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# Solid-age

An information digest  
prepared by the librarians of the  
Institut universitaire de gériatrie de Montréal



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<http://catalogue.iugm.qc.ca>

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## EDITORIAL



Hello,

Throughout my experience of collaborating with and assisting members of the Solidage research group, I have observed that searching databases for reference sources is one of the essential prerequisites for any type of research. What's more, such preliminary research often orients researchers towards the areas they finally choose to pursue.

Many of you use Medline regularly, by conducting searches either through PubMed or OVID. This is a very wise choice, since Medline is the largest health and medical science database. It contains over 11 million article references and is updated daily, which makes it an invaluable resource. However, no database is exhaustive; Medline does not cover medical literature worldwide, and does not index monographs or conference proceedings. This is why, if Medline generates few results on a particular subject, you should consider searching other databases.

*Remember: the fact that Medline yields no results does not mean that no reference sources exist in the literature on a given subject.*

We have investigated databases specializing in geriatrics, gerontology and aging for you, to see which of them would be worth querying for your research.

## POINTAGE

### DEMOGRAPHICS OF AGING

Kevin Kinsella and Victoria A. Velkoff. **The Demographics of Aging.** *Aging Clinical and Experimental Research*, June 2002, Vol. 14, No. 3, p. 159-169.

Kevin Kinsella and Victoria A. Velkoff. **Life Expectancy and Changing Mortality.** *Aging Clinical and Experimental Research*, Oct. 2002, Vol. 14, No. 5, p. 322-332.

Kevin Kinsella and Victoria A. Velkoff. **Health and Disability.** *Aging Clinical and Experimental Research*, Oct. 2002, Vol. 14, No. 5, p. 333-342.

These articles are excerpted from the report entitled **An Aging World: 2001**, by the International Programs Center, Population Division, Census Bureau, Washington, DC, USA.

It provides statistical information on the worldwide population of individuals aged 65 or over.

**An Aging World: 2001** provides statistical data on aging worldwide, focusing primarily on socio-economic trends affecting the population aged 65 and older. Much of the data included in the report is from the U.S. Census Bureau's International Data Base. Individual sections focus on the demographics of aging, life expectancy and changing mortality, health and disability, urban and rural dimensions of aging, sex ratios and marital status, living

Therefore, we suggest the following selection of specialized databases that may, from time to time, help you complete your research; they are accessible free of charge, either online or via the systems of most universities.

**Audrey Attia**, bibliothécaire

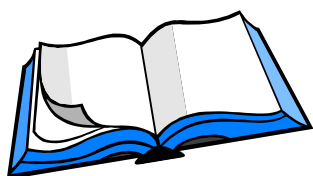
arrangements, family and social support of older adults, educational attainment and literacy, labour force participation and retirement, and pensions and income security. Appendices provide additional data tables, information on sources and data limitations, international comparisons of urban and rural definitions, and references.

**The Demographics of Aging** focuses on the growth of the elderly population around the world. The current level and pace of population aging vary widely by geographic region, as well as within regions. Virtually all nations, however, are now experiencing growth in the number of elderly residents. The proportion of people aged 65 and over in developed nations is relatively high, but the elderly population has been increasing most rapidly in the developing world. Even in nations where the percentage of elderly persons relative to the total population remains small, absolute numbers may be rising steeply. Everywhere, the growth of elderly populations poses challenges to social institutions, which must adapt to changing age structures.

**Life Expectancy and Changing Mortality** focuses on the causes of the spectacular increase in human life expectancy. This gain began in the mid-1800s, continued over the following century and is often ascribed primarily to advancements in medicine. However, improvements in both medicine and sanitation did not generate a major impact until the late nineteenth century. Earlier and more important factors in reduced mortality involved innovations in industrial and agricultural production and distribution, which improved nutrition for large numbers of people. A growing research consensus attributes the increase in human longevity since the early 1800s to a complex interplay of advancements in medicine and sanitation coupled with new modes of familial, social, economic, and political organization.



**Health and Disability** focuses on the "epidemiologic transition" process. As many societies have experienced significant decreases in fertility and mortality rates, they have also experienced a long-term change in the leading causes of death, from the infectious and acute to the chronic and degenerative. This article explores the eventuality that the increasing number of adults shifts national morbidity profiles toward a greater incidence of chronic and degenerative diseases.



