



Newsletter of the Section of Old Age Psychiatry

July - September 2021

Dear Colleagues

These are some news concerning Old Age Psychiatry and WPA during the period of July-September 2021.

I – UNITED NATIONS – Department of Economic and Social Affairs (1)

On September 2021 it was published under the coordination of Jean-Marie Robine the report **Ageing populations: We are living longer lives, but are we healthier?**

Many indicators point to an increase in the life span of adults in the developed world since the middle of the twentieth century. For example, the number of people reaching the age of 100 years has never been greater than it is today. These demographic changes raise two main types of questions. The first is whether life expectancy in good health can increase as much as total life expectancy or whether this increase in longevity comes at the cost of an increase in years of life in poor health and/or disability. The second type of question is whether these demographic changes are simply a new transition, after the elimination of infant mortality and premature mortality of young adults, increasing total life expectancy but without changing the characteristics of human longevity, or whether they are more fundamentally the beginnings of a change in the characteristics of human longevity, a real revolution in adult longevity. This technical paper does not claim to answer these questions but simply to present the demographic and epidemiological data that have been accumulating for more than 70 years and that still need to be analyzed in order to try to answer these new questions.

II – WORLD HEALTH ORGANIZATION

1. Be he@lthy Be mobile. A handbook on how to implement mDementia (2)

“Be He@lthy, Be Mobile” (BHBM) is a global initiative led by the World Health Organization (WHO) and the International Telecommunications Union (ITU). It is based on the use of mobile technology for health (mHealth) to address diseases and health issues such as smoking, diabetes, ageing, cardiovascular diseases and chronic respiratory diseases. An estimated 50 million people live with dementia worldwide, and with approximately 10 million new cases every year, dementia is projected to affect 152 million people by 2050. Dementia is a major cause of disability and care dependency among older adults, and impacts every aspect of a person’s life. There also continues to be much stigma and discrimination against people with dementia and their carers, heightening the already significant psychological, social, emotional and financial impacts of dementia on families and communities. To help address these issues, Be He@lthy, Be Mobile has developed the mDementia programme that uses mHealth (whereby devices such as mobile phones, patient monitoring devices, personal digital assistants and other wireless devices are used to support medical and public health practice) to provide health information to those at risk of developing dementia and to support carers of people living with dementia. The reach of dementia prevention campaigns and caregiver support activities may be drastically enhanced with the use mHealth. The mDementia handbook and programme content was prepared by an international group of experts in mHealth, behavioural science and dementia, in collaboration with WHO and ITU. All content in this handbook is based on WHO guidelines, existing research evidence, existing WHO e-health content, and/or expert opinions. Content for the programme in the form of a comprehensive message library with suggested message algorithms is available on request from bhbm@who.int. The message library uses evidencebased behaviour change techniques to help persons at risk of dementia and their carers. All content and programming guidance described here should be considered as examples and adapted to the local context of each participating country

2. WHO launches new platform for knowledge exchange on dementia

A new online platform to facilitate the exchange of information and knowledge on dementia was being launched by WHO. The new tool, the Global Dementia Observatory Knowledge Exchange Platform, contains key resources to support the implementation of the Global action plan on the public health response to dementia 2017-2025 and its seven action areas. It provides a space for stakeholders to share resources, such as policies, guidelines, case studies and examples of good practice, to facilitate mutual learning and promote the exchange of knowledge in the area of dementia.

Anyone can submit resources to the new platform. A comprehensive review process is undertaken for each new resource submitted before it is posted online to ensure that these meet quality and good practice criteria. Reviewers are dementia experts, people with lived experience of dementia and members of the WHO Secretariat.

Users can search resources by country, region or language, and narrow down their searches by type of resources. Users of the platform are also invited to leave comments and rate resources to further enhance discussion about ways to promote and strengthen dementia practice.

