

Principle of Geriatric Medicine

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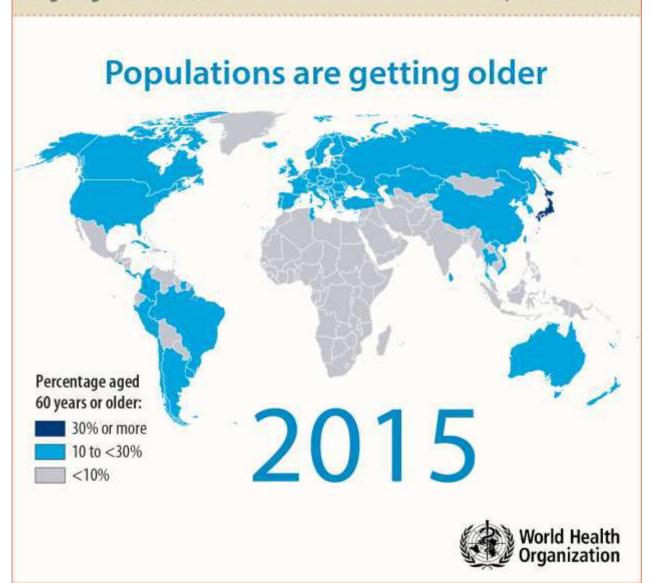






Ageing and Health

#yearsahead

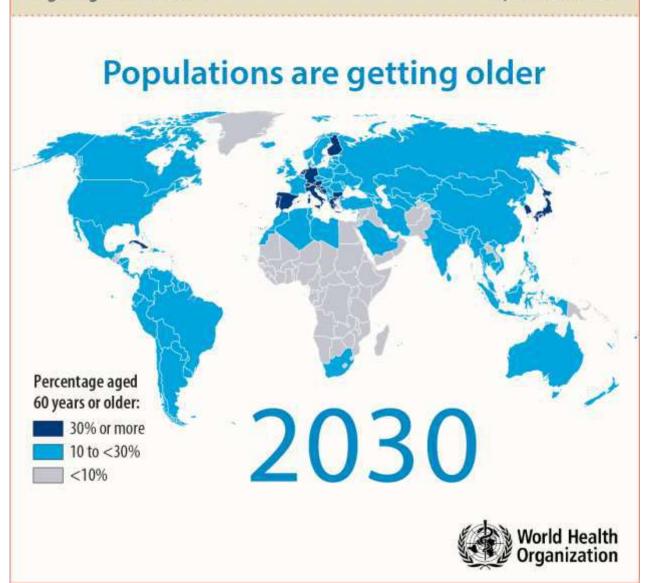






Ageing and Health

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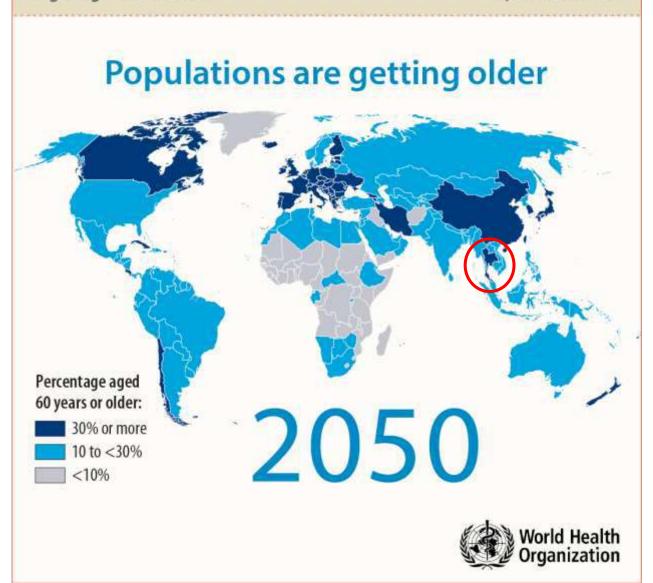




