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SERUM URIC ACID IS INDEPENDENTLY ASSOCIATED WITH CARDIAC HYPERTROPHY IN OLDER MALE PATIENTS WITH NON-VALVULAR ATRIAL FIBRILLATION

Wenyi Liang^a and Meilin Liu^a

^aPeking University First Hospital, China

Aims: Recent studies suggest that serum uric acid (SUA) induces oxidative stress and inflammation, which involved in the mechanisms of cardiac hypertrophy. In this study, we investigated the association between SUA and cardiac hypertrophy in older atrial fibrillation (AF) patients.

Methods: Initially, 1296 consecutive older patients (over age 60) with non-valvular AF was retrospectively recruited from the inpatient clinic between January 2012 and April 2015. Demographic, laboratorial and echocardiographic data were carefully recorded. According to inclusion and exclusion criteria, the final study population was 577 patients (mean age 74 ± 8 , 357 men).

Results: Patients in the hyperuricemia group had higher levels of body mass index, serum creatinine, blood urea and triglycerides than patients in the SUA normal group. However, levels of EGFR and high density lipoprotein cholesterol in the hyperuricemia group were significantly lower than those in the SUA normal group. Results also showed that percentage of NYHA class III-IV and level of B-type Natriuretic peptide in the hyperuricemia group were significantly greater than those in the SUA normal group. The mean SUA level was significantly higher in patients with LVH than patients without LVH. Compared with the non-LVH group, the LVH group was older, had a higher percentage of females, and had lower hemoglobin levels and estimated glomerular filtration rates. Patients in the LVH group also had a higher rate of coronary heart disease and fewer had a history of radiofrequency ablation compared with the non-LVH group. Multivariate logistic regression analysis indicated the independent risk factors for LVH in older AF patients included SUA, age, male sex, presence of coronary heart disease. Subgroup analysis identified SUA as a significant risk factor associated with LVH in men.

Conclusions: Hyperuricemia patients showed poorer renal function, heart function, and lipid metabolic profiles than the SUA normal group. SUA was independently associated with LVH in older patients with non-valvular AF, particularly in men.

EXPLORING THE FACETS OF SEXUALITY AMONG OLDER ADULTS

Vivienne Cloude C. Bersabe, Nuelle Anne Castro^a, Christy P. Gonzales^a, Nathalie Ann D. Ocho^a, Frances Bea S. Sabaten^a, Korina Louise A. Saculles^a, Jada Kristen O. Taska^a and Don Leonardo N. Dacumos^a

^aSaint Louis University School of Nursing, Philippines

Objectives: To measure the levels of older adults sexual desire, sexual behavior, and sexual intimacy and relate them to sex, living arrangement, educational level, and presence of chronic illness, whether with or without treatment.

Methods: This study is of quantitative descriptive design that utilized purposive sampling. 400 older adults of Baguio City participated. The study used a 30 point researcher-made questionnaire, one-on-one interview and focused group discussion to gather data. Data were treated using weighted mean, t-test, F-test, and Scheffé's test.

Results and Conclusions: The overall findings revealed that Filipino older adults have low levels of sexuality expressed by the participant's sexual desire, behavior, and intimacy. Males have significantly higher levels of sexual desire, behavior, and intimacy. Living arrangement does not seem to influence the level of sexuality in all its 3 facets. Sexual desire was significantly higher among those with tertiary education and without chronic illness.

Recommendation: It is recommended that nurses carry out their assessment of clients to include the exploration of their sexuality especially the older adults. A similar study may be done to explore other variables like demographic location, i.e., rural or urban setting, socio-cultural factors and functional performance status. It is also recommended that a similar study may be done exploring the different facets of sexuality among homosexual older persons.