## FRAIL ELDERLY PATIENTS AND MOBILE GERONTOLOGY UNITS

P. Couturier, S. Fachler-Buatois, A.M. Argentier, M.L. Villard, S. Moine, A. Rolin, A. Franco. **Place et rôle des unités mobiles de gériologie dans la prise en charge des patients âgés fragiles et hospitalisés.** *L'Année gérontologique*, Vol. 16, 2002, Tome 1, p.74-88.

One of the structures dedicated to case management pertaining to elderly persons within the hospital sector, a mobile gerontology unit is a "transversal" unit providing consultation, assessment, orientation and liaison for various non-geriatric hospitalization sectors. Aside from the direct benefit of medical and psychosocial assessment of frail elderly patients, this type of unit provides, within the current demographic context, one means of optimizing and promoting the development of intra-hospital geriatric care systems, and of participating in the regulation of transfers between the hospital, home, and community medical/social structures. This article discusses the operational procedures of a mobile gerontology hospital unit, defined based on institutional needs, with respect to epidemiology and as identified by care providers, as well as the preliminary findings after six months of activity with the Centre Hospitalo-Universitaire de Grenoble in France.

## THE REAL PRICE OF LONGEVITY

Zhou Yang, Edward C. Norton and Sally C. Stearns. **Longevity and health care expenditures: the real reasons older people spend more.** *Journal of Gerontology: Social Sciences*, 2003, Vol. 58B, No. 1, p. S2-S10.

This study investigated the way in which age and time to death affected health care expenditures for elderly Medicare recipients. It also analyzed differences in expenditure patterns by age and time to death for various types of service and payers. Graphical analyses were conducted using the 1998 Medicare Current Beneficiary Survey Cost and Use fields. Results indicated that monthly health care expenditures for elderly people increase substantially with age primarily because mortality rates increase with age, and health care expenditures increase with closeness to death. Higher inpatient care expenditures are mainly attributable to closeness to death, whereas higher long-term care expenditure is attributable principally to ageing.

## IDENTIFYING FRAILTY

M. JM. Chin A. Paw, L. C.P.G.M. De Groot, S. V. Van Gend, M. H.C. Schotermen, E. G. Schouten, M. Schroll, W. A. Van Staveren. **Inactivity and weight loss: effective criteria to identify frailty.** *The Journal of Nutrition, Health and Aging*, 2003, Vol. 7, No. 1, p. 55-60.

Researchers examined the effectiveness of using inactivity and weight loss as criteria to identify a frail subgroup within independently living elderly persons participating in the SENECA (Survey in Europe on Nutrition and the Elderly, a Concerted Action) study. 849 participants aged 75 to 80 from 9 countries participated in this study. Results show that elderly persons who lost weight did not differ significantly from those in the control group, and that, among non-institutionalized elderly, physical inactivity alone, or in combination with weight loss, seems to be a practical and inexpensive screening criterion for identifying a subgroup of elderly with less favourable health and nutritional characteristics, and poorer physical functioning.

## FUNCTIONAL DECLINE AT THE END OF LIFE

June R. Lunney, Joanne Lynn, Daniel J. Foley, Steven Lipson, Jack M. Gulranik. **Patterns of functional decline at the end of life.** *JAMA*, May 14, 2003, Vol. 289, No. 18, p. 2387-2392.

Clinicians have observed various patterns of functional decline at the end of life, but few empirical data exist in order to test these patterns in large populations. The objective of this study was to determine if functional decline differs among 4 types of illness trajectories: sudden death, cancer death, death from organ failure, and frailty. The data examined are from the Established Populations for Epidemiologic Studies of the Elderly (EPESE) study. In conclusion, trajectories of functional decline at the end of life are quite variable. Differentiating among expected trajectories and related needs would help shape tailored strategies and better programs of care prior to death.

## SIPA SEEN BY L'INFIRMIÈRE DU QUÉBEC

The journal *L'Infirmière du Québec* discusses SIPA

Isabelle Paré. **Le SIPA : des soins aux aînés bien orchestrés.** *L'Infirmière du Québec*, March-April 2003, Vol. 10, No. 4, p.28-31.

