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Rehabilitation medicine for elderly patients, a further note

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Abstract

Increased life expectancy of a large percentage of a population has many implications, specifically for older olds and their families. Beside the social burden, it means increasing costs for managements for public and private health system. The recent book, "Rehabilitation Medicine for Elderly Patients", offers insight into the complex world of older persons (healthy, frail, diseased or dying) from the perspective of Physical Medicine and Rehabilitation, but approaching matters from a variety of viewpoints. Written primarily for junior doctors and residents, it is a comprehensive educational tool, easy to read, and written in a structured way. A list of useful references is here added, specifically for the neurorehabilitation of aging and early aging patients. It may help physiatrists and general practitioners to assist patients with disabling conditions.

World older population is rapidly growing in number and proportion and people over 60 years are expected to double in the next few decades. The European continent is projected to remain for at least the next 50 years the world's area with the oldest population: by 2050 about 37 % of Europeans is expected to be 60 or over. Increased life expectancy that reflects, also the success of public health interventions, has many implications: the growing number of older persons suffering of chronic diseases increases demands on the public healthcare system, costs for management, and social burden. Sarcopenia, frailty, falls, and dizziness, are just some of the common medical conditions that occur among the elderly, diminishing their quality of life (QOL) and contributing to their physical and cognitive decline, disability and death. However, ageing itself should not be considered a disease and many interventions by governments, communities and families may promote health, participation, social inclusion and security of older people and improve their QOL. The elderly (of whom 60-75% are healthy, 20-30% suffer from chronic diseases, and 2-10% are "frail") should benefit from health-related targeted measures applied in the different contexts in which they live (home, residences, hospitals). It is in this regard that the book, Rehabilitation Medicine for Elderly Patients [1], offers insight into the complex world of older in the specialty of Physical Medicine and Rehabilitation (PM&R), but approaching matters from a of variety of viewpoints. The new book represents the perspective of international leaders on both updated literature review (including experimental and biomedical approaches) and practical clinical applications to ensure high quality standard to the contents. Rehabilitation Medicine for Elderly Patients is organized into three parts: Part I is general and deals with many issues of elderly people such as sarcopenia, frailty, exercise, nutrition, new technologies, and therapeutics. Part II is on rehabilitation of the most commonly encountered diseases of seniors. Some innovative topics covered in this part are cognitive therapy, spinal lesions, sexual dysfunction rehabilitation, etc. Part III is devoted to description of different organization of healthcare system for the elderly in European countries. The book is written primarily for junior doctors, who are about to embark on their studies, and residents. It is a comprehensive educational tool, simple, easy to read, clear, and written in a structured way. It can also help physiatrists in reviewing the main topics in the field of rehabilitation, general practitioners and physicians of other specialties in assisting patients with disabling conditions. The first edition, like all first attempts, has limitations. Nonetheless, we hope it will be appreciated as a resource for training and education in the field of PM&R and beyond. To this purpose a list of useful references is here added [2-32], specifically for neurorehabilitation of aging and early aging patients.

Conflicts of interest

The authors declare none conflict of interest regarding the publication of this paper.

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Special Issue: Assisted Exercise

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