

## **Guest Lectures**

### **New Tools of Assessment and Measurement in Geriatric Medicine**

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Large majority of older people after maintaining good health in early part of late adult life enter into a phase of frailty and require long term care either within the confines of their home or in long term care institutions depending on social norms and economic development. Measuring health, functionality and morbidity status in geriatric practice is a major issue. Comprehensive Geriatric Assessment which has evolved over decades of research, most of these areas of assessment and have been assimilated into the geriatric practice all over the world. However, care of frail older patients requires additional attention to a broad range of potentially interrelated problems linked to relentless biological decline, multiple chronic disease, cognitive impairment, multiple prescriptions, level of training of formal and informal care givers, quality of care (both in home and nursing home), financial status of the family or the funding status in a welfare state etc. All these issues ultimately determine the quality of life of the older person in frail state of health. Assessment of these issues is not only complex but also needs specific tools for measurement. The tools need to have a long term perspective to measure the state of health and functionality over time, quality of care, functioning of the care system, and value for money spent in care in both public and private long term care system. Responding to these needs systems of "Minimum Data Set (MDS)" for measurement of long term care has evolved in countries with well defined long term care and geriatric medicine starting in mid 1980s. There are several such MDS instruments, among which "interRAI" has emerged as the leading one. Over the next few decades these interRAI/ MDS instruments have been implemented in emergency care, acute care, post acute care, assisted living and residential care, home care, palliative care, intellectual disability, physical disability and mental health care. Many of these instruments can be used both in community as well as community setting. These new instruments have several other applications in addition

to their primary function of supporting care planning. These include quality measurement, case mix measurement, program evaluation, assessment of priority level etc. The interRAI/ MDS instruments have not yet been introduced to Indian health care system. However, with increase in the population of older people in the country, changing social structure and corporatisation of health care, it is anticipated that objective assessment tools will soon become a part of Geriatric Medicine in India.

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### **Comprehensive Geriatric Assessment (CGA) : Multidimensional Approach to a Geriatric Patient**

**Arvind Mathur**

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Quick and effective comprehensive clinical evaluation of health status of an older individual, particularly a frail old patient with multiple medical and functional problems, is a challenging task. It requires sensitivity to the concerns of older people, awareness of unique aspects of their medical problem, an ability to interact effectively with a variety of health professionals, and a great deal of patience to detect subtle findings.

CGA refers to the multi-faceted approach of diagnosing and managing complex physical, psychological and functional problems. CGA focuses on the preservation or improvement of the older adult's function rather than curative aspect. Primary care physician can easily perform modified CGA, identify the problems and set the priority for their management.

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### **Geriatric Clinical Pharmacology & Therapeutics**

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Pharmacological responses are altered with age and adverse reactions occur frequently in elderly patients. Older patients often have multiple chronic diseases that require concurrent medications because organ function and pharmacological responses are