



8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Special Session

Day 1

Geriatrics 2018

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain



Alex W Costley

City University of New York, USA

Aging and food insecurity: Older adults and reduced access to food in a challenging environment

Statement of Problem: Reduced intake of healthy food is a growing public health problem for all ages in the US, but older adults often have less access to food due to several social and behavioral factors. In communities lacking full-service supermarkets or (food deserts), more research is needed to understand the factors that make older adults even more vulnerable to food insecurity.

Methodology & Theoretical Approach: In a larger community-based survey research project on access to food and nutrition (N=422), data were coded in SPSS 22 by postal (zip) code to identify residents in a documented food desert (n =297) and by age, over 65 (119 or 40%) and 18-64 (178 or 60%) to explore significant differences ($p < 0.05$) in income, behavior, and social barriers using chi-square (X^2) analyses.

Findings: With similar distance to supermarkets ($p = 0.914$), the majority of younger and older adults (84% and 73%) said they could walk to a large supermarket, if needed ($p = 0.121$), but older adults had more physical limitations ($p = 0.000$) for getting food back home. Income distributions were similar ($p = 0.234$), but older-adults appeared less likely to eat fast foods ($p = 0.04$), but not more likely to eat fresh vegetables daily ($p = 0.060$). However, older adults were more likely to live alone ($p = 0.007$) and have difficulties with activities of daily living (ADLs) and instrumental activities of daily living (IADLs) ($p < 0.013$) affecting daily function.

Conclusion & Significance: Even in more challenging environments (i.e. food deserts), the data suggest that distance to supermarkets alone is not the biggest barrier. Older adults, however, appear to face other social and physical limitations that require additional resources beyond existing nutritional programs and municipal plans to increase retail food infrastructure.

Biography

Alex W Costley is an Associate Professor of Gerontology and Health Education at City University of New York and the Coordinator of the Bachelor of Science degree program in Gerontology. His research interests and publications explore aging from cultural, political, and clinical perspectives, from understanding the development of ageism among healthcare provider to practical interventions to improve problem-solving and communication with older adults in primary care. His more recent presentations and publications examine issues of urban planning, zoning, and the social and environmental barriers to civic engagement and aging-in-place in New York City. He has a background in cultural-anthropology, medical education, and public policy.

acostley@york.cuny.edu



8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Scientific Tracks & Abstracts Day 1

Geriatrics 2018

Sessions:

Day 1 July 30, 2018

Ageing Biology | Geriatrics and Elderly Care | Geriatric Services | Geriatrics and General Practice | Geriatrics and Gerontology | Geriatrics and Mental Health | Geriatrics and Neurological Disorders | Geriatrics and Palliative Nursing

Session Chair

Nina Gorshunova

Kursk State Medical University | Russia

Session Co-Chair

Alex W Costley

City University of New York | USA

Session Introduction

Title: Twenty-five years of cognitive care education research: Time for a revolutionary change

Jeremy Berry | Texas A&M University-Central Texas | USA

Title: Amazonian rainforest elderly project: Lessons from 10 years study about a pre-Colombian lifestyle ageing

Euler Esteves Ribeiro | Amazonas State University | Brazil

Title: Virtual Reality for seniors: A first encounter of residents of a long-term care facility with VR

Victoria Mühlegger | Academy for Age Research | Austria

Title: The role of social capital in the relationship between physical constraint and mental distress in older adults: A latent interaction model

Sok An | Korea Rural Economic Institute | South Korea

Title: Palliative care provided within a care home- a SWOT analysis of the introduction of an innovative service offered through the private sector in Malta

Charmaine Attard | Hilltop Gardens | Malta

Title: Aging in place and quality of life among adults aged 50 and older in Europe: A moderated mediation model

Rabia Khalaila | Zefat Academic College | Israel

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Twenty-five years of cognitive care education research: Time for a revolutionary change

