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Slovenskej gerontologickej a geriatrickej spoločnosti

Editorial

Dear colleagues, dear friends!

It is time to look back again to our achievements and setbacks of the past year.

From the aspect of the Slovak Gerontologic and Geriatric Association (SGGA) the previous year can be evaluated as successful. Along with our Czech colleagues we organized traditional Geriatric Conference held in Bratislava. Our association took active part in the European Gerontologic Congress in St. Petersburg held in July 2007. Our traditional and most important event the SGGA Congress with international participation was held in Prešov with the number of participants reaching the top level. The SGGA actively cooperated with other professional associations mainly Slovak Cardiologic Association and Slovak Internist Association. Can we be satisfied with our achievements? In case of positive answer we can be satisfied only partially. Some shortcomings can be attributed to us, other circumstances are "objective" and their solution has to be sought elsewhere. We have to admit that our website, even though updated to a certain extent, did not attain the desirable level. We will do our best to improve it and make it more flexible so as to guarantee actual and prompt communication with our members. As far as objective circumstances are concerned, we cannot be satisfied with the range of the geriatric net. There is a lack of beds, lack of health care personnel. I do not wish to forecast any news – good or bad - but I think that the year 2008 will not be much better in this respect. We will have to face further attempts to restrict beds. As opposed to

our Czech colleagues we do not have to complain about the redundancy of long-term beds. I wish we could share the same problems. Now, let me stop listing all the problems we have to encounter, so as not to evoke pessimistic atmosphere right at the beginning of new year.

A lot of work is ahead of us this year. We would like to do away with the current problems. In March our Association will organize the Brno-Bratislava Geriatric Day, traditional Geriatric Day will be held in April. We were asked by our Czech colleagues to co-organize the event Pragomedika which will focus on geriatric issues. Currently we started with the preparation of the SGGA Congress with international participation to be held on 8 - 9 September 2008 in Bratislava. I would like to use this opportunity to ask all of you to support the SGGA Committee's efforts by your active participation (your presence and discussion contribution) in all our events. You are invited to submit your applications to lectures or posters. The presentation of case reports or your practical experiences may be of contributive value as well as valuable source of new knowledge.

Dear colleagues, allow me to thank you on behalf of the SGGA Committee and on my own behalf for your continuous support. Without your constant support and help we shall not achieve the identified goals. I wish you all the best in your personal and professional life.

Yours,

Zoltán Mikeš

Aesthetica senectutis

Gerontologic essay

V. Pacovský sen., V. Pacovský jun.

Summary

The term esthetics was probably formed by the German philosopher A. G. Baumgarten in his paper *Aestheticon* (1750) who defined the field as the science on beauty and its sensory perception. However, this definition has many aspects and we shall concentrate just on one of them – on the esthetics of old age.

Esthetics of old age has some characteristic features. It concerns mainly esthetic viewpoints on healthy and unhealthy man in one phase of his life. It is neither just the matter of medicine, biology or somatology, nor just the appearance of the body or its function. The esthetics of old age appears in other fields, too, e.g. psychology, sociology or linguistics. It is multidimensional and interdisciplinary, not dealing with the primary artistic perception ("non-artistic esthetics"). It is a symbiosis of emotion, ratio and science. The statement that something is beautiful, ugly or repulsive is unsatisfactory in the esthetics, moreover it searches for the answers why is it so. Its attempt is to revise subjective sensory perception by verifiable reality. From medical viewpoint pragmatic part of the esthetics of old age is important because its evidence is practically applicable in the diagnostics, therapy, or care for seniors.

Key words: esthetics - old age - geriatrics

The incidence and surgical treatment of hernia in the scar in seniors

A. Vichová, M. Oravský, M. Schnorrer

Summary

In their paper the authors analyze their own experiences with the operations of hernias in the scar in seniors. In their group of patients a net was used in the management of hernia in the scar, which was implanted between the peritoneum and fascia – the so called sublay technique. In retrospective evaluation of the group good results were obtained with a low number of postoperative complications and hernia recurrences. Based on the literature data and the authors' experiences they recommend a more active surgical approach in the management of hernias in the scar due to the prevention of possible complications.

Key words: hernia in the scar - sublay technique - hernia in seniors

Subjectively detected health status of subjects aged 50 – 64 years in the Czech Republic. Data of the questionnaire inquiries conducted in 2006.

K. Zikmundová, H. Zavázalová, V. Zaremba, J. Kotrba

Summary

The authors present the results of the questionnaire inquiry of the population in subjects aged 50-64 years conducted in 2004. The group comprised 1008 respondents with moderate predominance of women living in larger urban areas. The contribution aimed at subjectively perceived health status and disabling diseases makes use of the information from countrywide studies as well as the information from countrywide representative studies considering the selected age category.