After explaining the SIPA project and its findings, this article explores the involvement of nurses in the project. A number of them became case managers, playing a pivotal role in SIPA, since case management involves coordinating interventions by all health care system personnel with respect to a specific group of patients, and also defending patients' interests and helping them express their needs. This is a gratifying and enriching experience for most nurses, since they see themselves playing the role of orchestra conductor (without replacing the Concertmaster, however!). The skills cited most often as those required by case managers are: clinical competency in a specific discipline; thorough knowledge of the health care system; and the ability to manage a team and negotiate. Therefore, case management requires more than good clinical skills; it requires new skills which are not exclusive to any one profession.



# DATABASES (1/5)

Here is a selection of useful bibliographic databases for students and researchers in the fields of geriatrics, gerontology, aging and health.

## I - DATABASES IN GERIATRICS, GERONTOLOGY AND AGING

### GERMAIN

French-English – Access free of charge



[http://catalogue.iugm.qc.ca/Dossier.htm?Folder=25\)&lang=en](http://catalogue.iugm.qc.ca/Dossier.htm?Folder=25)&lang=en)

Germain is the catalogue of the Bibliothèque de gériatrie et de gérontologie de l'Institut universitaire de gériatrie de Montréal (Geriatrics and Gerontology Library of the Montreal University Institute on Aging [IUGM]). It contains over 13,000 bibliographic references, including monographs, articles, reports, book chapters, magazine article summaries, as well as websites and statistical graphs. **A selection of French-language publications on geriatrics that are not indexed in MedLine are indexed in Germain.**

Germain also contains the **Solidage Dossier**, which is a subsection of the Germain IUGM library catalogue. It is **accessible online and brings together documentation on geriatrics, gerontology and health policy discussed in grey literature** (government reports, studies by public and private research institutes, theses, etc.). These documents are selected in accordance with the Solidage research axes.

All of the documents are indexed using the **Thesaurus on Aging and Health**, and therefore searchable by keyword in French or English. Several levels of research are offered.

**Germain is an INVALUABLE reference source!**

### AgeLine

English – Access free of charge



<http://research.aarp.org/ageline/home.html>

AgeLine is produced by AARP (American Association of Retired Persons). AgeLine identifies and summarizes journal and magazine articles (from 300 publications); books and book chapters; and reports by government agencies and organizations (including selected AARP publications) about older adults and aging. All references include summaries. AgeLine is updated regularly and includes material from 1978 on, with selected coverage of the years 1966-1977. The database covers English-language literature from many countries. AgeLine provides over 60,000 abstracts and content summaries of current literature on aging.

### National Aging Information Center (NAIC)

English – Access free of charge

<http://www.aoa.gov/naic/bibinfo.htm>

Produced by the National Aging Information Center, Washington DC.

This bibliographic database is managed by the Center for Communication and Consumer Services (CCCS). It contains references to program- and policy-related materials on aging not referenced in any other computer database or print resource. The database is intended to serve the State Units on Aging, Area Agencies on Aging, national organizations related to aging, aging-related service providers, legislators at all levels, policy makers, and the general public.

Database records describe materials produced by Administration on Aging grantees funded under Title IV of the Older Americans Act of 1965 (Public Law 89-73). Title IV of the Act supports demonstrations, research, and training projects, and a number of institutes and

centers, such as the National Resource Centers on Native American Elders, Long-Term Care, Long-Term Care Ombudsman, and Elder Abuse, as well as the National Eldercare Institutes.



### AgeInfo

English – Access via paid subscription or membership



<http://ageinfo.cpa.org.uk/scripts/ageinfo/hfclient.exe?A=AgeInfo&lg=>

AgeInfo is an information service related to old age and aging provided by the Library and Information Service of the Centre for Policy on Ageing. AgeInfo provides the following searchable databases:

- A bibliographic database of over 40,000 books, articles and reports from the specialized collection on Social Gerontology held at the Centre for Policy on Ageing;
- Detailed information on over 4,000 organisations active in the field of old age and aging in the United Kingdom, Europe and other countries around the world;
- An international calendar of events listing courses, conferences, meetings, training sessions and other events soon to take place in the field of aging and old age.



# DATABASES (2/5)

## La banque d'instruments francophones de recherche en gérontogériatrie

French - Access free of charge



[http://www.usherbrooke.ca/Cdrgg/reseau/instru/index\\_bque.html](http://www.usherbrooke.ca/Cdrgg/reseau/instru/index_bque.html)

Developed by the **Réseau québécois de recherche sur le vieillissement** (Quebec Network for Research on Aging), this bank contains several instruments (questionnaires, tests or scales) listed according to various dimensions (depression, independence, burden, etc.) and analysed according to reliability and validity tests.

