Geriatric Medicine in Europe: Science and Art to Support the Demographic Dividend
Jag är obegränsat intellektuell.
Ageing = Complexity

Growth AND Loss at all ages

Metaphor is the best way explain to public
Although I had produced numerous designs by my fiftieth year, none of my work done before my seventieth year is worth counting.
At the age of 73, I have come to understand the true forms of animals, insects and fish and the nature of plants and trees.
Consequently, at the age of 86 I will have made more and more progress, and by 90 I will have got significantly closer to the essence of art.
At the age of 100 I will have reached a magnificent level and at 110 each dot and line will be alive. I would like to ask you who outlive me to observe that I have not spoken without reason.
Demographic Dividend: $3.2 trillion dollars a year to US economy!
... the film also succeeds brilliantly in its evocation of the wider themes of ageing: wisdom, altruism, negotiation, and that combination of "tough but frail" that increasingly characterises older people in the 21st century

British Medical Journal, Dec 09
We realize that for all practical purposes that the lives of the aged are useless, that they are often a burden to themselves, their family and the community at large. Their appearance is generally unesthetic, their actions objectionable, their very existence often an incubus to those who in their humanity or duty take upon themselves the care of the aged.

Nascher, IL. *Geriatrics: the disease of old age and their treatment.*

BROCKLEHURST'S
TEXTBOOK OF
GERIATRIC MEDICINE
AND GERONTOLOGY

Howard M. Firth
Kenneth Rockwood
Kenneth Woodhouse
Acute geriatric medicine
- Reduce death/disability by 25%
### Changing paradigms

<table>
<thead>
<tr>
<th>Prevention</th>
<th>Health Gain</th>
<th>Health Maintenance</th>
<th>Palliation</th>
</tr>
</thead>
</table>

**Note:** This image from the European Union Geriatric Medicine Society (EUGMS) illustrates the evolving paradigms in healthcare, focusing on prevention, health gain, health maintenance, and palliation.
Not either/or....

- Prevention
- Health Gain
- Health Maintenance
- Palliation
Need..

- Acute
- Rehabilitation
- Long-term care
- Community
Geriatricians Europe

- Geriatricians per million
  - Sweden – 90
  - Iceland – 60
  - Finland – 40
  - Ireland - 15
  - UK - 11!
EDUCATION AND TRAINING

Europe-Wide Survey of Teaching in Geriatric Medicine

Jean-Pierre Michel, MD,*‡ Philippe Huber, MD,* Alfonso J. Cruz-Jentoft, MD, PhD†† and a representative of each surveyed country†
Contacts established with 33 European countries

31 answers

- Albania
- Austria
- Belgium
- Bulgaria
- Cyprus
- Czech Republic
- Denmark
- Estonia
- Finland
- France
- Germany
- Greece
- Hungary
- Iceland
- Ireland
- Italy
- Lithuania
- Luxembourg
- Macedonia
- Malta
- The Netherlands
- Norway
- Poland
- Romania
- Serbia
- Slovakia
- Slovenia
- Spain
- Sweden
- Switzerland
- Turkey
- Ukraine
- United Kingdom
Geriatric Medicine recognition
31 European countries

- Speciality (N = 15)
- Sub-Speciality (N = 11)
- Not recognized (N = 5)
% chairs of geriatric medicine per medical schools

100%
- Belgium
- Denmark
- Finland
- France
- Hungary
- Iceland
- Malta
- Norway
- Slovakia
- Sweden

0%
- Cyprus
- Luxembourg

The Netherlands 85%
- Poland 65%
- Slovakia 65%
- Italy 60%
- Switzerland 60%

Serbia 50%
- Lithuania 50%
- United Kingdom 50%
- Czech Rep 40%
- Bulgaria 40%

Spain 30%
- Germany 20%
- Ireland 20%
- Ukraine 20%
- Serbia 15%
- Turkey 15%

0%
- Albania
- Austria
- Estonia
- Macedonia
- Slovenia
Undergraduate teaching

Mean number of hours of the undergraduate geriatric teaching

- Luxembourg
- Ireland
- Turkey
- Belgium
- Czech Rep
- Lithuania
- Malta
- Denmark
- Germany
- France
- Hungary
- Poland
- Austria
- Finland
- Iceland
- Norway
- Estonia
- Italy
- Slovakia
- Slovenia
- Spain
- Serbia
- Sweden

Non-existent
N = 6
Postgraduate teaching

**SPECIFIC (N = 16)**
Belgium, Czech Rep, Finland, France
Hungary, Ireland, Italy, Lithuania,
Malta, The Netherlands,
Norway, Poland,
Spain, Sweden
Switzerland,
UK

**NON-EXISTENT (N = 9)**

**ADDITIONAL to Internal medicine (N = 6)**
Germany, Iceland, Serbia,
Slovakia, Turkey, Ukraine
Challenges and Opportunities

- High degree of variability in geriatric health care systems between countries and within regions.
- Lack of resources allocated for acute health care, rehabilitation and long term care of older people.
- Competition with other specialties.
- Lack of social support systems and weak coordination with health care systems.
Challenges and Opportunities

- Specific guidelines and evidence based practice needed for older people and geriatric syndromes
- Lack of expertise and formal education in general geriatric medical care of primary care physicians
- Geriatric Medicine is officially accepted in most European states
- Relatively few academic leaders or research networks
- Ageism in patients, professionals and politicians
Why EUGMS?

