

2004 IPA Asia Pacific Regional Meeting

Byoung Hoon Oh, MD, PhD

Department of Psychiatry, Yonsei University College of Medicine, Severance Mental Health Hospital, Gwangju, Korea

“2004 IPA Asia Pacific Regional Meeting” was held with successfully on 8 - 11 September in Seoul, Korea. 2004 IPA Seoul Meeting held in collaboration with the Korea Association for Geriatric Psychiatry (KAGP) and sponsored by “Ministry of Health and Welfare, Korea”. Moreover, the KAGP celebrated its 10th anniversary with the participation of the International Psychogeriatric Association (IPA) Members. The theme of this meeting is “Mental Health of the Elderly in Rapidly Aging Societies”, which was chosen to provide an opportunity to meet IPA mission and prepare the strategies for rapidly growing aging societies all over the world in the 21st century. “Seoul Declaration of Mental Health for the Elderly in Korea” was announced. (J Korean Neuropsychiatr Assoc 2004;43(5):514-518)

KEY WORDS : 2004 IPA Seoul meeting · Mental health of the elderly in rapidly aging societies · Seoul Declaration of Mental Health for the Elderly in Korea.

Intorduction

International Psychogeriatric Association (IPA) founded in 1980 which is the leading multi-specialty, interdisciplinary organization. IPA dedicated to improving the mental health care of the elderly people with dignity and respect throughout the world. Currently, IPA has active members in 70 countries.

Korean Association for Geriatric Psychiatry (KAGP) founded in 1994 which was composed by forty-two psychiatrists but now increasing up to 450 members.

In 2004, the KAGP held the “2004 IPA Asia Pacific Regional Meeting on 8 - 11 September, in Seoul, the capital of history, culture and science of the Korea with the celebrating its 10th anniversary with the IPA members from all around the world, in particular from the Asia-Pacific region.

Many professionals in the field of geriatric psychiatry, neurology, gerontology, family medicine, geriatric nursing, geriatric social worker and neuropsychology working together in the multidisciplinary approaches participated in our 2004 IPA Seoul Meeting.

Scientific Contents

Scientific contents of “2004 IPA Asia Pacific Regional Meeting” was composed by 5 invited plenary, 15 main symposium, 4 major satellite symposium, one regional forum, 5 oral and 3 poster sessions on 8 - 11 September. Major topics and speakers of IPA Asia Pacific Regional Meeting-Scientific program showed as Table 1 - 7.

Many professionals in the field of geriatric psychiatry, neurology, gerontology, family medicine, geriatric nursing, geriatric social worker and neuropsychology working together in the multidisciplinary approaches participated in our 2004 IPA Seoul Meeting. 545 participants from 27 countries joined from Asia-Pacific region, Unites States, Europe and Africa. Two hundred and ten papers presented in the category of 5 invited plenary, 15 main symposium, 4 major satellite symposium, one regional forum, 5 oral and 3 poster sessions. The scientific sessions covered many important psychogeriatric issues throughout biopsychosocial fields including from molecular genetics, epidemiology, brain imaging, pharmacoeconomics, psychogeriatric education, ethics and mental health policy. We prepared didactic plenary lectures to stimulate young researchers in the psychogeriatrics, state-of-the-art symposia and poster sessions in the central part of the program. The satellite program gave participants recently hot-topical issues of the diagnosis and treatment in dementia, depression and sleep disorders. A “Pre-IPA symposium, Hong Kong-Japan-Korea Joint Meeting” also held at 10 : 00 -

Received : 2004 7 1 / Accepted : 2004 8 1

Address for correspondence

Byoung Hoon Oh, M.D., Ph.D. Department of Psychiatry, Yonsei University College of Medicine, Severance Mental Health Hospital, 696-6 Tanbul-dong Gwangju 464-100, Korea