## GEROLIT

English, German

Access partially free of charge

<http://www.dimdi.de/en/db/dbinfo/dbkurz/ge79.htm>

GEROLIT (GEROntological LITerature) is a bibliographic database produced by the Deutsches Zentrum für Altersfragen (DZA). It covers international literature in the following areas: the sociology and psychology of old age, social policy related to the elderly, demography, geriatrics and psycho-geriatrics, nursing research, social work related to the elderly, and literature on practical services and assistance for the aged. Related literature in the fields of political science, law and jurisprudence, and pedagogy is included. Sources are international journals (approx. 150; 65% in German), books, and grey literature (60% German). Bibliographic information and indexing terms are searchable.

Via Free grips-WebSearch the database is free of charge and no royalties are payable.

Coverage: 1979 to present - File Size: 102,005 records. Language: German, English. Original titles searchable.

## II - HEALTH AND MEDICAL DATABASES

### Medline (PubMed)

English

Access free of charge via PubMed:

<http://www.pubmed.gov>



Access via OVID:



### Université de Montréal Network:

[http://www.bib.umontreal.ca/db/app\\_manuels\\_enligne.htm#ovid](http://www.bib.umontreal.ca/db/app_manuels_enligne.htm#ovid)

### McGill University Network:

<http://www.health.library.mcgill.ca/eguides/peruse.htm>

### Definition and Characteristics

A bibliographic database produced by the National Library of Medicine (NLM-USA; <http://www.nlm.nih.gov/>) Medline covers all biomedical fields: biochemistry, biology, pharmacology, psychiatry, public health, toxicology, veterinary medicine. Over 4,500 titles are currently indexed on PubMed. You can consult the list at: [http://www.nlm.nih.gov/bbsd/serfile\\_addedinfo.html](http://www.nlm.nih.gov/bbsd/serfile_addedinfo.html)

**Contents of Medline:** over 11 million references to articles published since 1966 (source: NLM). Summaries provided for nearly 70% of references. Updated daily. Monographs and conference proceedings are not indexed.

Periodicals are indexed according to three different levels of priority, and the time it takes for them to appear in the database varies similarly. This explains why certain references to articles appear several months or even over a year after they are published.

Medline does not cover world-wide medical literature. No database is exhaustive and, depending on the subject, even if Medline yields few results, it is advisable to search other databases such as the ones suggested above. **The fact that a search on Medline yields few results does not mean that no reference sources exist in the literature on the subject in question.**

### New operations :

- **saving your research strategies**  
On OVID: "Save strategy" Option. You can then save updated results in Reference Manager directly.

On PubMed: use **Cubby** (located on the main page, in the toolbar on the left).

- **"Alert" service (on OVID only)**  
- after saving your research strategy, you can subscribe and receive new releases directly via e-mail;

- **subscribing to BioMail:** visit <http://www.biomail.org> in order to receive



your new MEDLINE references via your e-mail account (up to 20 saved searches).



## CINAHL

English – Access via paid subscription

Produced by Cinahl Information Systems since 1982, CINAHL (Cumulative Index to Nursing and Allied Health Literature) is a **database that focuses on nursing and paramedical disciplines**. It contains the titles indexed in the Cumulative Index to Nursing and Allied Health Literature. Approximately 1200 titles are currently indexed in CINAHL, which, since 1994, includes articles in languages other than English. It is updated daily.

In addition, it includes articles from periodicals focussing on the following fields: Nursing; Medical Archives; Auxiliary Health Workers; Medical Libraries; Health Education; Occupational Therapy; Physiotherapy; Emergency Services; Social Services; Medical and Laboratory Technology. Also indexed here are the publications of the American Nurses' Association and the National League for Nursing, as well as books, theses and dissertations in the field of nursing, conference proceedings, professional practice standards, software and audio-visual documentation.

☞ Access through **OVID** interface:

**Université de Montréal Network:**

[http://www.bib.umontreal.ca/db/hermes/cinahl\\_web.htm](http://www.bib.umontreal.ca/db/hermes/cinahl_web.htm)

**McGill University Network:**

<http://www.health.library.mcgill.ca/database/cinahl.htm>

## PsycInfo

English – Access via paid subscription or membership

Produced by the **American Psychological Association**, PsycInfo covers **academic and professional literature in psychology and related disciplines (medicine, education, psychiatry, sociology, etc.)** whose subjects are related to psychology. The international scope of the database encompasses over 1,300 periodicals, academic theses, and technical reports in over 30 languages, as well as books and book chapters in English. This database was created in 1967 and is updated monthly.

