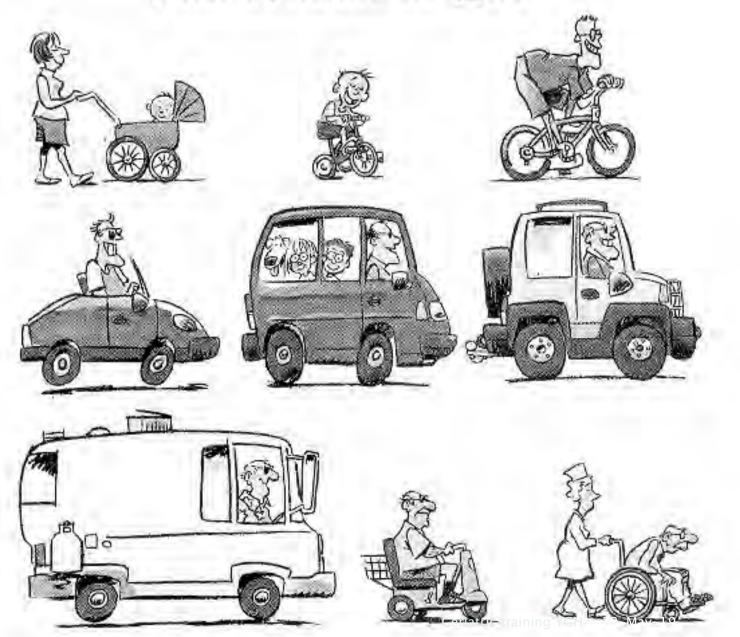
Promotion of Health & Prevention of illness in the Elderly

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The Wheels of Life



Determinants of Ageing



Geriatric syndrome

- Fall
- Delirium
- Frailty
- Sarcopenia
- Urinary incontinence



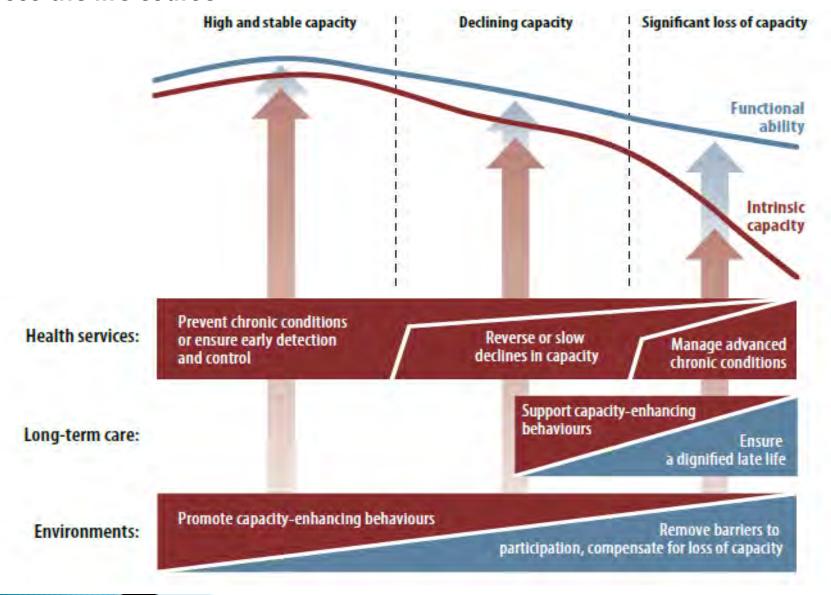
Characteristics of elderly patients

- (1) Atypical presentation
- (2) Multiple pathology & aetiology
- (3) Multiple abnormalities
- (4) Medication problems (Polypharmacy)
- (5) Goal of care & social factors
- (6) Rehabilitation





health action across the life course



2015

Prevention of illness

- Patients should perform comprehensive geriatric assessment through which the following measures were considered
- Prevention of Disease in the Elderly
- Prevention of Frailty
- Prevention of Injuries in the Elderly
- Prevention of latrogenic Complications in the Elderly
- Prevention of Psychosocial Problems in the Elderly

PREVENTION OF DISEASES

Elderly Clinic on every Wednesday

- General medical check up
- Eye , ear , nose , throat examination
- Oral and dental health care
- Referral











CATEGORIES

- Preventive interventions are typically categorized as primary, secondary, or tertiary.
- Primary prevention refers to prevention of disease (eg, immunizations, chemoprophylaxis).
- Secondary prevention is the early detection of disease before it becomes symptomatic (eg, mammography to detect early breast cancer)
- Tertiary prevention refers to activities to optimize health once disease is already detected.