Tel : +82.31 - 797 - 5745, Fax : +82.31 - 763 - 5745

E - mail : drobh@chollian.net

Table 1. IPA Asia pacific regional meeting-scientific program

	8 Sept. (Wed)	9 Sept. (Thur)	10 Sept (Fri)	11 Sept. (Sat)
07 : 00				Breakfast/ satellite symposia (IV)
08 : 00				
09 : 00	IPA Pre-Symposium Hong Kong, Japan, Korea Joint Meeting (10 : 00 - 16 : 00)	Plenary session	Plenary session	Plenary session
10 : 00		Morning break	Morning break	Morning break
11 : 00		Regional forum	Concurrent sessions Orals and symposia	Concurrent sessions Orals and symposia
12 : 00		Poster session	<i>Poster session</i>	
13 : 00	IPA annual members meeting	Lunch / Satellite symposia (I)	Lunch / Satellite Symposia (III)	Closing ceremony
14 : 00		Concurrent sessions Orals and symposia	Concurrent sessions Orals and symposia	
15 : 00		Afternoon break	Afternoon break	
16 : 00	Public lecture	Plenary session	Concurrent sessions Orals and symposia	
17 : 00	Opening ceremony with keynote	<i>Poster session</i>	<i>Poster session</i> Plenary session	
18 : 00		Dinner/ satellite symposia (II)		
19 : 00	Welcome reception		Gala dinner	

Table 2. Main topics of 2004 IPA Seoul meeting

Main theme : Mental health of the elderly in rapidly aging societies	
Drug metabolism in the elderly	Ethical issues in psychogeriatrics
Epidemiology of dementia	Mild cognitive impairment
Genetics of Alzheimer's disease	Psychogeriatric nursing
Sexual disorders in late life	Addiction among the elderly
Suicide among the elderly	Policy, planning, and Organization of services for the elderly
Sleep disorders among the elderly	Psychogeriatrics issues in developing countries
Technological advances in psychogeriatrics	Economic aspects of psychogeriatrics
Functional imaging in psychogeriatrics	Affective disorders among the elderly
Psychogeriatric emergency services	Methodology of drug trials in Alzheimer's disease
Education in psychogeriatrics	
Psychotherapy with the elderly	

Table 3. Main 10 topics of plenary session and speakers

PL1 Development of public policy for the elderly : Perspective for Asia	Edmond Chiu (Australia)
PL2 Late onset psychosis	Dilip V. Jeste (USA)
PL3 Vascular factors and depression	John O'Brien (UK)
PL4 Outcome of late life depression and MCI	Yu Xin (China)
PL5 Mission of IPA	George T. Grossberg (USA)
PL6 Interaction between personality, aging, adaptation to stress and therapy	Joel Sadavoy (Canada)
PL7 Molecular mechanism of neurodegeneration in Alzheimer's disease	Masatoshi Takeda (Japan)
PL8 Writing a new story	Ho Young Lee (Korea)
PL9 Caring for schizophrenia in rapidly aging country, the Korean perspective	Yong Sik Kim (Korea)
PL10 Prospect of KAGP	Jong Han Park (Korea)

Table 4. Main 8 topics of satellite symposium session and speakers

SS1 Cognitive Impairment and Testamentary Capacity in Later Life. Sanford I. Finkel (U.S.A) /Depression and Cognitive Decline. K.W. Kim (Korea) - Eisai sponsored luncheon symposium
SS2 Cholinesterase inhibitors in Alzheimer's disease : Are there clinical differences between drugs? Murray A. Raskind (U.S.A) / Metal chelator treatment of Alzheimer's disease J.Y. Koh (Korea) - Janssen sponsored dinner symposium
SS3 Restoring glutamatergic signaling in AD. David G. Wilkinson (UK) /Current strategies to treat patients with memory impairment. D.K. Kim (Korea) - Lundbeck sponsored luncheon symposium
SS4 Title : Good sleep in geriatrics How to optimize zolpidem in elderly? C.W. Lee (Korea) /Zolpidem "As needed" a new treatment paradigm. K.S. Oh (Korea) - Sanof-Synthelabo sponsored breakfast symposium