☞ Access online:

**Université de Montréal Network:**

[http://www.bib.umontreal.ca/db/hermes/psycinfo\\_web.htm](http://www.bib.umontreal.ca/db/hermes/psycinfo_web.htm)

**McGill University Network:**

<http://www.library.mcgill.ca/peruse/psyc.htm>

## Current Contents

English – Access via paid subscription or membership

Produced by the **Institute for Scientific Information** (<http://www.isinet.com>), the Current Contents database contains **tables of contents and bibliographic data** for the current issues of over 750 academic periodicals in the following 7 major categories:

1. Agriculture, biology, environmental science
2. Arts and humanities
3. Social and behavioural science
4. Clinical medicine
5. Life sciences
6. Physical, chemical and earth science
7. Technology, engineering and computer science

All disciplines in these categories are indexed. The groupings may be queried simultaneously or separately via the "Limit" and "CC EDITION SUBSETS" functions during searches. The server contains data from 1994 to the present. Updated weekly.

**Caution!** Unlike other databases (PsycInfo, ERIC, etc.), the Current Contents database has no thesaurus (i.e. hierarchical list of descriptors). Contents are indexed by the authors themselves ("author keywords"), and indexing is occasionally completed by the institution that compiles the bibliographic data ("keywords plus"). Searches are performed using free vocabulary in the following fields: abstracts, title, author, keywords, keywords plus.

☞ Access through **OVID** interface:

**Université de Montréal Network:**

[http://www.bib.umontreal.ca/db/hermes/cc\\_web.htm](http://www.bib.umontreal.ca/db/hermes/cc_web.htm)

**McGill University Network:**

<http://www.health.library.mcgill.ca/database/cc.htm>

## ISI Web of Science

English – Access via paid subscription or membership

Produced by the **Institute for Scientific Information (ISI)**, the Web of Science provides current and retrospective access to ISI's Citation Databases from 1945 to the present. The database is updated

weekly. These multidisciplinary databases offer searches for articles by subject, author, source title, and/or author address, as well as by cited author and/or cited work.

The Citation Databases in the Web of Science are:

- Arts & Humanities Citation Index, published since 1975, covers over 1,150 international journals in the arts and humanities, including architecture, art, Asian studies, classics, history, languages, linguistics, literature, music, philosophy, and theatre.



- Science Citation Index Expanded, published since 1945, provides an index to over 5,700 of the world's leading scholarly science and technical journals covering more than 150 scientific & technical disciplines, including agriculture, biology, chemistry, computer science, engineering, medicine, physics and veterinary science.

- Social Science Citation Index, published since 1956, offers access to 1,700 of the world's leading scholarly social sciences journals covering more than 50 disciplines, including anthropology, communications, history, law, management, political science, psychology, sociology, and women's studies.

☞ Access online:

**Université de Montréal Network:**

<http://www.bib.umontreal.ca/SA/Webofscience.pdf>

**McGill University Network:**

<http://www.health.library.mcgill.ca/database/webofsci.htm>



# DATABASES (4/5)

## NLM Gateway

English – Access free of charge



<http://gateway.nlm.nih.gov/gw/Cmd>

The NLM Gateway allows users to search in multiple retrieval systems at the U.S. National Library of Medicine (NLM).

The current Gateway searches:

- **MEDLINE/PubMed:** Medical Literature, Analysis, and Retrieval System Online) is the U.S. National Library of Medicine's (NLM) premier bibliographic database containing over 12 million references to journal articles in life sciences, with a concentration on biomedicine;

- **OLDMEDLINE:** citations published in the 1960 through 1965 Cumulated Index Medicus and the 1957 through 1959 Current List of Medical Literature. OLDMEDLINE covers the fields of medicine, preclinical sciences, and related health sciences;

- **LOCATORplus:** U.S. National Library of Medicine's online catalogue; includes over 800,000 catalogue records on books, audiovisual material, journals, computer files, and other materials in the Library's collections;