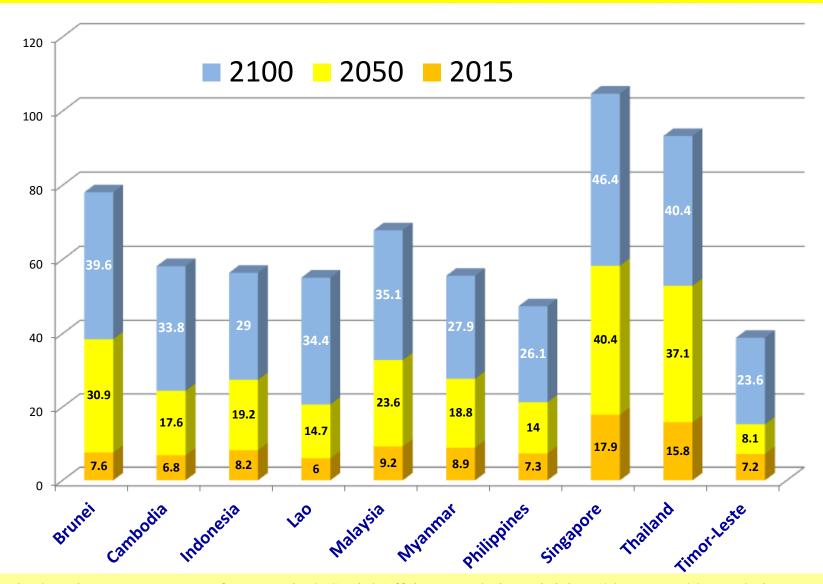


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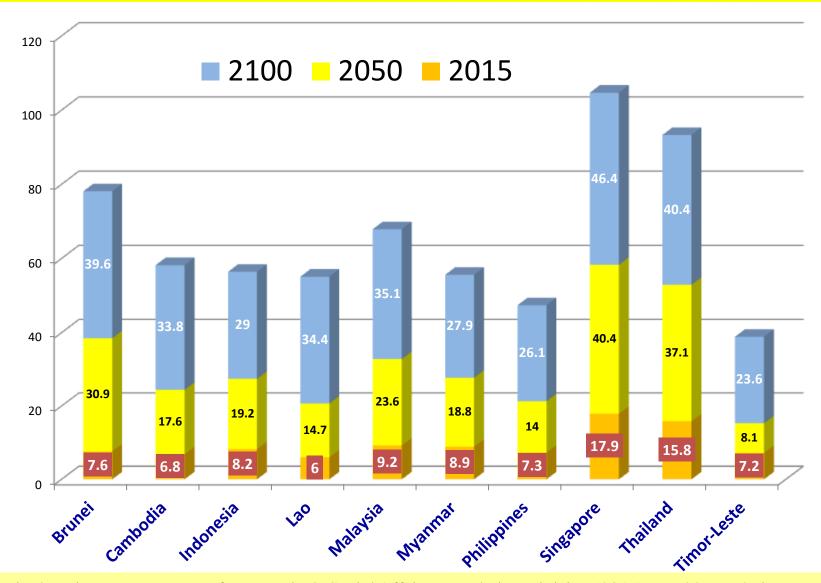


Trend of percentage of people aged \geq 60 in ASEAN countries



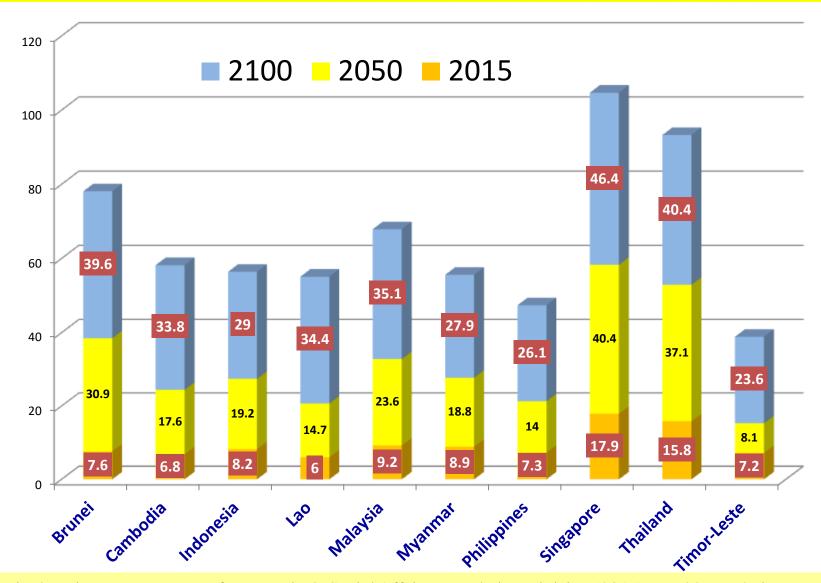
United Nations, Department of Economic & Social Affairs, Population Division (2015). World Population Prospects: The 2015 Revision, Key Findings and Advance Tables. Working Paper No. ESA/P/WP. 241.