Jeremy Berry and Russell Porter

Texas A&M University—Central Texas, USA

This is the third study of cognitive care education in New York State nursing homes using cross-sectional methods over a 25-year period. The data indicate that the cognitive care education increased at statistically significant levels, albeit by evolutionary means. It is now time for a revolutionary change, for cognitive care education, whereby the ideal level of 20 to 32 hours of education is provided to cognitive care providers. Cognitive care encompasses a range of behavioral problems that require appropriate education. These might include communication difficulties, perseveration (repetition of an idea or activity), aggressive behaviors, paranoia, memory problems, and wandering. This study assessed cognitive care education as the amount and type of education provided to cognitive care providers on how to care for the cognitively impaired including knowledge and skills to understand cognitive impairments and requisite standards to improve quality of care and life. It is apparent that nursing home employees are cognizant of cognitively impaired resident's needs. However, the cognitive care education providers receive on the job, is still inadequate to understand the overall needs of cognitively impaired, as indicated by our most recent research in 2016 (i.e., 3.81 hours). We recommend that at least 20 hours of cognitive care education be provided to care providers, with a second recommendation that 32 hours would be ideal that follows the Alzheimer's Association recommendation. The primary focus of the research studies here is to ensure care-providers are adequately trained to take care of the cognitively impaired.

Biography

Jeremy Berry is an Assistant Professor of Counseling and Psychology at Texas A&M University-Central Texas. He is the graduate coordinator of the clinical mental health counseling program at TAMUCT. He is a Licensed Professional Counselor and a Board Certified National Certified Counselor. He holds expertise in the area of Gerontological counseling and has worked extensively in private practice and in agency settings with aging adults. His most recent contracts are with geriatric psychiatric hospitals providing clinical mental health over site and facilitating outpatient treatment.

jeremy.berry@tamuct.edu

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Amazonian rainforest elderly project: Lessons from 10 years study about a pre-Colombian lifestyle ageing

Euler Esteves Ribeiro and Maia-Ribeiro EE
Amazonas State University, Brazil

Statement of the Problem: Evidence from last 40 years suggested that increment of some chronic non-transmissible diseases (CNTD) in human populations is associated to lifestyle changes, including overfeeding and sedentarism, in comparison to pre-historical communities. However, there are few World areas that could to be used to investigate aging processes with some similarities present primitive human populations. Amazon rainforest tropical region could help us understand the human aging. This region consists of 7 million km² and most of its populations are concentrated in small urban settlements localized along the river and its main tributaries. Due geographic isolation, riparian population (caboclos) have difficulty to access health and social services, and some pre-Colombian lifestyle elements are maintained until now. In this context, from 2007 was started Elderly Rainforest Project (ERP) that investigates gene-environmental variables that acts on aging and CBTD prevalence. Lessons from 10 years ERP results are reviewed and discussed here.

Methods: Crosssectional, longitudinal and experimental investigations published of ERP were reviewed and results are synthetized and discussed here.

Results: From an initial comparative analysis between 1802 riparian elderly (Maués-AM) and 1509 urbanized elderly (Manaus-AM) and subsequent studies from 637 riparian subjects was possible to observe, which despite low-income, low-education and difficulties to health and service access the riparian elderly presented: (1) low CNTDs-prevalence; (2) very good functional fitness and balance; (3) habitual food consumption based in “fish and fruits” and cassava products suggesting existence of a “pre-Colombian Amazonian diet pattern”; (5) self-report of poor hearing was main variable associated to high riverine mortality, probably due relevance of oral communication in traditional communities. (6) until moment, longevity gene markers were not identified in this population.

Conclusion & Significance: Data from Amazonian riparian elderly people reinforce that diet, physical/social activity are universal elements modulating human survival until late-ages.

Biography

Euler Esteves Ribeiro has his expertise in geriatric and gerontology MD, PhD. He is director of Open Third University of Amazonas State University (UnATI/UEA) from Amazonas, Brazil, and is a clinical coordinator of Elderly Amazonian Rainforest Project that investigates some ageing and health aspects of population living in this biodiverse tropical region of the World. He has several books and publications associated with gerontology, and also have important research interaction with national and international research groups such as Japan, Spain and Canada.

unati.euler@gmail.com

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Virtual Reality for seniors: A first encounter of residents of a long-term care facility with VR

