

MODERN MEDICINE AND PATIENTS' WELLBEING

A new study has found that although there has been an explosion in the scientific underpinning of modern medicine, gaps still remain in our knowledge when it comes to clinicians looking after patients' wellbeing, especially for older people.



Adjunct Associate Professor Benny Katz, Australian Centre for Evidence Based Aged Care (ACEBAC), looked into the current trend of evidence-based medicine and it being adopted as a means of achieving optimal medical care to reduce variations in clinical practice.

'Randomised controlled trials are considered the highest level of scientific evidence. However, older individuals are either excluded or underrepresented in these studies, and those who are included are often atypical of patients seen in clinical practice.

'There are many clinical scenarios that do not lend themselves to being answered by randomised controlled trials.

'The aim of this study was to examine the approach to clinical decision making in frail older persons when there is little or no scientific evidence to guide management,' says Dr Katz.

The ageing population will result in larger numbers of patients with complex age-related conditions seeking treatment for pain.

Dr Katz, who is also a Geriatrician at St Vincent's Hospital and Director of the Victorian Geriatric Medicine Training Program—used a case study to highlight many important issues surrounding the management of pain in older adults.

'There is a need in clinical practice to find a balance with evidence-based medicine and the preferences of the patient for optimal health outcomes,' says Dr Katz.

The study also highlights the importance of Comprehensive Geriatric Assessment (CGA)—a multidimensional process designed to detect factors that may have a significant impact on the wellbeing of an older adult.

'When treating older people, clinicians not only need to take into consideration the severity of pain, but also the impact of pain and its treatment on cognition, mood and functional status.

'Combining the practices of pain medicine and CGA may result in a better outcome,' says Dr Katz.

'A focus on the medical aspects and adjustment of treatment based solely on age will often not be adequate as it fails to take into consideration the heterogeneity of older adults.

'Some will have aged 'well' and need little modification to the approach used for younger patients, while others who are frail or have multiple comorbidities will require a modified approach,' says Dr Katz.

MORE INFORMATION

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latrobe.edu.au/acebac/research/index