

COUNCIL OF EUROPE

COMMITTEE OF MINISTERS

RECOMMENDATION No. R (87) 22

OF THE COMMITTEE OF MINISTERS TO MEMBER STATES

ON THE SCREENING AND SURVEILLANCE OF ELDERLY PERSONS

*(Adopted by the Committee of Ministers on 22 October 1987
at the 411th meeting of the Ministers' Deputies)*

The Committee of Ministers, under the terms of Article 15.b of the Statute of the Council of Europe,

Considering that the aim of the Council of Europe is to achieve greater unity between its members for the purpose of facilitating their economic and social progress;

Considering that this aim may be pursued, *inter alia*, by the adoption of common rules in the health field;

Having regard to Resolution (70) 16 on social and medico-social policy for old age and to Resolution (74) 31 on health care and social work for old people living at home;

Recalling Resolution (74) 30 on screening as a tool of preventive medicine;

Considering that, owing to the twofold effect of the fall in the birth-rate and greater longevity, the proportion of old people among the populations of the various European countries has risen considerably and continues to rise;

Noting that elderly people seek greater autonomy and independence;

Considering that epidemiological studies have shown a high prevalence of chronic disorders among elderly persons;

Recognising that the objectives of screening and surveillance of elderly persons are to prolong effective life, improve subjective well-being, improve social functioning and decrease the incidence and duration of disease,

Recommends that the governments of member states:

1. make available, wherever feasible, screening and surveillance facilities for elderly people on the lines proposed in the appendix and its accompanying table;
- 2.1. encourage elderly people, in full respect of their freedom of choice, to undergo screening and for this purpose provide them with incentives, such as free screening, and motivate them through clear and simple information on the possibilities and benefits of screening;
- 2.2. stimulate voluntary organisations to play a greater role in encouraging elderly people to be socially active, providing them with information and encouraging them to visit their general practitioners and other relevant health professionals;
3. ensure that all screening and surveillance strictly respect confidentiality;

- 4.1. encourage general practitioners to play a greater role in the screening and surveillance of elderly people, particularly in making them aware of the benefits of screening and in establishing contact with them, and to maintain a good system of recording consultations and treatment, to allow them to follow up their elderly clients and ensure a proper evaluation of the screening ;
- 4.2. give every possible incentive to community nurses to take initiatives in the surveillance of elderly people ;
- 4.3. encourage all health staff who are involved in the care of, or are in contact with, elderly people to obtain information on their social situation ;
- 4.4. ensure that all health staff receive training in geriatric medicine and gerontology during their basic and in-service training ;
5. take special measures to reach those groups of elderly people who are most at risk and follow them appropriately ;
- 6.1. encourage research on the cost-effectiveness of screening and surveillance of the elderly, with particular emphasis on the effectiveness or otherwise of such screening and, to this end, develop instruments for the measurement of such effectiveness ;
- 6.2. collect morbidity and mortality data in order to find out the real needs of elderly people, particularly unmet needs. This collection of data should be done on a uniform basis in member states in order to ensure comparison.

Appendix to Recommendation No. R (87) 22

Screening and surveillance for elderly persons

This table lists the disorders to be considered in health controls. The criteria for inclusion in the list are : rather high prevalence, reliable methods, reasonably good effectiveness of screening and satisfactory outcome of intervention. For this reason, disorders such as Alzheimer's disease, osteoporosis and respiratory disorders are not included.

Health control should include information and adjustment of drug treatment in order to limit the number and dosage.

Screening should start at the age of 65 with more frequent check-ups after the age of 75. Examinations should take into account the effects of the ageing process on symptoms, signs and treatment.

	Technique		Method	By whom		Objective	Interventions	Effectiveness of screening	Outcome of intervention	Surveillance	Further approach
	Population	Patient		General practitioner	Nurse						
High blood pressure	+	+	Blood pressure instrument	+	+	Prevention of stroke and ischemic heart disease, adjustment of treatment	Adjustment of drug therapy, drugs for the under-80s Diet ?	Very good	Good	Salt reduction, weight reduction	-
Heart failure	-	+	Available	+	-	To reduce symptoms and improve quality of life	Drugs and diet, adjustment of drug therapy	Good	Good	-	-
Intestinal cancer	+	+	X-Ray, colonoscopy, faecal blood	+	-	Detection of cancer in early stage	Surgery	Poor, many false positives	Satisfactory	Food habits smoking	Referral to a specialist
Skin cancer	-	+	Skin, scalp hair and warts examination	+	-	Early detection	Surgery, chemotherapy	Poor	Satisfactory	Nurse is useful	Referral to a specialist
Breast cancer	+	+	palpation, mammography	+	+	Early detection	Surgery, chemotherapy	Good	Good	Self-examination	Referral to a specialist
Cervical cancer	-	+	Smears	+	-	Early detection	Surgery, radiotherapy	Satisfactory	Doubtful	-	Referral to a specialist
Depression	+	+	Mental study, questionnaire	+	-	Improvement of quality of life avoidance of suicide	Electroshocks, drugs, psychotherapy	Poor, but could be very good	Satisfactory	Health visitors	Referral to a specialist
Pseudo-dementia	-	+	Medical and laboratory examinations	+	-	To distinguish from psychiatric disorders	Drug adjustment, treatment of concomitant diseases	Moderate	Good at an early stage	-	-
Parkinson's disease	-	+	Physical examination	+	-	Improvement of quality of life	Drug therapy, social therapy, physiotherapy	Very good at the start, poor at the end	Depends on the patient, improvement for some time	Nurses and laymen can help	-
Impaired vision	+	+	Reliable and well known	+	+	Prevent accidents, keep contact with reality	Spectacles, drug treatment, laser beams	Poor, but could improve	Moderate	Community nurse is of help	-

	Technique		Method	By whom		Objective	Interventions	Effectiveness of screening	Outcome of intervention	Surveillance	Further approach
	Population	Patient		General practitioner	Nurse						
Glaucoma	-	+	Eye pressure	+	-	Avoid loss of eyesight	Drug treatment, operation	Good	Doubtful	-	Referral to a specialist
Impaired hearing	-	+	Well known	+	+	To improve communication, keep contact with reality, prevent accidents	Removing ear smears, hearing aids	Moderate	Moderate	Community nurse is of help	-
Urinary incontinence	+	+	Ask patient	+	+	Improve social life, prevent bladder infections	Surgery, aids, drugs, re-education	Very good	Possible	Health visitors	Referral to a specialist
Oral health	-	+	Dental and medical examination	+	+	Help chewing ; and for cosmetic reasons	Fit prostheses, treatment of gums and teeth	Questionable	Depends on individual ; effective for cosmetic reasons	Community nurse	Referral to a specialist
Diabetes	-	+	Available	+	+	Reduce mortality and complications of ischemic cardiovascular disorders	Diet, drugs, physical exercise	Seems very good but not properly investigated	Moderate	Repeated information to patients	-
Osteo-arthritis	-	+	Available	+	-	Improve functional limitations	Physiotherapy, drugs, surgery	Not too good, not properly investigated	Moderate	Community nurses and laymen	Referral to a specialist
Balance disturbance	-	+	Available	+	-	Prevention of accidents ; improvement of daily living	Information, physiotherapy	Still has to be investigated	Questionable	Community nurse	-
Anaemia	+	+	Laboratory tests	+	-	To detect anaemia	Further investigation	Very good	Good	-	-
Hypokalemia	-	+ treated with diuretics	Laboratory tests	+	-	To detect in case of treatment with diuretics	Further investigation	Good	Good	-	-