Victoria Mühlegger

Academy for Age Research, Austria

Many residents of long-term care facilities have no options for self-determined activities due to their physical limitations. In addition to the hospital-like environment of care facilities, the lack of opportunities for retreatment has an impact on the well-being of people in need of care. Virtual reality glasses, adapted to the needs of users, can be used to virtually visit places that would be difficult or impossible for people with disabilities to experience in real life. They can once again experience something new, visit their favourite places in the context of virtual excursions and thereby relieve stress and strengthen their resilience. In this study, residents of a nursing home in Vienna, Austria were asked to try on virtual reality glasses and report their first experiences. Despite prevailing prejudices, results show that virtual reality is of great interest to the residents. Residents reported about exciting explorations of the virtual environments. Austrian destinations, nature scenes in the mountains and forests but also trips to the zoo, the museum, in churches or places of everyday life, like shopping streets or train stations would be places for the residents, they would like to explore virtually. Far-off destinations such as Rio de Janeiro or the Caribbean are more of an exception. Biographically relevant places such as the parental home or the location of their wedding were not named. The residents identified possible uses in therapy, VR as a distraction from everyday life, as an opportunity to participate in cultural and social life and to relax. With the elderly being interested in this new technology, many use cases in therapy and care open up for further research and application. In terms of ease of use, an adjustment of the VR glasses for a long-term use in care facilities in any case necessary.

Biography

Victoria Mühlegger has been working at the Academy for Age Research since August 2016, with a focus on teaching and research. She studied Psychology and Aging Services Management, specializing in Gerontopsychology and topics such as active aging, new forms of housing and care for old age and the end of life. As part of her research, she is particularly concerned with the individual design of everyday life for people living in care facilities, be it horticultural therapy or virtual reality. For her, the practical relevance of scientific findings is particularly relevant in order to ensure the best possible care for the elderly.

victoria.muehlegger@altersforschung.ac.at

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

The role of social capital in the relationship between physical constraint and mental distress in older adults: A latent interaction model

Sok An

Korea Rural Economic Institute, South Korea

Research shows that individual social resources such as social networks and support from family and friends improve individual health and buffer the negative impact of chronic stress. Yet, few studies have examined the protective role of community social capital in improving older adults' mental health. This study highlights community social capital as a critical coping resource for older adults with physical constraints. Building upon the previous literature on the link between physical and mental health in later life, the present study explored the buffering effects of community social capital (indicated by social cohesion, social ties, and safety) in the relationship between physical constraints (indicated by chronic disease and functional disability) and mental distress (indicated by depression and anxiety). Using data from 2,362 community-dwelling older adults aged 65 and older in the National Social Life, Health, and Aging Project (NSHAP) Wave 2, a latent moderated structural equation modeling was tested. The fit of the model including both direct effects of physical burden and social capital and their latent interaction was excellent. Both physical constraints ($\beta = 0.382$, $p < 0.001$) and community social capital ($\beta = -0.059$, $p < 0.01$) had a direct effect on mental distress, and their interaction was also found to be significant ($\beta = -0.306$, $p < 0.001$). The group with high social capital presented a relatively stable slope in the prediction of physical burden on mental distress, suggesting their resilience. On the other hand, the group with a low social capital demonstrated a steep slope, indicating heightened vulnerability to mental distress when faced with stress caused by physical constraints. Given its buffering role, further attention need to be paid to enhance the ways community social capital can promote the health and well-being of older adults.

Biography

Sok An is deeply committed in research and clinical approach in the field of aging. He has completed PhD degree and the portfolio program in Aging & Health at the University of Texas at Austin. Before entering the Doctoral program, he worked at an Adult Day Health Care Center, where he learned the importance of social capital for older adult's health and well-being. His research interests lie in the area of older adult's health, social capital, community-based services, and longitudinal data analysis. Currently, he is expanding his area to rural older adults' health and mental health.

ansok1@gmail.com

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Palliative care provided within a care home - a SWOT analysis of the introduction of an innovative service offered through the private sector in Malta

Charmaine Attard and Maria Cassar
Hilltop Gardens, Malta

Just under 2000 persons are diagnosed with cancer every year in Malta, with the figure expected to shoot up to over 2,100 by 2020. At present, Hospice Malta offers a wide range of services for terminally ill patients and their families, including day care and home care however no residential or inpatient palliative care is provided in the country to date. Our only oncology hospital on the island constitutes of 24 beds which falls short of demand and supply when this caters for the whole population of Malta. As a result of this a number of palliative clients find themselves on acute hospital wards which are not able to cater for their specific needs during this period. Simblija Care Home is a private nursing home in Malta which seeks to address the needs of persons who need palliative care, including respite for their carers or end of life care. Within our model of care we adopt a holistic approach to both the individual and the respective family and the existent network of support. We hope to address physical needs, like pain control, and also to their psychological needs which often involves counselling services. Our services extend further and encompass spiritual assistance when requested. Different professionals are brought in the care cycles, as are occupational therapists and physiotherapists. In this way we assist the person to achieve better quality of life and their families to find support and assistance. This is a new residential service offered by a care home for elderly in the palliative stages. The paper provides a critical SWOT analysis of the introduction and rolls out of this innovative much needed service in Malta. It is believed that the reflective evaluation of this service is of interest to other parties who are gauging need or planning such services in other contexts.

