



IPA INTERNATIONAL PSYCHOGERIATRIC ASSOCIATION

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ABSTRACTS – KEYNOTE AND PLENARY

KEYNOTE: THE STATE OF OLD AGE MENTAL HEALTH SERVICES IN EUROPE

MENTAL HEALTH SERVICES FOR OLDER PEOPLE IN ENGLAND

Alistair Burns*

Objective: The recent explosion of interest in dementia has brought into sharp relief the broad range of mental health challenges in older people. The report of the Chief Medical Officer in England has highlighted a number of aspects of mental health in older people, concentrating on disorders other than the dementias. It is timely to be reminded of the use of specialist services by older people, that 6% of people over the age of 65 live in care homes, that while depression is common in older people it is poorly understood and often undertreated, that studies suggest that alcohol intake in older people may be increasing and reaching harmful levels in a proportion and that compared to services for younger people specialist mental health provision for older individuals is relatively underfunded. The importance of comorbidities in health and social care in older people cannot be overemphasised and there is some learning from the experience of the success of dementia rising up the political and public agenda which could be of benefit across the mental health spectrum in older people.

Keywords: Dementia, Mental Health Services for Older People, Social Care

OLD AGE MENTAL HEALTH SERVICES IN BELGIUM

Filip Bouckaert*

Objective: to give a description of the current state of old age psychiatry in Belgium

Methods: using epidemiological data, projected growth in older adults (with mental illness), statistics of psychiatric disorders, obstacles in care delivery, training and research

Results: Taking the projected growth of older adults with mental illness into account, we will fail to provide adequate treatments and services to those in need. Similar to other regions worldwide, accessibility of geriatric mental health services needs to be improved, prevention programs need to be initiated and links between primary care and community health care need to be promoted. Since the recognition of geriatric psychiatry as a subspeciality is also on the rise in Belgium, more resources for scientific research in this fascinating field should be made available.

Conclusion: A reform of old age mental health services is needed in order to offer a collaborative and integrated care and to optimize research and training.

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STATE OF OLD AGE MENTAL HEALTH SERVICES IN SPAIN

Raimundo Mateos.

Department of Psychiatry, School of Medicine (USC) and Psychogeriatric Unit, CHUS University Hospital. Santiago de Compostela. Spain

Spain has a population of 46.5 million inhabitants. 16.7% of the population is over 65 years but this percentage exceeds 22% in several regions.

It is a country with diverse social, economic and cultural contrasts. It is organized into 17 autonomous regions. Only some of them (e.g. Catalonia, Galicia) have a tradition and a formal model of psychogeriatric services.

In the last 25 years developing psychogeriatrics has run parallel to the Sociedad Española de Psicogeriatría (SEPG), an association affiliated to IPA since 2003. This association has led the training in this field (26 annual scientific meetings, development of Master Psychogeriatric with the Autonomous University of Barcelona, several scientific publications). One of the actions taken in recent years by the SEPG has been the analysis of the needs and resources of mental health services for older people in Spain.

In summary, the main needs are: the formal definition of a model for psychogeriatric care for the whole of all the autonomies, the implementation of a strategic plan of care for dementia and creating the subspecialty of geriatric psychiatry. We believe that an appropriate strategy would be the collaboration with similar scientific societies in other European countries, preferably under the umbrella of international bodies, such as the International Psychogeriatric Association.

PL01: WHAT IS MEANT BY ALZHEIMER'S DISEASE

PL01-01 GAMMA-AND BETA SECRETASES: BIOLOGY AND RELEVANCE FOR A CURE FOR ALZHEIMER'S DISEASE

Bart De Strooper, MD, PhD

Professor at University of Leuven and University College London

Research director VIB Center for the Biology of Disease

Arthur Bax and Anna Vanluffelen chair for Alzheimer's Disease research

co-Director of LIND, Leuven institute for neuroscience & disease

Over the last decade important progress has been made towards the understanding of the molecular pathobiology of Alzheimer's Disease. Major breakthroughs were the identification of presenilin and its crucial role in the γ -Secretase processing of APP and Notch and of BACE1 and its role in Neuregulin processing. We will show in the current presentation that our knowledge on Secretase functions and regulation has dramatically progressed in the last years. We will explain how different γ -Secretase complexes have different biological roles, and that selectively targeting them could provide safer drugs. Also increasing insights into structure and function could lead to safer drugs, such as gamma-secretase modulators, but also drugs that specifically interfere with docking of specific substrates to the different γ -Secretases. Finally insight into the regulation of the γ -Secretase complex only starts to emerge, which also could open new opportunities for safer drugs. Inhibitors of BACE1 are going forward in the clinic. However, increasing insight into the biological function of this crucial protease e.g. in growth cone collapse and axonal outgrowth, calls for caution.

PL01-02 WHAT IS MEANT BY ALZHEIMER'S DISEASE?

Carol Brayne*

Objective: Why do we have diagnoses? Is the purpose the same from different perspectives – societal, community, family and personal? How does the history of the diagnosis develop over time and what are the drivers for this and how sustainable are they? This presentation will discuss concepts and drivers and then apply these to the concepts within neurodegenerative disorders, focusing on Alzheimer's Disease using population based evidence with discussion about how new understanding forces us to address what we are trying to achieve with biomedical research.

Keywords: Alzheimer's disease, public health