- **MEDLINEplus:** the U.S. National Library of Medicine's web site for consumer health information. MEDLINEplus includes over 560 health topics, a medical encyclopedia containing an extensive library of medical images as well as 4,000 articles about diseases, tests, symptoms, injuries and surgical procedures, and two links to information on over 9,000 prescription and over-the-counter medications;

- **ClinicalTrials.gov:** provides patients, family members and the general public with current information about clinical research studies. It is a registry of clinical trials for both federally and privately funded trials "of experimental treatments

for serious or life-threatening diseases or conditions";

- **DIRLINE** (or "Directory of Information Resources Online") is the U.S. National Library of Medicine's online database containing location and descriptive information about a wide variety of information resources including organizations, research resources, projects, and databases concerned with health and biomedicine;

- **AIDS Meetings:** contains meeting abstracts from the former AIDSLINE database, as well as new meeting abstracts on AIDS/HIV. The meeting abstracts have been computer indexed using MeSH terms;

- **Health Services Research Meetings:** contains meeting abstracts from the Academy for Health Services Research and Health Policy (formerly the Association for Health Services Research), the International Society of Technology Assessment in Health Care, and the Cochrane Colloquium annual conferences. The meeting abstracts have been computer indexed using MeSH terms;

- **Space Life Sciences Meetings:** meeting abstracts from the former SPACELINE database. The meeting abstracts have been computer indexed using MeSH terms;

- **HSRProj:** project records on health services research, including health technology assessment and the development and use of clinical practice guidelines.

### Need help?

Would you like some help in using a database or performing an operation?

Are you wondering which databases to select in order to cover your research topic thoroughly?

Please do not hesitate to contact our team of librarians. We will be happy to assist you.

## HighWire, Library of the sciences and medicine

English – Access free of charge



<http://highwire.stanford.edu>

Created and maintained by Stanford University, HighWire contains 12,493,985 articles in over 4,500 **Medline** journals and 484,395 free full text articles from 349 HighWire-hosted journals (including articles published by the National Academy of Science).

Several levels of research but no access to MeSH (the NLM Medical Subject Headings); access to the journals list; possibility of receiving theme-related alerts via e-mail.

## Éco-Santé Québec 2002

French – Access free of charge



<http://www.ispq.qc.ca/pdf/publications/eco-sante.asp>

The analytical software of the Éco-Santé Québec 2002 health system, as well as its accompanying user manual, may now be downloaded from the **Institut national de santé publique** (National Institute of Public Health). Éco-Santé Québec 2002 is an initiative of the Observatoire franco-québécois de la santé et de la solidarité.



# DATABASES (5/5)

There are many other electronic databases and resources covering health sciences and medicine. You can consult the lists below:

**Réseau Université de Montréal:**  
**Bases de données: liste alphabétique des titres**

<http://www.bib.umontreal.ca/SB/BDD/index.htm>

**McGill University Network:**  
**Biomedical Databases and Other Resources**

<http://www.health.library.mcgill.ca/resource/healthdb.htm>

## III - THESES DATABASES

**Canadian theses or theses about Canada**

**The National Library of Canada  
AMICUS catalogue**

English-French - Free search



<http://amicus.nlc-bnc.ca/aaweb/amiloginf.htm>

It contains:

- publications available at the National Library of Canada;
- publications by Canadian authors and publishers or with Canadian content;
- monographs, theses, brochures, serial publications (including journals);
- federal and provincial government publications;
- electronic resources, audio recordings and sheet music.

**UMI, North-America Thesis (1985 to present)**

English - Free search but access to full text Access via online ordering

<http://www.umi.com/hp/Products/Dissertations.html>

The ProQuest Digital Dissertations database contains over 1.6 million disser-



tation and thesis references from 1861 to today, from 1000 universities in North America and all over the world (US, Canadian, British and European dissertations and theses). The search is free but access to full text by online ordering.

## IV - RESEARCH PROGRAMS DATABASES

**Canadian Research Information System**

English-French - Free access



[http://webapps.cihr-irsc.gc.ca/pls/cris/search?p\\_language=E&p\\_version=CRIS](http://webapps.cihr-irsc.gc.ca/pls/cris/search?p_language=E&p_version=CRIS)

The **Canadian Institutes of Health Research (CIHR)** is conducting a pilot project to determine the feasibility of developing a database of research projects supported by Canadian funding agencies. The database can be queried via one or a combination of the following parameters: location (where the research is conducted), investigator name, funding agency, funding program, fiscal year, research subject. A variety of detailed and summary reports are available and queried data can be exported for subsequent import to another application, such as a database or spreadsheet.