Biography

Charmaine Attard achieved a BSc in Nursing in 1994 and went on to read an MSc in Nursing with the University of Manchester in 2006 and a Post Graduate Diploma in Business Administration with the University of Leicester in 2016. After graduating She worked for a number of years in the acute areas of care within St. Luke's Hospital and Capua Palace Hospital. In 1999 she went on into long term care, where she managed a private home for the elderly. In 2006 she went on to become Operations Manager and in 2009 she left long term care and took up the post of Director of Nursing and Midwifery at Mater Dei Hospital where in 2013 she was given the post of Director of Care at Karin Grech Rehabilitation hospital. In 2015 she joined AX Holdings as Director of Care of Hilltop Gardens overseeing care given both in the care home and in the apartments. Currently she is the general manager of Hilltop Gardens, an appointment given to her in 2017. She is also holds a part time assistant senior lecturer post at the University of Malta where she teaches nursing students within the Faculty of Health sciences.

cattard@hilltopgardens.com.mt

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Aging in place and quality of life among adults aged 50 and older in Europe: A moderated mediation model

Rabia Khalaila

Zefat Academic College, Israel

Objectives: We explored the moderated-mediation effects of perceived accessibility to the environment on quality of life in later life via two socio-spatial mediators (loneliness and connection to place) and two moderators (functional disability and marital status).

Methods: We utilized the data of the fifth wave of the survey of health, aging and retirement in Europe (SHARE) to analyze the quality of life of 62,077 Europeans aged 50 or older. Bootstrapping with resampling strategies was used to test the moderated-mediation hypotheses.

Results: Higher scores for perceived accessibility to services and sites were associated with greater quality of life. This relationship was partially mediated by lower loneliness and higher connection to place, and moderated by functional disability and marital status.

Discussion: Policymakers and planners should plan suitable, accessible and age-friendly social and spatial environments for dependent and independent older adults. They should also suggest interventions to mitigate social loneliness and modify spatial obstacles.

Biography

Rabia Khalaila has worked for ten years at Hadassah Hospital as a staff nurse and he was promoted as a Head Nurse in intensive care unit in the past five years. In 2009 he moved to work in the Zefat Academic College. He is the Head of the Department of Nursing in Zefat College. His research interests include nursing, social gerontology and nursing education. He has published 24 written works mostly in peer review journals and another four papers are in preparation or under review process.

rabeikh@zefat.ac.il

Notes:



8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Scientific Tracks & Abstracts Day 2

Geriatrics 2018

Sessions:

Day 2 July 31, 2018

Ageing Biology | Geriatrics and End of Life Care | Elder Abuse | Geriatric Services | Geriatrics and Nutrition | Geriatrics and Neurological Disorders

Session Chair

Joaquim Parra Marujo

Transpersonal Psychology and Gerontology Research Unit
Portugal

Session Co-Chair

Attila Lawrence

University of Nevada
USA

Session Introduction

Title: Pisa syndrome in elderly person-the pathogeny and treatment of postural deformities

Masahiro Hayashi | Sakuragaoka Hospital | Japan

Title: Superoxide-hydrogen peroxide imbalance: Potential risk and its influence on therapeutic response of chronic morbidities prevalent in elderly people

Ivana Beatrice Mânica da Cruz | Federal University of Santa Maria | Brazil

Title: The relationship between depression and violence risk predictors on elderly

Joana F Alegria Pereira | University of Évora | Portugal

Title: Social representations of violence on the elderly: An injustice and a badness

Tatiana Mestre | University of Évora | Portugal

Title: Implementation of a protocol of action in geriatric frail patient in the end of life

Anna Prat Canal | Althaia Xarxa Assistencial Universitària Manresa | Spain

Title: Challenges in morbidity and mortality statistics of the elderly population in Tanzania: A call to action

Kelvin M Leshabari | I-Katch Technology Ltd | Tanzania

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Pisa syndrome in elderly person-the pathogen and treatment of postural deformities

Masahiro Hayashi¹ and Katsuji Kobayashi²¹Sakuragaoka Hospital, Japan²Awazu Hospital, Japan