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Global AgeWatch Index





There is no "typical" older person



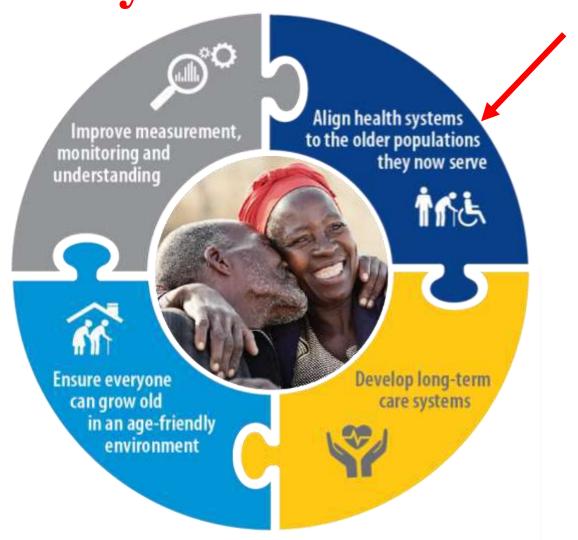


Healthy Aging is an investment, Not a cost!

Investment	Benefits	Return
Health systems	Health	Individual well-being
Long-term care	Skills and	1000000000
systems	knowledge	Workforce
	NA AND	participation
Lifelong learning	Mobility	
Ann Glandle	Cartal	Consumption
Age-friendly environments	Social connectivity	Entrepreneurship
environments	connectivity	and investment
Social protection	Financial security	and investment
		Innovation
	Personal dignity,	
	safety and	Social and cultural
	security	contribution
		Social cohesion



Priority areas for action





Place older people at the center of health care

Shift the care focus from managing diseases to optimizing what people can do Develop the health workforce



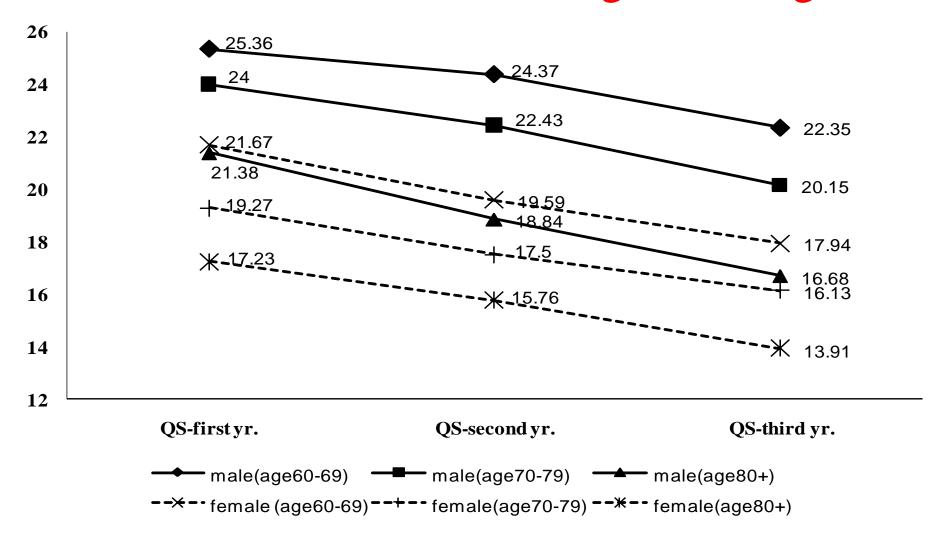
Unique clinical features of older patients

R-A-M-P-S

- **№ Reduced body reserve**(dynamic & heterogenous)
- Atypical presentation
- **№** Multiple pathology
- **№**Polypharmacy
- **№**Social adversity



Decline of muscle strength with age



Assantachai P, et al. Geriatr Gerontol Int 2014; 14 Suppl 1 : 61-68.