**Québec Directory of Public Research**  
English-French - Access free of charge



<http://www.repertoire-recherche.gouv.qc.ca/eng/vitrine.html>

This directory was generated through a partnership of three Quebec granting agencies, i.e. the Fonds québécois de la recherche sur la société et la culture (formerly the CORS), the Fonds de la recherche en santé du Québec (FRSQ) and the Fonds québécois de la recherche sur la nature et les technologies (formerly the Fonds FCAR).

**Funding agencies in Canada**



Selection available on the **Canadian Institutes of Health Research** website

<http://www.cihr-irsc.gc.ca/e/services/829.shtml>

## V - HEALTH POLICY DATABASE

**Health Policy Monitor**

<http://www.healthpolicymonitor.org/>

This independent network has been set up by the **Bertelsmann Foundation** in Germany; it specializes in comparative policy research and international benchmarking. The site includes a database containing all sorts of information on policy reform in 15 countries including Canada, United States, Australia, United Kingdom and France.



# AGENDA

**November 21-22, 2003**  
**Hamilton, Ontario, Canada**  
**3rd Canadian Cochrane Symposium on Knowledge Translation**

The 3rd Canadian Cochrane Symposium on "Advancing the Knowledge Translation of Systematic Reviews" is an event for anyone with an interest in turning health care research into health care policy and practice.

<http://cochrane.mcmaster.ca/symposium/>

**November 21st-25th, 2003**  
**San Diego, California, USA**  
**56th Annual Scientific Meeting of the Gerontological Society of America**

The meeting is organized to foster interdisciplinary interactions among gerontological health care clinical, administrative, and research professionals. In addition to the core scientific sessions, pre-conference workshop and poster sessions will take place, to encourage and promote diverse viewpoints in geriatric health, research, and economics. The meeting program is organized primarily around the four sections of the Society: Biological Sciences; Clinical Medicine; Behavioural and Social Sciences; and Social Research, Policy and Practice. There is a recognized need to disseminate this educational information to geriatric health care professionals in order to optimize elderly patient care.

[http://www.eshow2000.com/geron/about\\_the\\_meeting.cfm](http://www.eshow2000.com/geron/about_the_meeting.cfm)

**November 22-24, 2003**  
**Marriott Château Champlain**  
**Montreal, Quebec, Canada**  
**Strengthening the Foundations: Health Services and Policy Research - Canadian Health Care**

This event is the inaugural national symposium of the Canadian Institutes of Health Research (CIHR), Institute of Health Services and Policy Research (IHSPR). It will bring together leading Canadian researchers, young investigators, and health care system policy-makers and managers, to discuss the important roles of health services and policy research in finding solutions to Canada's most pressing health care system and service delivery issues.

<http://ellisriley.on.ca/IHSPR/>

**November 24-28, 2003**  
**Tokyo International Forum, Tokyo, Japan**  
**Promoting Sciences and Humanities for Successful Aging.**  
**7th Asia/Oceania Regional Congress on Gerontology**

Several topics will be covered, such as biology and aging, clinical medicine and aging, social sciences and aging, and training in geriatrics and clinical gerontology.

<http://www.convention.co.jp/7thao>

**November 30-December 2, 2003**  
**Hilton Toronto, Toronto, ON, Canada**  
**From Policy to Practice... The Home Care Challenge**  
**13th Annual Canadian Home Care Association Conference.**

The Conference is organized into five Educational Tracks: Leadership & Governance, Strategic Planning and Policy, Health Human Resources, Clinical Application and Practice, Accountability & Quality.

<http://www.cdnhomecare.on.ca/>

**December 1-4, 2003**  
**Queen Elizabeth Hotel**  
**Montreal, Quebec, Canada**  
**7th Annual Public Health Days**

The 7th Annual Public Health Days offer an opportunity for training and information sharing, providing 120 hours of accredited training. Over the course of four days, 19 topics on the future of public health will be addressed, according to various themes. Each day will begin with a plenary session open to all participants and feature a prominent speaker. In addition to the broad scientific program, several other activities will allow participants to share information and experiences and to socialize.