Pisa syndrome is one of the abnormal postures. The term Pisa syndrome is defined as a lateral bending of a trunk. The mechanisms underlying Pisa syndrome have not been fully explained yet. It was originally considered as a consequence of treatment with antipsychotics which induce a cholinergic-dopaminergic imbalance. Subsequently, the term has been generally applied to trunk lateral deviation $\geq 10^\circ$. Recently, it was reported that asymmetric functioning of basal ganglia could lead directly to asymmetric regulation of postural muscle tone related to a lateral deviation. We investigated the two schizophrenic patients. They developed Pisa syndrome while exposed to the long-term treatment with antipsychotics. In one case, 123I-FP-CIT dopamine transporter-single photon emission tomography imaging disclosed asymmetrical DAT uptake in the striatum, which may be associated to asymmetric functioning of basal ganglia. Furthermore, it is possible that schizophrenic patients with Pisa syndrome developed the similar dysfunction of basal ganglia due to the exposure of long-term dopamine D2-receptor blockade. Because Pisa syndrome become irreversible condition in the advanced disease stages, early its recognition and the pharmacological adjustment especially the dosage of antipsychotic drugs should be important. Furthermore, postural deformities such as Pisa syndrome are frequent disabling complications of neurodegenerative diseases, especially Lewy body disease, frontotemporal dementia. The postural deformities have a multifactorial pathophysiology. Because the effects of levodopa treatment are limited, we have introduced botulinum toxin as therapeutic tool for the treatment of some neurological disorders. Botulinum toxin treatment resulted in significant improvement of the tension of muscles related to abnormal postures. We report these outcomes, including the pathogeny of Pisa syndrome and postural deformities this time.

Biography

Masahiro Hayashi is a Neurologist. He worked in a national hospital having an institute of neurology for fifteen years. He is a Specialist in Parkinson's disease, spinocerebellar degeneration and dementing disorders. He has made a study of neuropathology and neuroimaging. Currently, neuroimaging is his area of specialization. He works as a Clinician at the Department of Neurology and Psychiatry in the private hospital in Japan.

hayashimakm@aroma.ocn.ne.jp

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Superoxide-hydrogen peroxide imbalance: Potential risk and its influence on therapeutic response of chronic morbidities prevalent in elderly people

Ivana Beatrice Mânica da Cruz

Federal University of Santa Maria, Brazil

Statement of the Problem: Aging is a complex event where mitochondrial dysfunction has been in the spotlight for a long time. Since, prior evidences suggested that mitochondrial dysfunctions are related to oxidative-inflammatory and genotoxic processes, our research team has dedicated special efforts to understand the role of a bidirectional imbalance related to superoxide anion (SA) and hydrogen peroxide (SA-HP) on aging modulation and age-associated chronic non-transmissible diseases (CNTDs).

Methodology & Theoretical Orientation: Here, we reviewed 294 studies (16 from our group) English published and PubMed-Medline indexed involving a bilateral SA-HP imbalance triggered by a human single nucleotide polymorphism (rs4880 SNP) found in superoxide dismutase manganese-dependent gene (SOD2), which produces an enzyme acting inside of mitochondria (Val16Ala-SOD2).

Findings: In biological terms, SA is constantly produced by mitochondrial respiratory chain. Therefore, SOD2 is considered first line of antioxidant enzyme that dismutates SA to HP. The SOD2-SNP is located at mitochondrial sequence target that triggers SOD2-inactive cytoplasmic protein into mitochondria. A-allele produces an alpha-helix SOD2 protein that is more efficient to into mitochondria, whereas V-allele produces a beta-sheet SOD2 protein that is partially arrested in mitochondrial membranes. 132 studies analyzed association between A-allele and several cancer types, considering that A-allele increases SA-dismutation producing an excess of HP levels. HP leaves from mitochondria to cytoplasm producing hydroxyl radical (HR) that is highly mutagenic increasing cancer-susceptibility. Main risk associated to AA-genotype is prostate cancer. V-allele presents lower SOD2-efficient and SA excess react with nitric oxide (NO) triggering lipoperoxidation. Therefore VV-genotype has been associated with different metabolic diseases, such as hypercholesterolemia, its response to rosuvastatin, and chronic inflammation.

Conclusion & Significance: SA-HP imbalance seems to have a critical role on elderly-prevalent CNTDs and could be considered an emergent geriatric focus related to prevention and control of CNTDs.

