



Geriatric Medicine in the 21st Century

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At the beginning of the 20th century life expectancy in the western world was 47 years, and by the end of the century it had reached 76 years. Although there was an increase in life expectancy of only 22 years over a 1,000 year period from the beginning of the 10th century to the 20th, in the relatively short time between the 20th and 21st century life expectancy increased by 29 years. Thus, we are entering the 21st century with an aging population and a forecast that within another 50 years 20% of the world's population will be elderly.

By the year 2020 every fourth person in Japan and Sweden will be at least 65 years old, with a substantial number of people over the age of 80 as well. It is predicted that by 2035, in countries such as Spain and Italy, people aged 65 and over will comprise more than 35% of the population.

Among countries in the western world with aging populations, Israel is considered to be a relatively young country. A 20 year forecast indicates that the number of people aged 65 will not significantly increase, but this forecast is misleading in that there will be a significant increase in the population of people aged 75 and over.

For some reason Geriatric Medicine has not become as respected a field for specialization as others, and changing this direction is an important mission for the leaders of geriatric medicine in Israel. Just as the difference between pediatric medicine and adult medicine has gained recognition, so must geriatric physicians promote the recognition that there is a difference between adult medicine and geriatric medicine. Changing this perception demands that we confront this issue on two levels: the

education of medical students, and formulating policy with regard to community medicine.

Because there are very few geriatric physicians practicing in Israel today, it is hard to imagine that there will be a substantial increase in the number of geriatric specialists in the community over the next decade. Therefore, courses aimed at preparing family physicians to deal with the problems of the elderly are of great importance.

Physicians treating the elderly typically have to deal with polypharmacology and multipathology and, therefore, they require specialized training for this. The psychosocial issues are of even greater importance when treating the elderly patient. Depression, which is fast becoming a very serious problem in the western world, is very typical in most elderly people, although most will refer to it as loneliness and apathy rather than depression.

As the population treated in internal medicine departments ages, and this number will grow over the next decades, consideration should be given to the question of whether there have been changes in the geriatric patient population. This difficult issue – the interaction between traditional internal medicine and geriatric medicine – mandates serious discussion.

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