Atypical presentation (Geriatric syndrome)

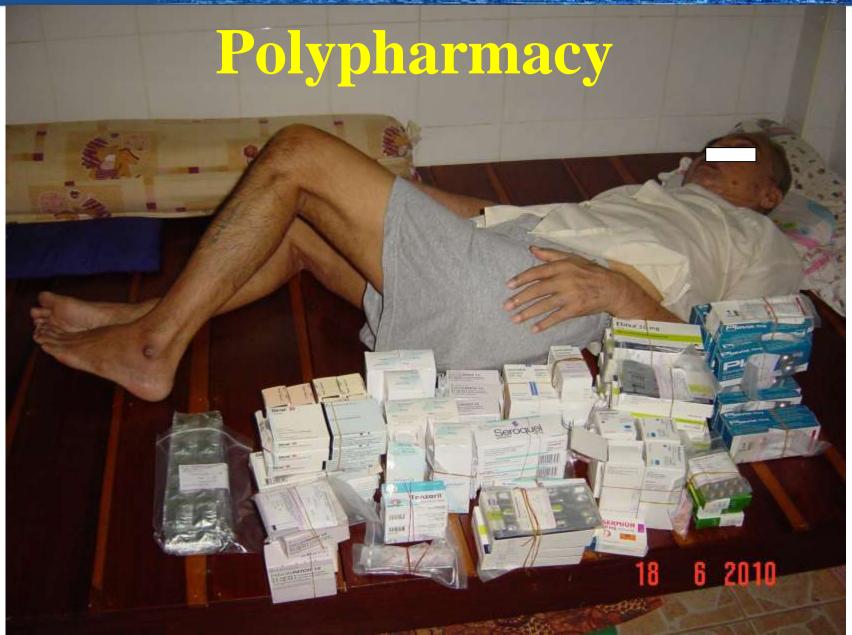
- Instability (Fall)
- **♥**Immobility
- Intellectual impairment
- Incontinence
- •Insomnia
- •Inanition (anorexia)
- Iatrogenesis



Common Chronic Diseases among Older Patients

- Musculoskeletal disorders
 - Osteoarthritis, crystal-induced arthropathy
 - Osteoporosis
- General medical problems
 - Hypertension, Diabetes mellitus, Dyslipidemia, Circulatory disorders: stroke, coronary heart disease
 - Under-nutrition
 - Infections
- Neurodegenerative disorders
 - Parkinson's disease
 - Dementia
 - Delirium
 - Depression







Social assessment for older patients

- Relationship within family
- Caregiver : aware of elder abuse in dementia
 - Physical abuse
 - Caring abuse: nutrition, drug compliance, pressure ulcer, inconting acetinstrumentation:



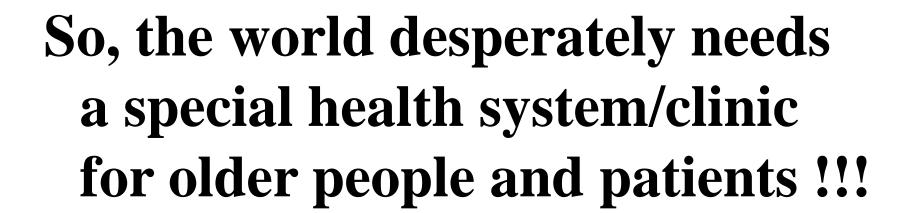


- "....that branch of <u>general medicine</u> concerned with the
 - clinical (physical & mental)
 - rehabilitative
 - social
 - preventive

aspects of illness and health in the elderly"