Biography

Ivana Beatrice Mânica da Cruz has her expertise in genetic and environmental factors that could act on human aging modulation and risk of some chronic diseases prevalent in the elderly people. She is Biologist and has MSc and PhD degree in Genetics and Molecular Biology. Currently she is working as Associate Professor in Federal University of Santa Maria (UFSM, Brazil) where coordinates an MSc course of Gerontology. Moreover, she is Adviser of Pharmacological graduate program. Her research studies involve specially two lines projects that could be considered relevant in gerontology and geriatrics areas: Aging biology studies related to genetic and pharmacological SA-HP imbalance with approach from epidemiological investigation to cell culture *in vitro* analysis; and Pharmacogenomic and nutrigenomic studies associated to diseases prevalent in elderly people. These studies are specially concentrated about the effects of Amazon fruits on oxidative-inflammatory modulation aging-associated.

ibmcruz@hotmail.com

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

The relationship between depression and violence risk predictors on elderly

Joana F Alegria Pereira, Tatiana F. Silva Mestre, Felismina Mendes and Maria Otilia B. Zangão
University of Évora, Portugal

The risk of violence on the elderly increases according to the impact of intrinsic predictors (physical, psychological, emotional and social isolation) and extrinsic to the elderly (stress and social isolation of the caregiver, financial problems, drugs, alcohol, mental health, ageism and lack of compliance with the rights of the elderly). The purpose of this study was to understand the correlation between the elderly with depressive symptomatology and the predictors of the risk of violence against them. The method used was a quantitative approach using the Statistical Package program for Social Sciences (IBM-SPSS). There was a participation of 237 elderly people aged 65-96 years, of the project "Aging in Safety in Alentejo - Understanding to Act", at the University of Évora. The Geriatric Depression Scale (GDS 15, brief version, Yesavage et al., 1983) and the Predictors of Risk of Violence (E-IOA and VASS adaptation) were applied. About the results, 50 elderly (21.1%) had mild depressive symptomatology, and 14 (5.9%) had severe depressive symptomatology. Of the 64 elderly individuals who presented depressive symptomatology 55 were female. In the relationship between the severity of depressive symptomatology and predictors of risk of violence, significant results were found in three dimensions: Current supports and relationships, family context and cognitive / emotional difficulties. The main conclusion of the study is the relationship between depression and risk of violence in the elderly without social support networks, with complex family context and with cognitive and emotional changes. These factors contribute to greater physical and mental vulnerability of the elderly, resulting in cases of anxiety and stress, which present a depressive symptomatology and the risk of violence.

Biography

Joana Alegria Pereira has an Integrated Master in Psychology, with a specialization in Clinical and Health Psychology by University of Minho. Since 2013, she has collaborated with different research groups, having started this journey in the University Research Group on Self-regulation (EPSI-UM), in matters of homework and parental involvement. After completing the integrated master's degree, she has joined the team of NeuroRehabLab (M-ITI), aim to contribute to the clinical validation of new methodologies of cognitive and motor rehabilitation in post-stroke. At the moment, she collaborates as research assistant in the project "Aging with Security in the Alentejo Understanding to Act" (ESACA - Ref#: ALT20-03-0145-FEDER-000007). This project aims to respond to one of the most pressing societal problems of Portuguese society and the Alentejo region - Aging - by providing future goods and services that correspond to the needs felt by the elderly and institutions (public and social sector).

jfap@uevora.pt

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Social representations of violence on the elderly: An injustice and a badness

Tatiana Mestre, Felismina R.P. Mendes and Otilia Zangão
University of Évora, Portugal

Rationale: In contemporary society, ageing is a phenomenon that marks all developed societies. Portugal is one of the most ageing countries in Europe. Analyzing the social representations of violence on the elderly, from the current and past conceptions and daily practices of the elderly allows us to have access to the dominant constructions in society about the social phenomenon that is violence and the way it is socially and individually expressed by its main actors.

Objective: To analyze the social representations of a group of elderly people about violence on the elderly and the reasons why this violence occurs.

Methods: Exploratory and descriptive research with qualitative approach, supported by Theory of Social Representations. It was attended by 237 elderly people aged 65-96 years, from the project "Ageing Safely in Alentejo" from University of Évora. The Free Speech Association technique was used and data were processed through qualitative data analysis software. All the ethical procedures of human research were followed.

