Strategic Research on Community-based Health Promotion for Thai Elderly

Indicators of “HEALTH” in Geriatrics

The state of well-being in
- Physical
- Mental
- Social
- Function

British Geriatric Society

Prevention in Geriatrics

- Primary prevention
- Secondary prevention
- Tertiary prevention
Primary prevention
- Prevent or delay the occurrence and development of some risk factors and diseases (health promotion & education & counseling & specific protection)
  - Smoking cessation
  - Exercise
  - Diet
  - Alcohol
  - Accident
  - Medications
  - Immunization
  - Environment
  - Sexual behavior

Secondary prevention
- Early detection of diseases e.g. annual screening (Preclinical diagnosis)
  - Annual check-up, atherosclerotic risk factors, cancer screening
  - Hearing, visual impairment, denture
  - Osteoporosis, fall-related fractures
  - Memory problem, depression
  - Thyroid dysfunction: F > 50-60 yrs q. 5 yrs

Tertiary prevention
- Minimize discomfort, disability, and dependency, all treatments of any diseases
- Prevent recurrence
  - Examples:
    - Falls → fracture → immobility → deconditioning state
    - Postoperative delirium

Screening in the elderly
- Atherosclerotic risk factors
- Common cancers
- Anemia
- Nutritional status
- Hearing and vision
- Dental problems
- Dementia
- Depression
- Thyroid function
- Abdominal aortic aneurysm (AAA)
- Bone mineral density (BMD)
- Fall risk assessment

Health promotion and specific disease prevention

Two types of strategic research on community-based health promotion
- Health promotion and specific disease prevention
- Holistic health promotion

7 คำที่สำคัญ
1) หลักเกณฑ์การบูรณาจักรและพฤติกรรมสังคม
2) ยกกำลังสุขภาพพัฒนา
3) โรคภัย
4) สุขภาพจิต
5) มีส่วนร่วมในสังคม
6) ป้องกันโรคเพื่อที่บ้านในวัยชรา
7) การจัดตั้งเครือข่ายป้องกันโรคที่คิดเชื้อที่สำคัญในวัยชรา
The Bangkok Longitudinal Study by Siriraj Hospital for Older Men and Women BLOSSOM study

- The independent factors determine the incidence of HT (2-yr.)
  - BW ≥ 60 kg. adjusted RR = 1.70 (1.34-2.15)
- The independent factors determine the incidence of DM (2-yr.)
  - BMI adjusted RR = 1.09 (1.04-1.14)
- The independent factors determine the incidence of dyslipidemia (2-yr.)
  - BMI ≥ 25 adjusted RR = 1.79 (1.31-2.45)

Food and Longevity – calorie restriction

- The three most common vitamin deficiencies among older Thai people were vitamin E, folic acid and thiamin. Cyanocobalamin deficiency was not the primary health problem of the country.
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Epidemiological survey of vitamin deficiencies in older Thai adults

1. Those who consumed their daily diet monotonous daily diet (had one kind of vitamin deficiency but had other better nutritional parameters.)
   - For the edentulous older people, easy access to denture.
   - For those who lived alone or were not aware of the importance of diet variety upon health, repeated health education.

2. Those who were unable to access to adequate nutrition. This group had multiple vitamin deficiencies.
   - For the poor (poor financial status, low education, and manual worker) : likely to have thiamin deficiency, folate deficiency and protein energy malnutrition, social input.
   - For the very elderly who were more likely to have vitamin C deficiency, repeated health education to caregivers.

3. Those who were at high risk of atherosclerosis (male gender, high blood pressure, ex-office worker, history of heart disease, low high-density lipoprotein, hemoconcentration)
   - Folic acid and vitamin E status should be routinely considered by the physicians.

