Meet Your Geriatric Cardiologist

Q&A with Deena Goldwater, MD, PhD

What do you like most about being a physician?
The people. I have the privilege of both collaborating with accomplished professionals who are leaders in their fields, and caring for patients who are accomplished in so many ways. Everyone has a unique story and varied interests and I always enjoy getting to know my patients as individuals.

What are your clinical roles and activities?
I run the geriatric cardiology outpatient clinic. We specialize in caring for patients with cardiovascular diseases who also have conditions common in aging such as multiple medical conditions, frailty, depression, or cognitive impairment. We prioritize open communication with patients, their families, and other medical team members such as primary care doctors and specialists, so that treatment plans are coordinated and maintained across all medical platforms.

A few weeks each year, I also serve as the attending physician on geriatric service at UCLA Santa Monica Hospital affording me the opportunity to both care for patients, and teach residents and medical students about caring for older adults.

What is your wish list?
As a researcher and a clinician I am always pursuing the most effective ways to serve my patients. Currently, I have three items on my wish list.

First, I want to grow the geriatric cardiology clinic. Currently, we only provide outpatient clinic visits and consultations. I’d like to expand this program to a broader offering of geriatric cardiology care and consultations both for hospitalized patients and patients who are homebound. To expand our offering we first need to secure funding for additional physicians and nurse practitioners to join our team. I believe that the best medical care incorporates patients’ preferences and goals into the treatment plans. Cardiologists follow many guidelines, however, patient-prioritized goal-directed management is not currently part of standard cardiovascular practice. To provide the best care to as many people as possible, my wish list includes funding to support our research focused on the development of a standardized method of incorporating patients’ health and life goals into cardiovascular management decisions. My research seeks to develop a tool for practicing cardiologists that will help them elicit patient-prioritized life and health goals and to measure the success of treatment based on
the degree of goal-attainment.

The final item on my wish list is to fund research to understand why older adults are more vulnerable to disease and disability after undergoing a stressful event such as a cardiovascular procedure. It may seem obvious that our ability to respond to stress changes as we age. But we don’t understand how that change impacts, for good or for bad, the body’s ability to respond and adapt to stress. My research involves observing a small group of cardiovascular patients undergoing a procedure called transcatheter aortic valve replacement, monitoring their stress response, and identifying components of the stress response that may lead to adverse outcomes. Ultimately, we hope to identify elements of the stress response that we can target with medications that will minimize the procedural risks faced by older adults and improve the chances for a successful and robust recovery.

What have your patients taught you?
So much! As a researcher, my natural curiosity extends beyond the boundaries of medicine and my patients have taught me so much. But perhaps my favorite thing that I have learned from one of my patients is an age-old treatment—how to make the best matzo ball soup!