PHYSICAL ACTIVITY AND QUALITY OF LIFE IN CHINESE OLDER ADULTS WITH DIABETES

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Diabetes is a major health concern for older people in developing countries. Physical inactivity is common in older adults with diabetes and could not affect only the control of the disease, but also quality of life (QOL). This study examined the association between the level of physical activity and QOL in older Chinese with diabetes. A total of 201 community-dwelling older adults (age 60-89, mean=70 years) who had confirmed diagnosis of diabetes participated in this study. The Taiwan version of the International Physical Activity Questionnaire (IPAQ) was used to record and categorize (vigorous or moderate) the level of physical activity. Subjects who had at least 150 minutes of moderate or at least 75 minutes of vigorous activity were classified as active, while the rest as inactive. The WHOQOL-BREF Taiwan version was used to measure QOL. It was found that subjects in the different activity groups did not differ in age, gender, body mass index or duration of diabetes. About 67% of the subjects were inactive, but did not differ from their active counterparts in the four domains of QOL (p=0.07-0.228). Subjects with at least 10 min of moderate activity (47%) also did not differ from those without (p=0.186-0.800). For subjects (12%) with at least 10 min vigorous activity, their physical (p=0.004), psychological (p=0.011) and environment (p=0.008) QOL were significantly better than those who did not. The results showed that vigorous but not moderate activity was associated with better quality of life.

THE UNIVERSAL CHALLENGES AND FUTURE OF GERIATRIC MEDICINE DISCIPLINE

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Presently, the discipline of geriatric medicine is facing many challenges to keep up with advances already achieved by other health care services at the beginning of the 21st century.

In response to the needs and demands of an aging population, geriatric medicine has to develop new models of care, advance the treatment of common geriatric conditions and to advocate for the health care of older peoples.

During the last decade, the world medical societies had set some goals aimed to improve the health of older persons through improving the geriatrics discipline these are:

- Ensure equal and high-quality health care for all and every older person worldwide.
- To expand the geriatrics knowledge base
- To increase the number of healthcare professionals who employ the principles of geriatric medicine in caring for older persons
- To recruit physicians and other healthcare professionals into careers in geriatric medicine
- To unite professional and lay groups in the effort to influence public policy to continually improve the health and health care of seniors.

Collaboration with the government, organizations, agencies, foundations and other partners is essential in accomplishing these goals.

Recently, American geriatrics society (AGS) declared that, doctors who specialize in treating the elderly are in short supply and this shortage is expected to get worse as 70 million baby boomers turn 65 by 2030. The main reasons behind this shortage are, the less reimbursement of Medicare for the most part and lower compensation the geriatricians are getting compared to their colleagues in other medical and surgical discipline.

Add to the fact that geriatricians, after doing an extra one year medical training to become board certified, are making little headway with graduating medical students because the practice lacks the life-saving heroics of other specialties and often means making patient comfortable rather than providing a cure.

Because the consequences of inaction will be profound, many schools of medicine nowadays offering mini-fellowships to teach educators how to provide comprehensive care to the elderly. They in turn, will go back to their hospitals and pass on what they have learned.