PRIMARY PREVENTION

1. COUNCELING, LIFE STYLE MODIFICATION

- Diet
- Physical activity
- Safety and injury prevention
- Smoking cessation
- · Dental care



2. Immunizations:

1 - Influenza:

- Annual in Oct. to mid-Nov. (4-5 months of protection)
- Recommended for all ≥ 65 yr or < 65 yr with comorbidities

2-Pneumococcal pneumonia:

- For all ≥ 65 yr or < 65 yr with comorbidities
- Revaccinate high-risk persons every 7-10 yr Repeat in 5 yr if person was vaccinated before age 65

3- Tetanus: -

- Primary series: 2 doses 0.5 mg IM 1 to 2 mo apart, then 1 dose 6 to 12 mo later
- Booster every 10 yr



3. Chemoprophylaxis

- ASA to prevent MI
- Calcium (1200mg) and vitamin D (≥800IU) to prevent osteoporosis
- Omega-3 fatty acids to prevent MI, stroke
- Multivitamin



SECONDARY PREVENTION

SCREENING:

- 1-Hypertension; Check blood pressure at least annually
- 2- Obesity or malnutrition: measure weight and height at least annually
- 3- Visual deficits: Routine screening with a Snellen chart annually
- 4- Hearing impairment: It is recommended to periodically questioning older adults about their hearing abilities annually





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- 5-Dyslipidemia Patients with prior MI or angina should be screened for lipid abnormalities annually
- 6- Osteoporosis: women aged > 65 and screened at least once by using bone density measurement, for those at high risk for osteoporotic fractures, it is recommended to begin screening at younger age group.

7- Cancer screening measures:

- a-Breast: mammography/ 2-3 years at age 50-74 and breast self examination/month
- b-Colorectal: Annual FOBT and/or flexible sigmoidoscopy every 3-5 years or colonoscopy once.
- c- Cervical cancer: Pap smear every 1-3 yr if woman is sexually active, Cut-off after 65 with history of normal smears or after 2 normal smears 1 yr apart



USPSTFa Recommendations for Secondary Prevention

Abdominal aortic aneurysm ultrasonography
Alcohol abuse screening
Depression screening
FOBT/sigmoidoscopy/colonoscopy
Hearing impairment screening
Mammography^d
Pap smear^e



Other Recommendations for Primary Prevention^f

ASA to prevent MI
Bone mineral density (men)
Calcium (1200mg) and vitamin D
(≥800IU) to prevent osteoporosis
Measurement of serum C-reactive
protein
Omega-3 fatty acids to prevent MI,
stroke
Multivitamin



Other Recommendations for Secondary Prevention^f

Skin examination
Cognitive impairment screening
Glaucoma screening
Inquiry about falls
TSH in women
Visual impairment screening

OTHER ASPECTS OF PREVENTION IN ELDERLY

Prevention of Frailty

Exercise healthy diet



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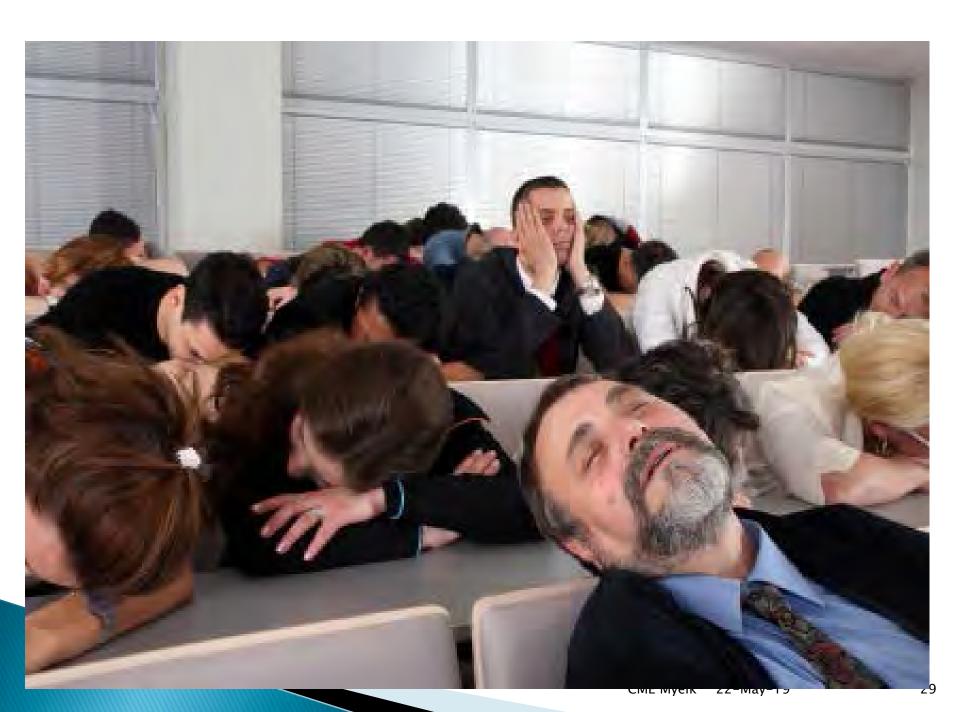
Prevention of Injuries in the Elderly

- Falls, Home hazards
- Driving hazards

Prevention of Iatrogenic Complications in the Elderly

PRINCIPLES OF PRESCRIBING FOR OLDER PATIENTS: THE BASICS:

- Start with a low dose
- Titrate upward slowly, as tolerated by the patient
- Avoid starting 2 drugs at the same time
- OTC review
- Medication reconciliation
- Renal, hepatic function



Health Promotion Approach

Individual Social, Economic and Environmental

Elements of Health Promotion

- Health Impact Assessment
- Local Community Focus
- Primary Prevention
- Empowerment of Individual

Method of Implementation

- Advocacy
- Social Support
- Empowerment



Questions ??????

