used a firearm—it is critical that physicians counsel at-risk patients to reduce firearm access. Failing to do so is tantamount to ignoring the suicide prevention intervention for which evidence is most compelling.

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**Decision-making about firearm access**

Perhaps similar to decisions about “driving retirement”?

- Strong emotions
- Fear of confiscation
- Independence
- Autonomy
- Identity
- Time to prepare
- Logistical concerns
- Physical/cognitive ability
- Safety

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Cars vs. Guns

- 83% of adults aged ≥70 years have a driver's license and approximately 44% of current drivers drive daily
- 42% of those aged ≥65 years live in a home with a firearm, and nearly 70% of older firearm owners have handled their gun(s) at least once in the past year

Both driving and firearm use require physical ability (e.g., manual dexterity, strength, vision, and reflexes) and cognitive processing (e.g., memory and situational awareness); any of these can be affected by myriad medications, medical conditions, or age-related physiologic changes

- Fatal crash rates rise with age, especially above age 70; in 2020, about 7,500 older adults died in car crashes
- Rates of violence also vary with age, with high rates of firearm suicide among older men, and approximately 16% of all U.S. firearm deaths were among adults aged ≥65

both activities may pose a risk of injury or death to the user and to those around them, particularly if physical or cognitive impairments are present.
Resources exist to support planning for driving transitions, including guidelines, educational materials, “advance driving directives”

**Clinicin’s Guide to Assessing and Counseling Older Drivers**

- Firearm-specific “advance directives” may help older adults and families proactively discuss firearm access and consider setting conditions under which firearm retirement would occur
- only 22% of older gun owners had a plan for transferring their firearm in the case of cognitive impairment

Key unanswered question: How to engage older adult firearm owners in making plans for when and how to voluntarily reduce access to or use of firearms?
Cars vs. Guns

- "retirement" was not an acceptable term for firearms
- reducing driving may affect daily independence more, but there are few alternatives for the psychological safety conferred by firearms
- there are specific firearm-related legal concerns but more driving-related regulations, policies, and resources

A Dangerous Case

You can’t take away my driver’s license. I have guns, and I’m going to kill you?
Adult Protective Services
Perspective
Firearm Life Plan

A new resource for the public
Firearm Inventory

<table>
<thead>
<tr>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
</tr>
</thead>
<tbody>
<tr>
<td>Firearm Details</td>
<td>Where is it?</td>
<td>Where it will go? And who gets it?</td>
<td>When?</td>
<td>Notes</td>
</tr>
<tr>
<td>Example: Smith &amp; Wesson 629, Good Condition</td>
<td>Gun safe in my house</td>
<td>Move into safety deposit box whenever my condition worsens or I can’t make decisions (develop dementia or physical disabilities)</td>
<td>This was given to me by my father, no sentimental value</td>
<td></td>
</tr>
<tr>
<td>Example: 9mm, Good Condition</td>
<td>Gun safe in my house</td>
<td></td>
<td>Good friend’s gift, can help teach grandchildren how to shoot</td>
<td></td>
</tr>
<tr>
<td>Example: .22LR, Basic condition</td>
<td>Safe kept in safe deposit box</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Example: .22LR, Poor condition</td>
<td>Gun safe in my house</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Example: .380 Auto, Excellent condition</td>
<td>Key location: sock</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Legacy Map

WORKSHEET: LEGACY MAP
This document helps you to document the memories and meanings attached to your firearms. Use it to document the memories and meanings attached to your firearms. Like the inventory, you share it with only those you want.
Q&A, Discussion

Thank you to: Drs. Betz and Simonetti for their slides and significant contribution to this field.

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