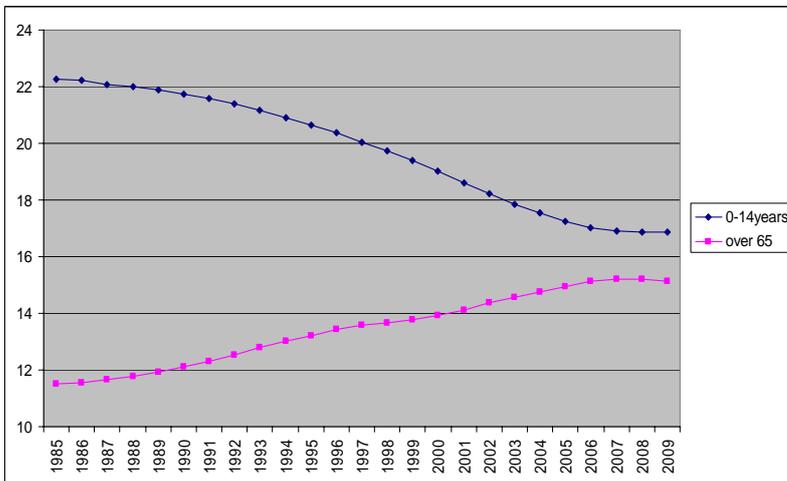


Abstracts on **ageing** presented at our conferences:

Year	Abstracts
1999	4
2000	4
2001	0
2002	0
2003	3
2004	3
2005	10
2006	17
2007	9
2008	10
2009	22
2010	6



### A MAJOR PUBLIC HEALTH PROBLEM FOR THE 21st CENTURY

As those aged 80 years and over are the fastest expanding segment of the older population in Europe, concerns are growing about the health of this part of the population. The impact of ageing populations on health care systems, needs further in-depth research.

In view of the rising life expectancy in our population, additional and new ways of activating **the potential of older people** is needed.

### THE ROLE OF SOCIAL NETWORK

Current social circumstances influence and can reduce the quality of life in Young and in old age. Some European studies confirm the significant contribution of social networks in preserving health in the elderly. To develop, implement, and evaluate innovative strategies and community infrastructures supporting healthy ageing; and to activate and empower elderly people, thereby, improving their health-related quality of life are necessary aims in the future.

#### Top 5 of subjects in the abstracts submitted

1. Health Promotion
2. Health Care Costs & Management
3. Social welfare & Well-being
4. Mental Health
5. Ageing & Diseases

### Health Promotion

A 3 year community-based health promotion project for elderly people, started in **Austria** in 2005, with the aim to develop, implement, and evaluate innovative strategies and community infrastructures supporting active healthy ageing; and to activate elderly people, thereby, improving their health-related quality of life. First results show that achieving empowerment of elderly takes time.

### Health Care costs and management

A 3 year-study (1999-2001) with a 5-year follow-up was conducted in **Denmark** to find a way to organize a home visitation programme and structure the content of the visits as part of routine primary care. Results showed that introducing simple tools for in-home assessment in coordination with GPs was associated with better functional ability after 3 years among 80 year olds but not among 75.

### Social welfare and well-being

The National Service Framework for Older People (NSFOP) started in **England** in 2001, aiming to reshape systems in health and social care that emphasise older people's potential contributions to civic society through active ageing and involvement in employment and community activities. Preliminary results suggest that an effort should be made to improve social support networks in the elderly.

### Mental Health

A 2006 European study conducted in **Switzerland** (age range: 50-79 years) shows a prevalence of depressive symptoms equal to 25.6% (range: 16.9% Denmark; 33.1% Spain). Individual risk factors are education, chronic diseases and bad subjective health. Even after adjustment for chronic diseases, patients with depressive symptoms used significantly more health services.

### Ageing and Diseases

The OMAHA study conducted in 2010 in **Germany** aims to determine the prevalence of people with one or more chronic long-standing conditions (CLC). Overall, 63.0% of the respondents reported CLC; the proportion increases with age. The most prevalent conditions among people with CLC were hypertension, joint complaints, osteoarthritis, hypercholesterolemia, and chronic back pain.

The European Commission propose the Healthy Life Years (HLY) indicator, HLY indicates the number of years a person of a certain age can expect to live without disability. This indicator is used for:

1. Monitor health as a productivity/economic factor
2. Introduce the concept of quality of life
3. Measure the employability of older workers
4. Monitor progress made in access, quality and sustainability of healthcare