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Official website of the
Slovak Gerontologic and Geriatric Society

www.geriatria.sk

What can be expected in the year 2007?

Dear colleagues and friends:

Here we are again at the beginning of the New Year filled with many questions about our future expectations.

The optimists hope this year will be better than the previous one. The realists are a bit modest in their wishes hoping that this year will not be worse than the previous one. Omitting the pessimists, let us be the optimists who would like to believe that our future will reflect our goals and efforts made to achieve these goals.

From my point of view it is very important to continue in the ongoing trend of building an independent SGGs and to "visualize" geriatrics as the speciality. This goal does not seem to be an easy one: last year we witnessed repeated restriction of prescription possibilities for geriatricians. This situation arose despite the promises about the acceptance of the principle of equality of a geriatrician and an internist. I think we will have to work hard in this respect and I hope the result will be successful.

One of our permanent tasks is to obtain young, talented colleagues for the speciality of geriatrics. We have to persuade them that geriatrics in particular will provide them a lot of possibilities for the application of their professional knowledge and combining it with medical art. Similarly to many Slovak medical doctors, geriatricians are also facing the possibility of leaving for foreign countries and finding a job with better income, better material and moral recognition on the side of the society. We must believe that those who make decisions about financing will realize that financial evaluation of medical doctors in our country should not take the bottom positions of salary scales.

The speciality of geriatrics can be highlighted also by participation in the grant activities. Besides home grants there is a chance of using the grants of the Framework Program of European Union whose financial contribution is not negligible. Another possibility involves an active participation in international events. In the year 2007 the Congress of Clinical Section of European Region IAGG will be held in St Petersburg (5th - 7th July 2007) and EUGMS Conference in Frankfurt will take place (28th - 29th September 2007).

Every member of the Society has a real opportunity of taking part in the 6th SGGs Congress in Prešov. Within this Congress an annual Slovak.- British Symposium will also be held. I hope that the gradually increasing audience in our congresses (every year we record a greater number of participants than the previous one) will retain its present-day trend and in Prešov we will be able to record the greatest participation of our members and friends. I would like to remind you of the traditional Bratislava-Brno Day to be held in Bratislava on April 19 2007. The aim of the SGGs Committee is to extend the international cooperation and the results of these efforts is the meeting with the Bavarian geriatricians in Bratislava in 2007 to discuss the modes of bilateral cooperation.

I would like to draw your attention to using the SGGs website (www.geriatria.sk). We will be pleased if all the members join the innovation process of our website. We welcome your contributions about the news in your regions, or any challenging proposals so that our website could truly reflect the activities of our society.

Dear friends, let me wish you all the best both at home and at work.

Yours,

Zoltán Mikeš

Valsartan and hydrochlorothiazide – effective combination in ambulatory treatment of hypertension of seniors

Z. Mikeš

Summary

Introduction: The number of hypertonics grows with increasing age. Due to the expected growth of the senior population in the future, the issue of the treatment of hypertension in this age group still remains a topic of current concern.

Objective: to follow up the efficiency of administration of angiotensin II receptor blocker in combination with a diuretic.

Patients and methods: The combination of valsartan in the dose of 160mg and hydrochlorothiazide 25mg/day was administered to 30 patients with essential arterial hypertension of 2nd and 3rd degree for the period of 6 months.

The followed -up parameters comprised systolic and diastolic blood pressure values, heart rate, sodium, potassium level, serum creatinine and glycemia.

Results: As early as one month after the treatment decrease in systolic and diastolic blood pressure was observed. After 6 months the reduction of systolic blood pressure became more marked, the values of diastolic blood pressure did not change in comparison with those after 1 month. No significant changes of heart rate, ionogram, and serum creatinine were found. The decrease of glycemia level after 6 months was on the borderline of statistical significance. The tolerance of the administered drug was excellent.

Conclusion: The results show that valsartan combined with hydrochlorothiazide in seniors is effective as far as the follow-up of systolic and diastolic blood pressure is concerned. The treatment is well tolerated and in careful control of renal functions and of ionogram it is safe. The results are supportive of previous data about favourable effect upon glucose metabolism after administering of angiotensin II receptor blockers.

