

Press release

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Basic information

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Department of: Clinical Medicine

Main supervisor: Professor Else Marie Damsgaard

Title of dissertation: Effectiveness of geriatrician-performed comprehensive geriatric care in older people referred to a Danish community rehabilitation unit

Date for defence:

May 27th 2019 at (time of day): 14.00 Place: Aarhus Universitetshospital, Palle Juul-Jensens Boulevard 99, Entrance C, Level 1, Auditorium C114-101, 8200 Aarhus N

Press release (Danish)

Effekt af geriatrisk lægelig vurdering og opfølgning overfor ældre med behov for rehabiliterings- eller aflastningsophold

En geriatrisk lægelig vurdering og opfølgning hos ældre med ophold på en rehabiliterings/aflastningsenhed optimerer medicinforbrug og forbedrer de ældres livskvalitet, men reducerer ikke antallet af hospitalskontakter, viser et nyt ph.d.-projekt fra Aarhus Universitet, Health. Projektet er gennemført af Dmitri Zintchouk, der forsvarede det den 27. maj 2019.

Gennem de seneste årtier har et 3-5 ugers ophold på de kommunale rehabiliterings-/aflastningsenheder i Danmark givet ældre mennesker en mulighed for fysisk bedre at klare sig i hverdagen. Alligevel viser data fra Landspatientregistret et højt antal af hospitalsindlæggelser og skadestuebesøg hos de ældre allerede fra starten af deres ophold og de følgende tre måneder. Formålet med dette lodtrækningsstudie var derfor at undersøge om en vurdering og klinisk opfølgning udført af geriatere i et samarbejde med personalet på stedet kunne: 1) reducere antallet af hospitalsindlæggelser og skadestuebesøg uden at øge dødelighed og plejhjemsanbringelse; 2) optimere medicinforbruget og forbedre de kognitive og fysiske funktioner såvel som livskvalitet. De 368 projektdeltagere var 65 år og derover og overflyttet til én af to Aarhusianske kommunale rehabiliterings-/aflastningsenheder enten fra eget hjem eller fra hospitalet. Nøgleelementet i den geriatriske intervention var en vurdering af den ældres medicin. Kontrolgruppen modtog standard rehabilitering med den praktiserende læge som backup. Interventionen reducerede ikke antallet af hospitalsindlæggelser og skadestuebesøg indenfor 90 dage. Antallet af dage på hospitalet, ambulante kontakter, hyppighed af plejhjemsanbringelser og døde blev heller ikke mindsket. Kontakterne til praktiserende læge under opholdet blev reduceret, men denne effekt fortsatte ikke efter opholdet. Interventionen reducerede forekomsten af hyperpolyfarmaci (10 eller flere forskellige lægemidler dagligt) og brugen af mavesårsmedicin, vanddrivende og midler til obstruktive luftvejssygdomme. Interventionen forbedrede ikke den kognitive eller fysiske funktion, men de ældres generelle livskvalitet under den 90 dages opfølgning blev forbedret i forhold til kontrolgruppen.

Forsvaret af ph.d.-projektet er offentligt og finder sted den 27. maj 2019 kl.14. i Auditoriet C114-101 på Aarhus Universitetshospital, Palle Juul-Jensens Boulevard 99, Indgang C, plan 1, 8200 Aarhus N. Titlen på projektet er "Effekt af geriatrisk lægelig vurdering overfor ældre med behov for rehabiliterings- eller aflastningsophold". Yderligere oplysninger: Ph.d.-studerende Dmitri Zintchouk, e-mail: dmitri@clin.au.dk, tlf. 26700903.

Bedømmelsesudvalg:

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Press release (English)

Effectiveness of geriatrician-performed comprehensive geriatric care in older people referred to a Danish community rehabilitation unit

The geriatrician-performed comprehensive geriatric care seems to optimize medication use and improve overall quality of life during the 90-day follow-up, but did not reduce the number of hospital admissions and ED visits, shows a new PhD project from Aarhus University, Health. The project was carried out by Dmitri Zintchouk, who is defending his dissertation on May 27th 2019.

During the past decades, community-based rehabilitation units in Denmark have offered older persons an opportunity to improve their level of functioning during a 3- to 5-week rehabilitation stay. However, data from the National Patient Registry showed a significant number of hospital admissions and emergency department (ED) visits in older people within 3 months of start of the rehabilitation stay.

The aim of this randomized controlled trial was to examine the effect of geriatrician-performed comprehensive geriatric care (CGC) in older people referred to a non-hospital-based rehabilitation unit. We wanted to examine whether it was possible: (1) to reduce hospital admissions and ED visits without increasing mortality and institutionalization; (2) to optimize medication use and to increase functional ability as well as quality of life.

The 368 participants were 65 years of age or older and were referred to two community-based rehabilitation units in Aarhus, Denmark, from their home or from hospital. The intervention group received the CGC performed by a geriatrician in collaboration with the staff of the rehabilitation units. The medication adjustment was the key element of the geriatric intervention. The control group received standard rehabilitation with GPs as back-up.

The intervention did not reduce the number of hospital admissions and ED visits during the 90-day period. The number of days in hospital, ambulatory contacts, institutionalization, and mortality was the same for the two groups. The reduction in total number of GP contacts during the rehabilitation stay did not persist after the rehabilitation stay. The intervention reduced the hyperpolypharmacy (≥ 10 medications per day) and optimized medication profile. The cognitive and physical functions were the same in the two groups, while more participants in the intervention group than in the controls improved their overall quality of life during the 90-day follow-up.

The defence is public and takes place on May 27th 2019 at 14.00 in Auditorium C114-101, Aarhus Universitetshospital, Palle Juul-Jensens Boulevard 99, Entrance C, Level 1, 8200 Aarhus N. The title of the project is "Effectiveness of geriatrician-performed comprehensive geriatric care in older people referred to a Danish community rehabilitation unit". For more information, please contact PhD student Dmitri Zintchouk, email: dmitri@clin.au.dk, Phone +45 25700903.

Assessment committee:

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