British Geriatrics Society

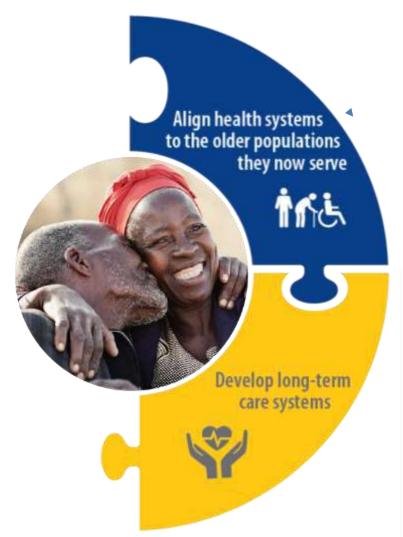




Geriatric Medicine



Priority areas for action





Target of national long-term care

- Year 2016: 600 million baht
 10% of bedbound elderly (~ 100,000 cases in 1,000 sub-districts)
- Year 2017: 900 million baht
 50% of bedbound elderly (~ 500,000 cases in 5,000 sub-districts)
- Year 2018: 1,200 million baht
 100% of bedbound elderly (~ 1,000,000 cases)



1. Functional assessment (ADL) to target those who need long-term care in the community





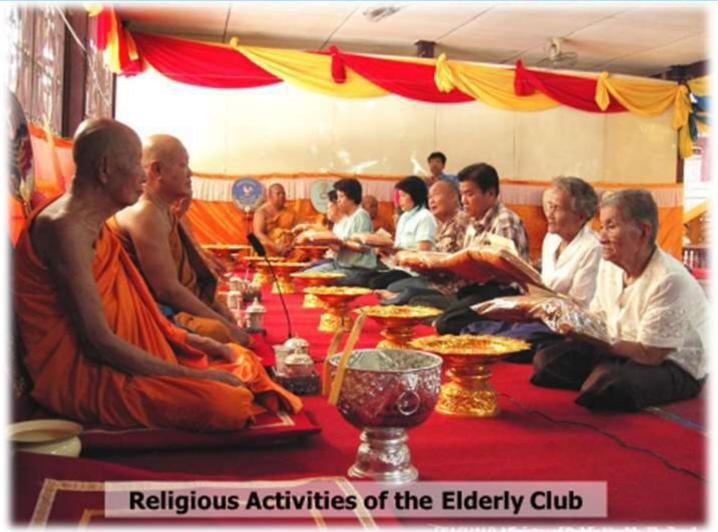
2. Organizing local elderly club

- Place: usually in local health facility
- Data base: information of member
- Club committee: regular meeting supervised by local health personnel.
- Regulation: financial record & audit.
- Fund raising: from member/ other sources.
- Activities: health promotion activities, income generating activities, religious activity, volunteer---home visit











- Elderly Care Volunteer
- Health Volunteer (MoPH)
- Volunteer from Elderly Club
- Neighbors
- School children volunteer





- -Established since 1978
- -20th March each year is the National Local Health Volunteer Day
- -Working in every village
- -Around 1,050,000 LHV nationwide
- -Being trained and educated to provide basic and primary health care for those in need.







4. Well-organized working system

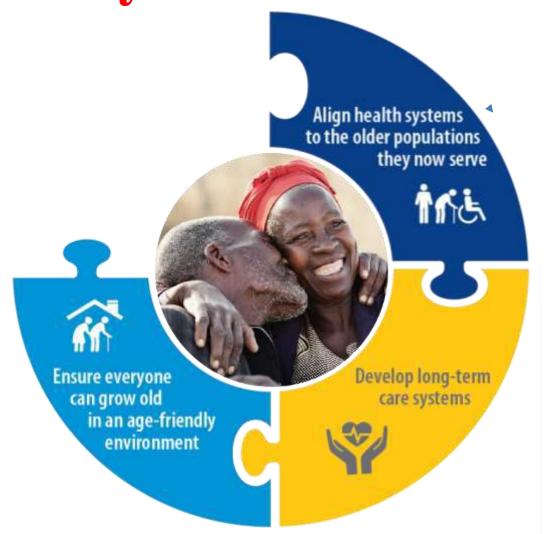
- **▶** Integration model
- Network :
 - *local administration (health and other gov. agencies at sub-district, district and provincial)
 - *elderly club, volunteer, people in community, etc.
- Services:
 - *training of care manager, caregivers and volunteer
 - home care, services /care for special problems, etc.







Priority areas for action





Aged-friendly Environment









Aged-friendly Environment Outdoor spaces and buildings

- Pavement: non-slip, wide enough for wheelchairs, well-maintained, free of obstructions, reserved for pedestrians and have dropped curbs to road level.
- Public area: clean, pleasant and available in the community
- Green space: sufficient in number, safe and well-maintained
- Outdoor safety: good street lighting, police and community volunteer patrols



Aged-friendly Environment Transportation

- Public transportation: reliable, frequent (including at night and on weekends and holidays), affordable and consistent cost, easy access to all city services
- Public transport vehicle: clean, well-maintained, accessible, not overcrowded, equipped with priority seating for older people
- Public transport stop and station: appropriately located, accessible, safe, clean, well-lit and well-marked with sufficient



Comprehensive Geriatric Assessment

- >Physical: physical health, nutrition, drug
- > Mental: depression, dementia, delirium
- >Social: care-givers, financial, environment
- >Function: basic & instrumental activity of daily living







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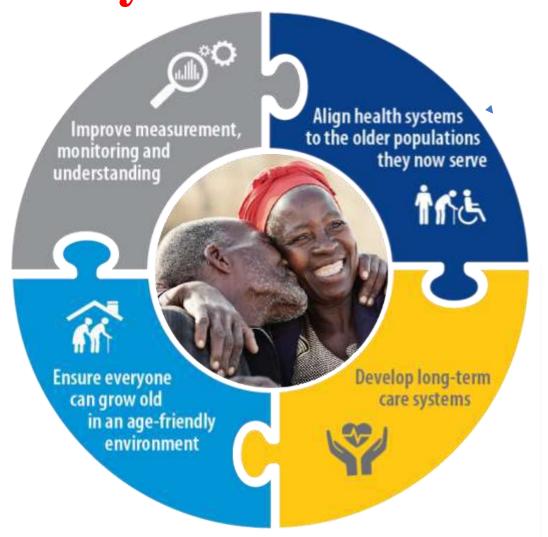
British Geriatrics Society

Vaccination recommended by Royal College of Physicians of Thailand

Vaccines ¹	Age groups (years)			
	19 – 26 years	27 – 64 years	≥ 65 years	
Tetanus, diphtheria, pertussis vaccine	Boost with 1 dose of TT or Td every 10 years			
(TT or Td or Tdap) ²	Substitute one-time of TT or Td with Tdap ³			
Varicella vaccine	2 doses ⁴ (consider serological test before vaccination)			
Measles, mumps, rubella (MMR) vaccine	1-2 doses⁵			
Human Papillomavirus (HPV) vaccine	3 doses (female) ⁶			
	3 doses (male) ⁷			
Influenza vaccine ⁸	1 dose annually ⁹		1 dose annually	
Hepatitis A vaccine ¹⁰	2 doses (consider serological test before vaccination)			
Hepatitis B vaccine ¹¹	3 doses (consider serological test before vaccination)			
23-valent pneumococcal	1 dose		1 dose	
polysaccharide vaccine	(with re-vaccination) ¹²			
13-valent pneumococcal conjugate vaccine	1 dose (Opti	onal)	1 dose ¹³ (age ≥ 50 years)	
Meningococcal polysaccharide or	For high risk persons ¹⁴			
conjugate vaccine				
Zoster vaccine			1 dose (age <u>></u> 60 years) ¹⁵	
Recommended vaccine				



Priority areas for action





The 2 nd National Plan on The Elderly (2002-2021)

1st Revised of 2009



มหาวิทยาลัยมหิดล ดูกเมือง เกาะ การเกาะ การเกา

Section No. 11

- Item No.8: The older people who are abused, exploited illegally, or neglected must be saved by the state.
- Item No. 9: The older people are eligible for legal advice and services, or family problem solving.
- Item No. 10: The older people must universally access to basic life need including shelter, food and clothes.



Older people are valuable assets to the society