Table 5. Main 15 topics of symposium session

SA-1 Symposium of the faculty of psychiatry of old age, royal australian and new zealand of psychiatrists
SA-2 Vascular aging and geriatric disorder (The Korean geriatric society symposium)
SA-3 Prevention of elderly suicide (Hong Kong)
SB-1 Benefit or waste? economy of pharmacotherapy of dementia (Sweden, UK, Japan, Korea)
SB-2 Dementia services and research in Asia (Hong Kong, Japan, Korea)
SB-3 Biological aspect of late-onset psychiatric disorders (Japan, China, Taiwan, Korea)
SC-1 Neurobiology of Alzheimer's disease (Japan, Korea)
SC-2 Dementia with parkinsonism (Neurology symposium)
SC-3 Dementia rating scale (Japan, Korea)
SD-1 How do biological and environmental factors contribute to the incidence and maintenance of late-life psychiatric illnesses? (UK, Korea)
SD-2 Management of geriatric patients (The Korean academy of clinical geriatrics symposium)
SD-3 New findings and therapeutics in Alzheimer's disease (KAGP Symposium)
SE-1 Aging and stress : a family perspective (Gerontology society symposium)
SE-2 The role of psychological functioning in aging : Life of the elderly Koreans (Neuropsychology symposium)
SE-3 Psychiatric care of Korean elderly (Multidisciplinary symposium)

16 : 30 on 8th September. Furthermore a public lecture, "New Role of Korean Elderly in the New Era" held for the promotion of mental health on 8th September. All the presentations conducted in the traditionally beautiful and modern Shilla Hotel, situated at the 10 minutes' distance from downtown of Seoul.

Table 6. Main topics of regional symposium session and speakers

RF-1 Master plan of WHO for of "Mental health of the elderly in rapidly aging societies"	Linda Milan (WHO)
RF-2 IPA Strategy for problems of "Mental health of the elderly in rapidly aging societies"	George T. Grossberg (USA)
RF-3 Model of well developed country	Joel Sadavoy (Canada)
RF-4 "Mental health of the elderly in rapidly aging societies" in Japan	Masatoshi Takeda (Japan)
RF-5 "Mental health of the elderly in rapidly aging societies" in China	Yu Xin (China)
RF-6 "Mental health of the elderly in rapidly aging societies" in Australia	Brian Draper (Australia)
RF-7 "Mental health of the elderly in rapidly aging societies" in South Korea	Byoung Hoon Oh (Korea)

Table 7. Main 5 topics of oral session

O-1. Young researches in psychogeriatrics (Japan, Korea)
O-2. Biological issues in psychogeriatrics (Japan, Australia, India, Korea)
O-3. Clinical issues in psychogeriatrics (Hong Kong, Philippines, Korea)
O-4. Clinical issues in geriatrics (USA, Japan, Singapore, Korea)
O-5. Psychosocial Issues in psychogeriatrics (China, Australia, India, Singapore, Korea)

Table 8. Total number of presented paper

Classification	No.
Plenary session	10
Regional forum	7
Symposium	57
Oral session	28
Poster session	98
Total	200

*Submitted Abstract : 211

Presented abstract (Oral+Poster) : 126

Outcomes

As a Scientific Chair of 2004 IPA Asia Pacific Regional Meeting, I convinced that the 2004 IPA Seoul Meeting provided very attractive and interesting academic schedules. As showing Table 8 - 10, 545 participants from 27 countries joined the meeting. Two hundred papers presented in the category of 5 invited plenary, 15 main symposium, 4 major satellite symposium, one regional forum, 5 oral and 3 poster sessions as we expected. The scientific sessions almost covered many important psychogeriatric issues throughout biopsychosocial fields including from molecular genetics, epidemiology, brain imaging, pharmacoeconomics, psych-

Table 9. Total number of registration

Classification	Advance	On-site	Total
IPA member	98	4	102
IPA Non-member	66	49	115
Developing countries	24	3	27
Government officials	100	84	184
Students / residents			
One day member	2	1	3
One day non-member	0	14	14
Guest	9	6	15
Organizing committee	82	3	85
Invited speaker			
Total	381	164	545

ogeriatric education, ethics and mental health policy.

A “Pre-IPA symposium, Hong Kong-Japan-Korea Joint Meeting” held at 10 : 00 - 16 : 30 on 8th September. And a public lecture, “New Role of Korean Elderly in the New Era” was held successfully for the promotion of mental health on 8th September as we expected.