Key words: pre-pension age - subjective health status morbidity - restricting - disabling chronic diseases

Reminiscence therapy and follow-up of its effect upon the quality of life seniors in institutional care

H. Janečková, I. Holmerová, H. Vaňková, T. Kašílková

Summary

The use of reminiscences in working with the elderly focussed on improving the quality of their life has developed since the sixties of the past century. The reminiscence therapy belongs among the validation techniques and may help the elderly to cope with difficult phases of his/her life. The reminiscences enable to recapitulate one's life and re-evaluate the most important life events so that one could accept them as a meaningful part of his/her life-story, thereby achieving life integrity. Reminiscing is therefore a natural, inevitable and valuable part of old age as the final phase of the cycle of life. The effect of reminiscence on the health status and quality of life of seniors has been explored since the eighties of the past century. As indicated in review studies, this new effect is not unequivocal, it depends on numerous factors, such as the reminiscence method used, the personality of the elderly and the study design. The effect is mostly measured on a very small sample of respondents which seems to be a major problem. Between 2005 - 2007 the Gerontologic Centre in Prague conducted an extensive research of the effect of the reminiscence therapy on the quality of life and health status of seniors residing in an institution. On a sample of 203 respondents divided into a treated and a control group, the indicators of health status and quality of life before and after the intervention, were measured. The first preliminary results reveal the reminiscence therapy is most beneficial in people with dementia and in people who are active during the therapy. The research was supported by the grant agency of the Ministry of Health of the Czech Republic (IGA 8488 - 3/2005).

Key words: reminiscence therapy - reminiscences - cognitive functions - activity

The comparison of selected biosocial characteristics in 60 – 92 year old subjects from Slovakia residing in two different social environments

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Geriatrics
1/2008

Originálne práce / Original papers

A. Lajdová, P. Karbová, K. Krepopová, D. Siváková, M. Cvičelová

Summary

The problems of quality of life of seniors in relation with the process of ageing represent the topic of current concern from the aspect of many scientific disciplines.

A few centuries ago the worldwide community began to devote an increased attention to social, economic, political and scientific issues emerging in association with the phenomenon of ageing. Over the past years the number of studies dealing with the quality of life of the elderly, has increased.

The goal of our study was to follow up the differences in basic anthropometric characteristics, blood pressure values and BIA (Bioelectrical Impedance Analysis) in a group of 60 and older seniors living at home and those residing in old people's homes. Furthermore, we followed up whether the different social environment of seniors may affect their drinking habits and whether these two environments may result in two different answers of respondents to socio-economic questions.

The comparison of males and females living in two different social environments disclosed the differences in the anthropometric parameters followed up. We recorded that more women living in old people's homes have a statistically significant value of systolic pressure higher than 140 mmHg and that of diastolic pressure higher than 90 mmHg as compared to women living in their homes. A statistically significant number of seniors living in their homes have an adequate amount of fluids daily. Based on the socio-economic responses we believe that old people's home setting of seniors poses stressing environment not only for women but men, as well, which is suggested in multiple negative responses of men to these questions.

Key words: ageing - seniors - anthropometry - BIA - socio-economic status

Complex care for subjects with Alzheimer's diseases in the centre MEMORY n. o.

M. Čunderlíková, M. Wirth

Summary

Centrum MEMORY n.p.o. is the first preventive, diagnostic, educational centre and specialised institution for people with memory disorder and Alzheimer's disease. It's aim is to provide complex care. Centrum MEMORY focuses not only on patients, but also on their families and caregivers. Specialised daily centre is prepared for people affected by this disease, support groups and consultancy are organised for families and caregivers. Work in specialised daily centre for people with Alzheimer's disease prepare the way to create active programme for given target group. This programme consists of stimulation of senses, physical – concentrate workout, ergotherapy, dramatherapy and artetherapy. Important role has cognitive training and programme for preservation of self-service. Part of specialised daily residence is also using of therapeutical approaches.

Kľúčové slová: *Alzheimer's disease - aktivization of seniors with memory diseases - Centrum MEMORY n.p.o. - support group for family and care givers, therapy*

Combination treatment of arterial hypertension with focus on the STAR study

S. Krčméry

Summary

In the majority of patients with arterial hypertension and metabolic syndrome combined antihypertensive therapy is inevitable. The optimum drug combinations significantly participate in the organ protection. In the STAR study in a group of patients treated by trandolapril + verapamil combination, a significant reduction of postprandial glycemia level (in average by 0.22mmol/l) was observed, whereas a group treated by losartan + hydrochlorothiazide revealed a 1.44 mmol/l increase of postprandial glycemia. The decreased risk of the onset of diabetes type 2 in patients treated by trandolapril + verapamil combination as compared with the other group poses another important result of the STAR study.

Kľúčové slová: *hypertensiom - trandolapril - verapamil*