Results: In social representations of violence on the elderly the words most evoked by the elderly were injustice, to which are added the mistreatment, badness, bad, lack of respect, sadness, horrible and abandonment. About the reasons that lead to violence on the elderly the words such as lack of respect, lack of education and badness are predominant. These terms refer to the social devaluation of the elderly and their role in today's society, as in the representations about violence.

Conclusions: The social representations of these elderly people about violence and their reasons points to the stereotypes associated with the prevalent ageism in our society, where the social devaluation of the elderly dominates the daily life conceptions and practices.

Biography

Tatiana Mestre holds a degree in Social Education from the University of Algarve and holds a Masters and Postgraduate Diploma in Community Psychogerontology from the Beja Polytechnic Institute and a pre-doctorate in Sociology. At the moment, she's a PhD student in Sociology at the University of Évora. Since 2012, it works directly with the elderly, in various social responses (nursing homes, convalescence institutions, medium and long term). She is currently working as a research assistant on the "Aging with Security in the Alentejo Understanding to Act" (ESACA) project. This project aims to respond to one of the most urgent social problems of Portuguese society and the region of Alentejo - Aging - providing future goods and services that correspond to the needs felt by the elderly and institutions (public and social sector).

tasm@uevora.pt

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Implementation of a protocol of action in geriatric frail patient in the end of life

Anna Prat Canal and Ingrid Figuls

Althaia Xarxa Assistencial Universitària Manresa, Spain

Aging is an outstanding issue in our society. Comparing statistics, we have seen that from 2010 to 2017 the population of more than 70 years old has had a growth of about 1% in Bages, a central region of Catalonia. Within this old population we want to stand out to the geriatric patient, with whom we work in our area. Increasingly, more healthcare is offered to this type of patients and, for this reason, we believe in the importance of offering a better quality care, both to him and his family, when they need palliative care regardless their pathology. In order to improve holistic care towards the patient and his family, we believe it is important to create a protocol of action in the frail geriatric patient in the end of life. A protocol with the aim to improve the knowledge of multidisciplinary team that care for this type of patients was used. Therefore, within this protocol we emphasize the importance of determining the functions of every professional involved, through the tools to offer quality care, as well as respecting the will of the patient with the ability to decide and accompany the family in the different phases of this process.

Biography

Anna Prat is a young nurse who works in the geriatric field in a hospital in central region of Catalonia where the population is getting older. She is passionate about the work and, above all, she is eager to improve and create new projects based on the needs of the population and the work environment. She believes in the importance of giving holistic and high quality care to the patients and their families in order to meet their needs.

aprat94@gmail.com

Notes:

8th International Conference on

Geriatrics Gerontology & Palliative Nursing

July 30-31, 2018 | Barcelona, Spain

Challenges in morbidity and mortality statistics of the elderly population in Tanzania: A call to action

Kelvin M Leshabari, Ashok Biswas, Edward Gebuis, Sebalda Leshabari and Mayumi Ohnishi
I-Katch Technology Ltd, Tanzania

Objective: To highlight the challenges and opportunities in the reported statistics of diseases and deaths among the elderly population of Tanzania.

Methods: A rapid appraisal of available gaps from known facts and figures targeting the elderly cohort of Tanzania.

Findings: The proportion of people aged 60 years and above almost doubled (5.2% (2010) vs. 2.9% (in 2000), $p < 0.01$) between two consecutive national censuses. Furthermore, life expectancy at birth rose from 50 (in early 1990's) to 61 years in 2010. There is no evidence of any concrete policy on elderly care in Tanzania. There is scanty evidence of elderly research in Tanzania. The few available elderly population morbidity & mortality statistics of Tanzania were derived from hospital based data.

Conclusion: There is palpable evidence that the elderly segment is rapidly growing in the population pyramid of Tanzania.

Recommendations: There is a need for reliable and sustainable resource allocation in support for elderly care services in Tanzania.

Biography

Kelvin M Leshabari is a Medical Doctor with interest in Clinical Research. Specifically his research interests are on biological mechanisms of ageing as well as geriatric endocrinology/geriatric cardiology. He trained in Medicine and graduated MD degree in 2008. Thereafter he was a fellow in clinical research at different centres in Belgium and the Netherlands. He received his MSc degree from the University of Leiden in the Netherlands in 2015. He is the Principal Investigator of Cardiometabolic Risk Treatment & Prevention Intervention and Surveillance programme in Tanzania (CRISTA).

celsius_lx@yahoo.co.uk

Notes: