Much Older Remarks: With an Aging Boomer Population, What does EMS Need to Know about Geriatrics?

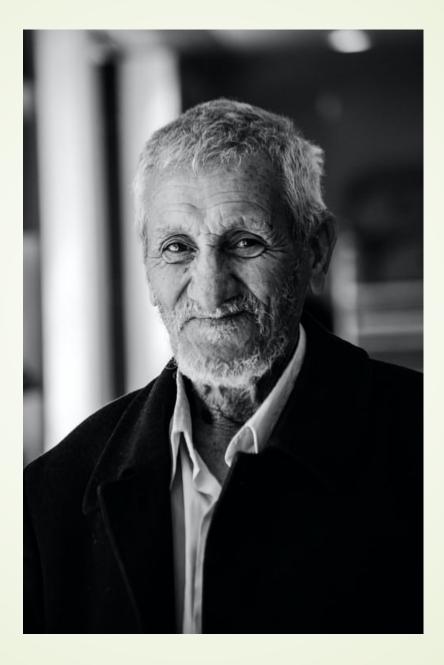
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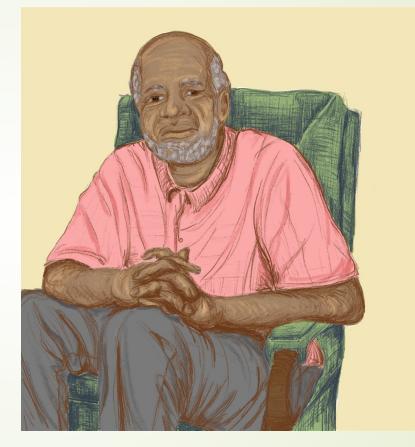




Getting Older

The Elderly

- 17% of the US population
 - 1 in 6
- 20-25% by 2030
 - Longer life expectancy and declining birth rates
- Almost 56 million
 - 38% increase since 2010
 - Fewer children under 5
- Population over 65 grew 5 times faster than the total US population



Elderly Definitions

- Older than 65
- Case for over 35
 - Outcomes worsen
 - Increased incidence of pneumonia
- ATLS: >55
 - ACS directs those over 55 to trauma centers
- No literature clearly delineates "geriatric"
- Physiologic age vs. chronologic age



Impact on EMS

48.6% of EMS transports

- Over 65
 - Average age: 80
- Response, transport rates, and non-transport rates (per 1000) were all higher
 - Again in the oldest (> 85)
- Most common presenting complaint
 - Transported and non-transported
 - Fall
 - Goldstein et al
 - **CJEM**, 2015



Impact on EMS

- Age is the major determinant of EMS use
 - Svenson
 - Am J Emerg Med, 2000
- 30% longer on scene time in nontransports
 - Gøldstein et al, 2015
 - Between 1994 and 2008, transports for older adults increased 75%
 - Lowthian et al
 - Med J Aust, 2011



Impact on EMS

- Repeat EMS use by older adults
 - 18% had a repeat EMS transport within 30 days
 - Highest with dispatch complaints of
 - SOB
 - Bøck pain
 - Diabetic problem
 - Psychiatric problem
 - Fall was the most common dispatch complaint
 - Evans et al
 - Ann Emerg Med, 2017





Geriatric Trauma

- Under-triage remains a significant problem
 - Twice as common
- Traditional triage tools may mislead
 - Mechanism
 - Vital signs
 - ISS

TS

CRAMS



Older Adults

- 42,114 deaths in the US related to falls in 2020
 - 478,214 between 1999 and 2020
 - Santo-Lozada et al
 - JAMA Network Open, 2023





