

S11: OLDER PEOPLE: DISABILITY VS. AUTONOMY

Authors: Isabel Lovrincevich, Cecilia Volpe, Bibiana Kompel, Wanda Gisbert

Introduction: The international demographic data indicates a growth in the population of older people, which is why it is necessary to begin to talk about the process of aging with disabilities from a bio-psycho-socio-functional approach and their socio-family environment according to the pillars of the Decade of Healthy Aging (2021-2030).

Taking into account disability situations in older persons as the guiding thread of concern about the increase on frailties, these presentations will highlight different contributions that open a debate regarding the challenge and the complexity to approach older persons with disabilities in gerontological work, the psychological aspects and the existing legal framework.

Objectives: This Symposium seeks to put on the scientific agenda a topic that make us rethink and reevaluate our intervention practices with a comprehensive approach to older people with disabilities.

Methods: Scientific communications and empirical research.

Results: Empirical data will be provided in reference to each Symposium's speakers presentations.

Conclusions: It is hoped to raise questions about whether it is possible to achieve the paradigm change from older persons as an object of care to a subject of law.

Keywords: Gerontology, Disability, Autonomy, Legal Framework

Symposium Coordinator: Cecilia Volpe

Speakers

Dr Wanda Gisbert, Geriatrician: Comprehensive approach to frailty as a predictor of disability. Dr Isabel Lovrincevich, Lawyer: Autonomy and dependence in old age. Psychologist Bibiana Kompel: A topic that challenges us: New Psycho Gerontological approach.

S12: Impulsivity in geriatric, neurological and psychiatric pathologies. Importance of its diagnosis and prevention.

Authors: María A. Brizuela, Gabriela F. Berkowski, Alicia B. Kabanchik, Cecilia M. Serrano

Introduction: Impulsivity is a common feature of human behavior, often described in psychopathology, but evanescent and lacking a strict, clear and singular definition. The question is, can a person control his or her actions? The turning point for our interest is impulse control in the elderly. Falls, accidents, transgressions against the law and an altered family life may be the consequences of the impulsive spectrum without ignoring consequences such as pathological gambling, traffic accident, lethal fracture and even suicide. Certain neurological, psychiatric, and geriatric pathologies present with Impulsivity with impulsivity generally undetected. It is often mistaken for a character trait of old age, leading to stigmatization and "ageism".

Objectives: To highlight the importance of the clinical presentation of Impulsivity in older adults for its early diagnosis and therapy.

Methods: PUBMED literature review. Presentation of clinical cases in an interdisciplinary sharing Presentation of clinical cases in an interdisciplinary sharing.

Results: Early diagnosis of Impulsivity and its treatment offers a better quality of life to the patient and his family. Impulsivity is a symptom that involves several diseases, which is why its early diagnosis and adequate therapy allows a better quality of life for the elderly and the environment, since it may be a risk factor for early institutionalization.

Conclusions: It is a subject that is not often addressed and is usually solved by polymedicating. We consider the need for a differential diagnosis for an appropriate therapy.

S13: Apathy in dementia: Difficult to diagnose, difficult to treat

Authors: Santiago O'Neill, MD, Ignacio Flores, Natalia Sierra, Florencia Vallejos, Guido Dorman

Summary: Apathy is one of the most common neuropsychiatric symptoms in dementia, mainly in Alzheimer's disease and lobar frontal degeneration. Although diagnostic criteria guidelines have been developed to facilitate diagnosis and multiple drugs have been evaluated for treatment, apathy remains a very important challenge in clinical practice. The Objectives of the symposium is that specialists from Favaloro Foundation University Hospital Memory clinic in Buenos Aires provide an update on the evidence available for both the apathy diagnosis and treatment (pharmacological and non-pharmacological) patients with dementia, as well as showing that will come in the near future. The specialists will base the dissertation both on the available evidence and on their robust clinical experience in the dementia field. The presentation will focus on the available evidence diagnosis, differential diagnosis, and the best therapeutic tools available, pharmacological and non-pharmacological. Learning and knowing about apathy is essential for correct management.

Up today, apathy diagnosis is based on clinical signs and symptoms. General diagnostic criteria and specific criteria for some diseases have been developed. Memory clinic specialist will show the available tools and evidence for apathy diagnosis, the best way to differentiate from other similar disease/symptoms and will provide their robust clinical experience in this field.

Treatment of apathy is still a challenge in clinical practice. Several pharmacological treatments did not show clear symptoms improvement so non pharmacological treatment has become a fundamental tool for the patients- A specialized neurophysiologist will provide the actual techniques utilized in daily practice to treat apathy in dementia patients.

Pharmacological treatment for apathy is still a challenge. Multiple drugs have been tested in clinical trials but without significant symptoms improvement. Memory clinic specialist will show available evidence for pharmacological treatment for apathy and will provide their experience in clinical practice for subject management.

Considering that available pharmacological treatment for apathy did not show strong symptoms improvement, there is an unmet need to find a treatment for apathy- Specialist will present available information for ongoing research for apathy.