Check the following link for further information: <https://www.who.int/news/item/05-05-2021-who-launches-new-platform-for-knowledge-exchange-on-dementia>

III – RELEVANT ARTICLES

1. Banerjee D, Mukhopadhyay S, Rabheru K, Ivbijaro G, de Mendonça Lima CA. Not a disease: a global call for action urging revision of the ICD-11 classification of old age. *The Lancet Healthy Longevity* (3)

At this article authors, members of the WPA-SOAP, denounce the inclusion of old age in the 11th revision of the International Classification of Diseases (ICD-11) under general symptoms (code MG2A) and in the causality section of XT9T,1. This inclusion has been justified by arguing that old age brings about several biological changes of vulnerability. Authors argue that simply equating old age as a disease in the ICD-11 is potentially detrimental and deleterious from clinical, research, and humanitarian points of view, and propose alternate productive solutions.

2. Ataguba JE, Bloom DE, Scott AJ. A timely call to establish an international convention on the rights of older people. *The Lancet Healthy Longevity Vol 2 Sept 2021: e540-e542.* (4)

Face to the several challenges that ageing of the world population imply, in particular on the protection of human rights, recommend the following actions. First, a UN Convention on The Rights of Older People should be established to provide a framework for tackling current social and economic inequities, insecurities, and vulnerabilities; championing beneficial opportunities for older people; and articulating aspirations and plans for the decades ahead. Second, they propose the establishment of an international agency, such as a UN Program for Older People. The mission of this programme would be to lead and coordinate UN activities related to specifying and codifying the rights of older people; to advance norms and aspirations related to the physical, mental, social, political, and economic wellbeing of older people; and to support national governments and civil society in their efforts to design and implement policies that are aligned with these specified rights, norms, and aspirations. Third, they recognize the need to adopt a lifecourse perspective recognising that children nowadays have never been more likely to live to old age. The UN Program for Older People should endeavor to support not only the current generation of older people but also that of future generations. The true aim of such an organisation would be to maximise and leverage the gains made from gestation to late adulthood. Clear coordination with other agencies to support the humanity-enhanced need to age well is needed.

3. Mukhopadhyay S, Banerjee D. Physician assisted suicide in dementia: a critical review of global evidence and considerations from India. *Asian Journal of Psychiatry* 2021, 64 (5)

Dementias are a group of gradually progressing neurodegenerative conditions, leading to significant impairment in cognition, functioning, decision-making, capacity and autonomy. With the rise of human rights and patient-centred perspectives in psychogeriatric management, physician-assisted suicide (PAS) has emerged as an important and integral part of end-of-life care in advanced dementias. With only few original studies in the area, this paper takes a narrative and critical approach to review the global legislations, treatment decisions, debates as well as perspectives from patients, families and medical professionals. The ‘slippery slope’ of PAS needs to be carefully evaluated from a social justice and human rights perspective to improve dignified end-of-life care in dementia. Considerations are discussed from India, a rapidly-ageing nation with no current provisions for PAS.

4. **Banerjee D, Kosagisharaf JR, Sathyanarayana Rao TS. 'The dual pandemic' of suicide and COVID-19: A biopsychosocial narrative of risks and prevention. *Psychiatric Research* 295 (2021) 113577. (6)**

The Coronavirus disease 2019 (COVID-19) has emerged as a new global health threat. By increasing the risk of isolation, fear, stigma, abuse and economic fallout, COVID-19 has led to increase in risk of psychiatric disorders, chronic trauma and stress, which eventually increase suicidality and suicidal behavior. There is limited data on association of pandemics and suicides. Cases of suicides have been rising since COVID-19 first emerged in China. The association between suicides and pandemics can possibly be explained through various models like Durkheim's theory, Joiner's interpersonal theory, social stress theory, biological theories, etc. The frontline workers, elderly, migrants, homeless, socio-economically impoverished classes as well as those with pre-existing mental disorders, substance abuse and family history of suicides are at higher risk. Suicides are preventable and need early detection, awareness and socio-culturally tailored interventions. This narrative review draws global perspectives on the association of suicidality and pandemics, the theories and risk factors related to same based on the available evidence. It also hypothesizes neuroimmunity and immune based risk factors as possible links between the psychosocial vulnerabilities and suicide during outbreaks like COVID-19. Proposed strategies of suicide-prevention, as an integral part of public health response to the pandemic are subsequently discussed.

