PREVENTION OF CARDIOVASCULAR SYSTEM AND RESPIRATORY SYSTEM DISEASES AND THEIR CONSEQUENCES BY MODIFICATION OF THE COMPREHENSIVE GERIATRIC ASSESSMENT

(Organised by the National Institute of Geriatrics, Rheumatology and Rehabilitation - 27 of November 2018)

BACKGROUND

Heart failure is a disease frequently diagnosed in Poland. In 2015, it was diagnosed in around 226 thousand people, but morbidity forecasts indicate that in 2025 the figure will be 258 100 (Rywik TM et al. 2011) Starting from the age of 60, the percentage of those suffering from heart failure doubles with each decade of life. (4, 5). The prevalence of HF in the group of people over 80 is estimated at 10%.

The classic model of diagnostic procedure in HF is to assess clinical symptoms and, if present, to perform an echocardiographic examination. Assessment of plasma concentration of N-terminal prohormone of brain natriuretic peptide (NT-proBNP) can be used as an initial diagnostic test, but mainly in patients with an unclear onset of symptoms or if there is no access to echocardiographic examination. Access to echocardiographic examination is sometimes difficult, which may result in a delay in diagnosis and treatment, leading to lower effectiveness of the treatment. The NT-proBNP assessment is mainly performed in large hospitals, academic centres, but is not widely available or used in screening.

OBJECTIVES

To present state of the art and Polish experience in Comprehensive Geriatric Assessment (CGA); To assess the benefits of enriching CGA; To assess the economic justification for inclusion of NT-proBNP and spirometry in CGA.

CONCLUSIONS AND MAIN ACTION POINTS

During the meeting, the main areas of future activity were selected:

- increasing the availability of CGA for elderly patients (60+) through training and empowering a wider group of providers (not only geriatricians): doctors, nurses, physiotherapists to perform the geriatric evaluation of patients, introduction of incentive mechanisms for conducting VES-13 and Total Geriatric Assessment in primary care facilities and non-geriatric hospital departments.
- extending the list of current laboratory and specialist tests performed as part of the Total Geriatric Assessment by 2 obligatory tests: NT-proBNP and spirometry; and re-evaluation of the costs of the procedure.
- reactivation of the Team of Experts in Geriatric Care at the Ministry of Health for updating and disseminating standards of geriatric care, proposing innovative solutions in geriatric care, implementing the integrated geriatric care model.