Conclusion

In fact, 2004 IPA Seoul Meeting memorized most successful IPA Regional Meeting. KAGP contributed the development of IPA and gave hope to the underdevelopment countries. And also, KAGP had great contribution to realize the multidisciplinary and interdisciplinary team approaches. Our IPA organizing committee and all KAGP members try to do our best to be a successful 2004 IPA Seoul Meeting for last two years. Moreover, the KAGP members made and announced the “Seoul Declaration of Mental Health for the Elderly in Korea”.

As a scientific chair of the 2004 IPA Seoul Meeting, I would like to express my gratitude deep in my heart to the all participants, IPA organizing committee members, espe-

Table 10. Total number of participants countries

	Advance	On-site	Total
Australia	7		7
Bangaldesh	1		1
Canada	2		2
China	9	1	10
Denmark	1		1
Germany	1		1
HongKong	13	2	15
Indonesia	16	1	17
India	3		3
Japan	26	18	44
Korea	243	136	379
Malaysia	1		1
Netherlands	1		1
Newzealand	1		1
Nigeira	4		4
Philippines	4		4
Portugal	6		6
Singapore	4	1	5
Sweden	3		3
Tailand	5	3	8
Taiwan	2		2
Tanazania	1		1
Turkey	1	1	2
Uganda	3		3
U.K.	11	1	12
U.S.A	12		12
Total	381	164	545

cially our local PCO-Insession members and Scientific Sub-Committee members and sponsorship companies for their devotion.

REFERENCES

- 1) Final Program and Abstract Book: 2004 IPA Asia Pacific Regional Meeting “Mental Health of the Elderly in Rapidly Aging Societies” Seoul, Korea 8-11 September 2004.

“Seoul Declaration of Mental Health for the Elderly in Korea”

Geriatric mental health professionals who gathered in Seoul on the 8th of September, 2004, made the following declaration to overcome the challenges of this upcoming rapidly aging society and to construct a healthy aged society in Asia-Pacific region.

Challenges of an Aging Society

Many mental health problems of the elderly arise due to an increasing geriatric population ratio by progression of medical area. Traditional support systems for the elderly have broken down due to industrialization, urbanization, nuclearization of the family, and participation in society of women who have served as caregivers of the elderly. Old persons cannot find their suitable roles and are getting isolated from their families and societies.

Accordingly, strong government policies are required for the elderly especially concerning mental health services.

Vision for a Healthy Aged Society

We envision that :

1. every older person is free from fear of mental health problems, such as dementia and depression
2. every older adult lives a physically and mentally healthy life
3. every older adult lives with active roles without isolation.

The Act for a Healthy Aged Society

To realize this vision, we propose the following actions for individuals, family and society, mental health professionals and government.

Individuals should :

- recognize that old age will come to himself/ herself in the near future.
- try to improve our living environment to promote a healthy elderly life.

The elderly person, in particular, should

- change her/his life style to live a physically and mentally healthy life.
- participate actively in social activities with an active (positive) point of view.
- demand that the government and society actively set up a policy for the elderly.

Family and society should :

- focus on the mental health of the elderly for the early recognition and early treatment of mental disorders such as dementia and depression.
- reinforce the oriental tradition of filial piety.
- respect the elderly to prevent isolation and to induce the elderly participate in the family and society.
- create the social atmosphere to induce the active participation of the elderly in the society.

Mental health professionals should :

- inform the society and family about the importance of the mental health of the aged.
 - educate the aged relative to the importance of their own mental health and mental disorders of the aged.
 - inform society about the social burden of mental disorders of the aged such as dementia and depression.
- propose the policy and management of the mental health of the aged to the government
 - develop the strategies for the enhancement of cognitive function and prevention of depression.
 - propose the strategies for the early detection of mild cognitive impairment which is vulnerable to dementia to society.
 - develop the mental health delivery system of dementia in the community which may include early detection, early treatment, and rehabilitation of demented persons.

Government should :

- develop roles and job opportunities for the aged
- develop the social support systems and activities for the aged who are isolated and live alone.
- promote the mental health of the aged through prevention and develop methods for the treatment of the mentally disabled.