5. **D'cruz M, Banerjee D. 'An invisible human rights crisis': The marginalization of older adults during the COVID-19 pandemic – An advocacy review. *Psychiatry Research* 292 (2020) 113369. (7)**

The world has endured over several months of the Coronavirus disease 2019 (COVID-19). Older adults are at disproportionate risk of severe infection and mortality. They are also vulnerable to loneliness and social exclusion during the pandemic. Age and ageism both can act as significant risk factors during this pandemic, increasing the physical as well as psychosocial burden on the elderly. A review was performed in relation to the psychosocial vulnerabilities of the older adults during the pandemic, with insights from the similar biological disasters in the past. Besides the physiological risk, morbidities, polypharmacy and increased case fatality rates, various social factors like lack of security, loneliness, isolation, ageism, sexism, dependency, stigma, abuse and restriction to health care access were identified as crucial in pandemic situation. Frailty, cognitive and sensory impairments added to the burden. Marginalization and human rights deprivation emerged as a common pathway of suffering for the elderly during COVID-19. The implications of the emergent themes are discussed in light of psychosocial wellbeing and impact on the quality of life. The authors suggest potential recommendations to mitigate this marginalization on lines of the World Health Organization (WHO)'s concept of Healthy Ageing and the United Nations (U.N.) Sustainable Development Goals.

6. **Talbot CV, Briggs P. 'Getting back to normality seems as big of a step as going into lockdown': the impact of the COVID-19 pandemic on people with early to middle stage dementia. *Age and Ageing* 2021; 50: 657-663. (8)**

People with dementia can experience shrinkage of their social worlds, leading to a loss of independence, control and reduced well-being. We used 'the shrinking world' theory to examine how the COVID 19 pandemic has impacted the lives of people with early to middle stage dementia and what longer-term impacts may result. Interviews were conducted with 19 people with dementia and a thematic analysis generated five themes: the forgotten person with dementia, confusion over government guidance, deterioration of cognitive function, loss of meaning and social isolation, safety of the lockdown bubble. The findings suggest that the pandemic has accelerated the 'shrinking world' effect and created tension in how people with dementia perceive the outside world. Participants felt safe and secure in lockdown but also missed the social interaction, cognitive stimulation and meaningful activities that took place outdoors. As time in lockdown continued, these individuals experienced a loss of confidence and were anxious about their ability to re-engage in the everyday practices that allow them to participate in society. We recommend ways in which the government, communities and organizations might counteract some of the harms posed by this shrinking world.

IV – RELEVANT CONGRESS

1. **"Psicogeriatría Hoy" – Universidad Maimónides, Buenos Aires 14.08.2021 (9)**
de Mendonça Lima CA. Promoviendo los Derechos Humanos de las personas mayores : contribución de la IPA y WPA-SOAP
2. **European Association of Geriatric Psychiatry. Jubilee Congress 2021, Dusseldorf.**

de Mendonça Lima CA. Why human Rights matter for older adult's mental health

3. World Association of Social Psychiatry Asia-Pacific Hybrid Congress 2021

Symposium: "Old age, population ageing and older persons through the lens of human rights and social psychiatry: A Joint WASP-WPA-WFMH Symposium"

Debanjan Banerjee : *The triple jeopardy: Age, ageism and elder abuse*

Carlos de Mendonça Lima : *ICD-11, the controversial classification of old age and its global implications*

Gabriel Ivbijaro : *Dignity in psychogeriatric care: Role of social psychiatry*

Yours,

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Chair, WPA Section of Old Age Psychiatry