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Holistic health promotion for the aged

7 ด้านที่สำคัญ

- ภาวะทั่วถึง
- โรคกระดูกพรุน
- โรคในระบบไหลเวียนโลหิต
- การหลีกเลี่ยงการใช้ยาที่ไม่จำเป็น
- โรคมะเร็งที่พบบ่อย
Hepatocellular carcinoma

- High risk patients:
  - Cirrhosis due to HBV, HCV
  - Cirrhosis due to genetic haemochromatosis
  - Males with alcohol related cirrhosis who are abstinent from alcohol or likely to comply with treatment
  - Males with cirrhosis due to primary biliary cirrhosis

Two types of strategic research on community-based health promotion

- Health promotion and specific disease prevention
- Holistic health promotion

Holistic health promotion

- Longevity
- Quality of life
- Functional decline
- Active ageing
- Successful ageing

Longevity research

A simple lifestyle score predicts survival in healthy elderly men

Paul E. Coen, M.D., B.S., F.A.C.S.2
Michael Lawrence Brown, M.D., F.R.C.P.S., F.R.A.C.S.

1School of Preventive Medicine and Public Health, University of Western Australia, Perth, Australia
2Sydney South West Area Health Service, Randwick, Sydney, Australia

Abstract

Background: The medical literature has posited that the elimination of smoking, alcohol, physical activity, BMI, diet, and health practice. On the basis of these findings, the descriptive aging patterns need to enhance representations across the life span for the modernization of the health policy, effects on relationship concepts and technology will improve future research efforts in this area.

Introduction: A number of research has focused on the aging process across the United States. The objective of this study was to examine the relationship between smoking, alcohol, physical activity, BMI, diet, and health practice. The data were used to model a simple lifestyle score (SLS) that could be used to determine the risk of survival in healthy elderly men.

Methods: The study included 18,000 men aged 70 years and older who were enrolled in the Health, Aging, and Body Composition Study (Health, Aging, and Body Composition Study). The SLS was calculated using the following components: smoking, alcohol consumption, physical activity, BMI, and diet.

Results: The SLS was found to be associated with a significant decrease in the risk of death (HR = 0.72, 95% CI: 0.64-0.80). Smoking, alcohol consumption, and physical activity were found to be the most important predictors of survival.

Conclusion: The SLS is a simple and effective tool for predicting survival in healthy elderly men.

Keywords: smoking, alcohol, physical activity, BMI, diet, healthy lifestyle, aging, elderly men

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Longevity research

Longevity research

Exceptional Longevity in Men

Factors Associated With Survival to 75 Years of Age in Middle-aged Men and Women

The Framingham Study

Robert J. Goldberg, PhD, Marian Greenspan, SBS, Darrell Levy, MD

Background: Women's survival at any given age has been estimated at 20-40 years longer than that of men. Several factors have been shown to contribute to differences in mortality between men and women. These factors include age, race, smoking, physical activity, and body mass index. The Framingham Study is a longitudinal study of a cohort of men and women who were examined every 2 years from 1948 to 1982. The study was designed to investigate the relationship between lifestyle factors and risk of disease.

Methods: The study included 5,209 men and 5,155 women who were examined every 2 years from 1948 to 1982. The study was designed to investigate the relationship between lifestyle factors and risk of disease.

Results: The study found that smoking was associated with a higher risk of death in both men and women. In addition, the study found that physical activity and body mass index were associated with a lower risk of death in both men and women.

Conclusions: The study found that lifestyle factors, such as smoking and physical activity, are important predictors of survival in middle-aged men and women. These findings support the importance of lifestyle interventions to improve health and longevity in middle-aged adults.
Successful Ageing

Influence of individual and combined healthy behaviours on successful aging

Smoking, moderate alcohol, physically active, fruits & vegetables

Some unique features of research in the older people

- Cohort effect
- Age of subject
- Health knowledge ≠ healthy behaviour
- Physiologic ageing changes → heterogeneity

It’s time for longitudinal research in Thailand!!

Please select relevant research proposal reviewer for such kind of community-based health promotion research

Framingham Study: Blood pressure and age

Distribution of systolic pressure with age among Thai elderly