- 15,000 heads better than several hundred
- Science
  - European scientific conference
  - Strong geriatric medicine focus
  - Democratic, open, self-renewing governance
Why EUGMS?

- Common discussion area
  - Swedish geriatrics – UK Journal
  - Irish geriatric medicine – US journal
- EU Lobbying
  - Profile Variable
  - Presence Variable
Congresses

- 2000  Paris
- 2002  Florence
- 2004  Vienna
- 2005  Madrid
- 2006  Geneva
- 2007  Frankfurt
- 2008  Copenhagen
- 2009  Glasgow
- 2010  Dublin
- 2011  Malaga
- 2012  Brussels
- 2013  Venice
Gerontologists or geriatricians?

- Both, but...
- A relative minority 'major' in gerontology
- As they do in falls, incontinence, delirium, movement disorders....
- Geriatric Medicine meetings bring all together
Medical Gerontology
Social Gerontology
Psychological Gerontology
Biological Gerontology

Geriatric Medicine
Gerontological Nursing
Old Age Psychiatry
Specialist therapists
Synthesis Congress

Geriatric Medicine

- Osteoporosis
- Dementia
- Stroke
- Continence
- Fall and gait

Gerontology
YOU MISSED THE 5TH EUGMS CONGRESS?

YOU MISSED THE 5TH EUGMS CONGRESS? ALL THE THINGS WHICH YOU WOULD HAVE BEEN ABLE TO LEARN!

P.-O. LANG1,2, K. SCHMITT1,3, M. CANKURTARAN1,4, S. GIANNELLI1,2, H. BLAIN1,5

Geriatric medicine in a time of generational shift
More than 85% found that the programme was highly or somewhat useful in their work.
Government in the EU

Commission

Parliament

Council of European Union
European silver paper on the future of health promotion and preventive actions, basic research, and clinical aspects of age-related disease

Alfonso J. Cruz-Jentoft · Alain Franco · Pascal Sommer · Jean-Pierre Baeyens · Ewa Janowska · Adriana Maggi · Piotr Pomikowski · Andrzej Rysi · Katarzyna Szcerbińska · Andrzej Milewicz

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Introduction
Ageing of populations is one of the highest achievements of humankind, and Europe is leading this successful story. However, aging and age-related disease is also a mounting challenge for individuals, for health care systems and for biological, psychosocial, epidemiological, medical and public health sciences. Many scientists from every single area of knowledge and science are actively working to better understand ageing and tackle the challenges that it brings to twenty-first century individuals.

These challenges cannot be confronted from a single point of view. A coordinated, active, united front of many disciplines is needed to face them, and a strategy that, starting from basic research, reaches every single aspect of ageing is needed. This means that translational research is a fundamental requirement, and that advances coming from research should flow rapidly, through the education of professionals, to the promotion of healthy lifestyles, and to health and social care meeting the
Getting used to growing old

Professors Desmond O’Neill and Paul Knight, President-Elect and President of the EU Geriatric Medicine Society respectively, outline the increasing importance of geriatric medicine for European society...
Advocating Vaccination of Adults Aged 60 Years and Older in Western Europe:

Statement by the Joint Vaccine Working Group of the European Union Geriatric Medicine Society and the International Association of Gerontology and Geriatrics—European Region
Guidelines for the diagnosis and management of syncope (version 2009)

The Task Force for the Diagnosis and Management of Syncope of the European Society of Cardiology (ESC)

Developed in collaboration with, European Heart Rhythm Association (EHRA), Heart Failure Association (HFA), and Heart Rhythm Society (HRS).

Endorsed by the following societies: European Society of Emergency Medicine (EuSEM), European Federation of Internal Medicine (EFIM), European Union Geriatric Medicine Society (EUGMS), American Geriatrics Society (AGS), European Neurological Society (ENS), European Federation of Autonomic Societies (EFAS), American Autonomic Society (AAS).
Special Interest Groups

- Diabetes
- Palliative Care
- Sarcopaenia
- Vaccines
- Age-attuned medicines
- Long term care medical standards

Geriatrics Visit Bank
European Medicines Agency establishes Geriatric Expert Group

07/06/2011

European Medicines Agency establishes Geriatric Expert Group

The European Medicines Agency's Committee for Medicinal Products for Human Use (CHMP) has established a Geriatric Expert Group, to provide scientific advice on issues related to the elderly.

The group's mandate, objectives and rules of procedure, published today, explain that the group will contribute to the work of the CHMP and the Agency secretariat by:

- giving input on guidelines under consultation;
- giving advice on geriatric aspects of the development, assessment or safety monitoring of medicines;
new therapies for an ageing Europe

7th Congress of the EUGMS
(European Union Geriatric Medicine Society)

28th - 30th September 2011
Málaga, Picasso's city (Spain)
The glass is half full!  
The glass is half empty.

Half full... No! Wait!  
Half empty!.. No, half...  
What was the question?

Hey! I ordered a cheeseburger!
The best time to plant a tree is twenty years ago… the second best time is now…