Key words: *treatment of hypertension - valsartan - hydrochlorothiazide - combined treatment - old age and hypertension*

Total protein and albumin values in geriatric patients hospitalized in University Hospital Hradec Králové

D. Hrnčiariková, Z. Zadák, P. Klemera, J. Špírková

Summary

We conducted an all-year-round retrospective screening of total protein and albumin serum in hospitalized patients at internal and surgical clinics of the University Hospital in Hradec Králové. In this paper we focused our attention to the group of geriatric patients (80 and over 80 years old).

We demonstrated low mean entry values of albumin at surgical clinics as against normal values at internal departments. During hospitalization statistically significant negative dependence of albumin values on the increasing age was shown ($p < 0.05$) at surgical departments and significant differences from internal specialities ($p < 0.05$ for females and $p < 0.01$ for males) where, on the other hand, neither significant changes related to higher age were observed.

Key words: *total protein - albumin - geriatric patient - hospitalization*

Czech health care in longer evaluation of citizens

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

Summary

Our sociological survey follows up the dynamics of the development from the year 2000. The survey was aimed at the rate of satisfaction of citizens with the Czech health care and other questions associated with health care namely those of financial co-participation. For the classification three age groups of respondents were chosen, i.e. up to 34 years, 35 - 59 years and 60 and more. We expected possible differences towards the approach of evaluation of health care delivery, our hypothesis was confirmed by the survey.

In the followed-up period of 2000 - 2005 all the age categories show a mild increase in satisfaction with health care. However, there are considerable differences in the evaluation among the age groups. An overall evaluation for the follow-up period of 2000 - 2005 reveals substantial intergeneration differences. In 87% overall all-generation satisfaction rate, the generation of juniors up to 34 years shows 92%, the middle generation 35 - 59 years shows 83% and the generation of seniors 60 years and over discloses 78%. With the increasing age the rate of satisfaction with health care delivery has a decreasing tendency.

There emerges a social problem i.e. financial cooperation mainly in groups with lower income as well as in seniors. Although individual cooperation does not reach 10% of total expenses for health care, financial cooperation in health care delivery poses a considerable burden for almost 40% of seniors.

***Klíčová slova:** satisfaction with health care - financial cooperation*

Support of autonomy and independence of seniors in hospitalization

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R. Bužgová

Summary

Seniors are a specific group of patients in the hospital. The effect of demographic ageing will cause a constant increase of this group. This situation will require specific knowledge and skills of health care workers. One of the most important ethical principles of the current medical and nursing ethics is the principle of respect towards autonomy. The ability of autonomous behaviour may be endangered in old age. The contribution deals with the explanation of the principle of autonomy and its application into nursing practice in hospitalization of old patient's . In the conclusion some results from the project "Support of Autonomy and Independence of Seniors in Nursing Care in Hospital" conducted in Great Britain during 2002-2003 and their potential use in the CR are presented.

Key words: Autonomy - support - acute care - seniors - hospitalization

Chronic painful syndromes and old age

M. Palát

Summary

The paper concentrates on the up-to date opinions on long-term programme of complex care for patients with chronic painful syndrome in old age,. It deals with single aspects of this long-term programme, medicamentous treatment as well as rehabilitation programme. Its physiotherapeutic component resulting from the knowledge that man is a biopsychosocial factor and with regard to this fact the paper also discusses the individual methods and techniques used within long-term care for chronically ill with painful syndromes in old patients.

Key words: biopsychosocial basis - rehabilitation programme - chronic diseases - ageing and old age - painful syndromes - complex approach - comprehensive approach

Multiple liver abscesses in exacerbation of toxonutritive types of chronic pancreatitis

K. Dítětová, P. Weber, J. Šlapák

Summary

The authors describe the case history of a patient with toxonutritive hepatopathy and pancreatitis, in whom multiple liver abscesses appeared during the following exacerbation of chronic pancreatitis with peritonitis and sepsis. They declare a gradual development of clinical and laboratory symptoms and other complications arising during the diagnostics and treatment. They present diagnostic and therapeutic progress resulting in the complete cure of the abscesses and stabilization of the patient's state.

Key words: *liver abscess - toxonutritive hepatopathy - pancreatitis - sepsis - diagnostics - therapy*