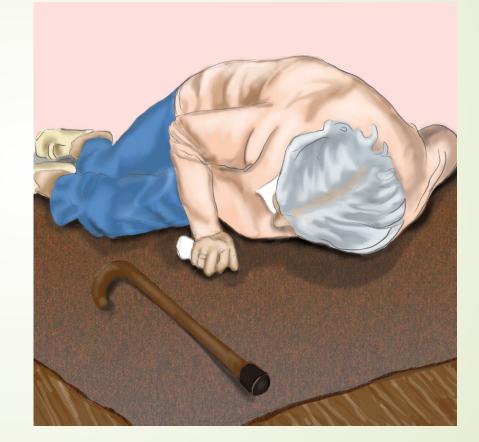
Elderly Falls and EMS

- Up to 56% of older adults who receive EMS treatment for a fall are not transported
 - Although not always obviously injured, they compromise a particularly yulnerable cohort
 - Mikolaizak et al
 - Australas J Ageing, 2013
- 49% of those not transported required medical care within 2 weeks
 - Snooks et al
 - Qual Saf Health Care, 2006



Causes of Falls in the Elderly

- 25% are due to underlying medical problems
 - Syncope or nearsyncope
 - Hypovolemia
 - Delirium
 - Underlying infection
 - Medications
 - Insulin reaction
 - Sedatives
 - Elder abuse



"Mechanical" Fall?

- There is often more to a mechanical fall in the elderly than mechanics
 - Dehydration
 - Delerium
 - Infections
 - Non-syncopal fall



Vital Signs: Pulse

- Normal should NOT reassure
 - What is normal?
- Falsely "normal" pulse is common
- Less responsive to circulating catecholamines
- Medications
 - Beta blockers
 - Calcium channel blockers
- Trend may be the most helpful



Vital Signs: Blood Pressure

Often falsely normal
"Normal" may indicate significant hypovolemia
Baseline hypertension
Maintained by increases in SVR because of poor cardiac response to hypovolemia

 Heffernan et al, J Trauma, Oct 2010

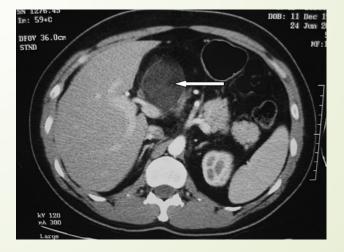




Abdominal Pain in the Elderly

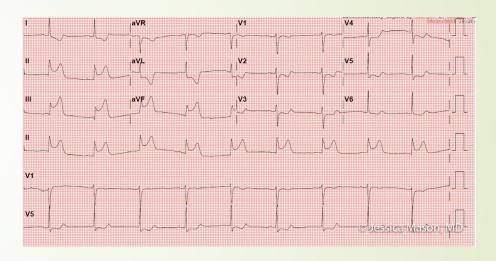
- Mortality rate is 4 times greater than with the young
 - Up to 27%
- Abdominal exam is unreliable
 - Desensitized peritoneum





Acute Coronary Syndrome in the Elderly

- Less likely to have chest pain with ACS/AMI (<50%)
 - Shortness of breath
 - Nausea/vomiting
 - Weakness
 - Gupta et al
 - Emerg Med Clin N Amer, 2016
- But high risk when they do have chest pain
 - Poldervaart et al
 - Intern J Cardiol, 2017



Substance Use Disorder

- Alcohol use among older adults is increasing
 - 16% of men and 7% of women
 - Al-Rousan et al
 - J Am Geriatr Soc, 2022
 - Rate of ED visits for alcohol associated falls in the elderly increased from 2011 to 2019
 - Yuan et al
 - Ann Emerg Med, 2023





Elder Abuse

- **5%** of the elderly population
 - Contributing conditions
 - Recent changes in family structure
 - Cognitive deficits
 - Failing physical health
 - Financial burdens or changes in status
- Maxilofacial, dental, or neck injuries without upper or lower extremity injuries
 - Rosen et al
 - Ann Emerg Med, 2020





Coming to a Hospital Near You!





In Summary

- Not just older adults!
 - Break easily
 - Hide their injuries well
 - Worse outcomes
- Impact on EMS is already significant
 - And getting more so!
- Falls are important
 - Significant injuries
 - Significant impact on lives



In Summary

Beware

- Normal vital signs
- "Minor" mechanisms
- Elder abuse
- Think twice about "mechanical" falls
- Benefit from aggressive care
- We must do a better job with anticipating issues and prevention





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