<http://www.inspq.qc.ca/jasp/programme/2003/overview.asp?A=2>

**December 4-5, 2003**  
**Tampa, Florida, USA**  
**Assisted Living Provider Leadership Summit: Many Paths to Common Ground**

This conference brings together state and national leaders in the assisted living profession to support the diversity of assisted living while achieving a shared vision for assuring quality of care and consumer choice. Presentations will address what is known about what works in assisted living; policy and regulatory successes and

failures; and how to keep assisted living viable in American states.

**March 5-7, 2004**  
**Sydney Convention & Exhibition Centre**  
**Darling Harbour, Sydney, Australia**  
**Inaugural International Conference on Longevity**

The purpose of this event is to gather together health professionals, scientists and public policy-makers in order to discuss approaches to aging and longevity. The principal themes of the event are longevity and *anti-aging* medicine, Western/modern/traditional medicine, mental health and biomedical technology.

<http://www.longevity-international.com/conference.htm>

## CALL FOR PAPERS

**August 3-7, 2004**  
**London, ON, Canada**  
**6th World Congress on Aging and Physical Activity**

The Canadian Centre for Activity and Aging (CCAA) has been chosen by the International Society for Aging and Physical Activity (ISAPA) to host the 6th World Congress on Aging and Physical Activity. This Congress will be held in London, Ontario, Canada from August 3 - 7, 2004. It is the first time that this prestigious event has been held in Canada. The theme selected by the host committee for this congress is "Research to Action for an Aging Society". **January 15, 2004 is the deadline for those wishing to submit abstracts of proposed presentations.**

<http://www.uwo.ca/actage/wcapa/index.htm>

**September 7-9, 2003**  
**University of Surrey Roehampton,**  
**United Kingdom**  
**Ageing Societies and Ageing Sociology: Challenges and Possibilities**

A call for papers is being launched by the *Ageing Societies and Ageing Sociology: Challenges and Possibilities* conference, which will take place at the University of Surrey from September 7-9, 2004. Individuals interested in presenting a paper or organizing a workshop for this conference on the sociology of ageing are asked to **submit presentation proposals by February 1, 2004.**

<http://www.soc.surrey.ac.uk/crag/rc11%20advert.pdf>



## PUBLICATIONS of SOLIDAGE members

### ROMANOW REPORT

Chris **MACKNIGHT**, B. Lynn **BEATTIE**, Howard **BERGMAN**, William B. **DALZIEL**, John **FEIGHTNER**, Barry **GOLDLIST**, David B. **HOGAN**, Frank **MOLNAR** and Kenneth **ROCKWOOD**. **Response to the Romanow report: the Canadian geriatrics society**. *Geriatrics Today*, 6, 2003 p. 11-15.

This report discusses the Canadian Geriatrics Society response to the Romanow Report conclusions:

- The aging population: because the population of Canada is aging, the reorganization necessary to meet the needs of an older, frailer population will be extensive.

- Human resources: Canada needs to increase the number of physicians choosing geriatrics as a career, increase the geriatric expertise of all physicians, and increase the number of individuals in other disciplines who choose to focus their careers on older adults.

- Primary care reform: innovative practice and funding models are needed to deliver optimal care for frail older adults, bringing interdisciplinary teams to the community, with the family physician fully integrated into these new systems. The development of primary care practices aimed at seniors should be a provincial government priority.

- Home care: the home care recommended in the Romanow Report is primarily aimed at post-acute and palliative care, but home care for those with chronic disease is also needed.

- Long-term care: Long-term care was not discussed in any meaningful way in the Romanow Report (nor in the Kirby Report). The 7-8% of seniors who live in nursing homes, and their caregivers, are served poorly by the report. The crisis in human capital is most serious in long-term care.

- Accountability: Although there is some controversy over how accountability should be incorporated into health care, The Canadian Geriatrics Society welcomes suggestions.

### NEUROLEPTICS

The literature review entitled **Use of neuroleptics among institutionalized elderly: prevalence, efficacy and adverse events**, by Johanne **MONETTE**, Michèle **MONETTE**, Nathalie **CHAMPOUX**, Guillaume **GALBAUD DU FORD** and

Christina **WOLFSON** is now available in *La revue de gériatrie*, Tome 28, n° 3 (Mar. 2003), p.259-268

This literature review indicates that almost a third of institutionalized elderly are administered conventional neuroleptics daily, to treat behaviour problems related to dementia, despite the moderate efficacy of such medication. Conventional neuroleptics appear to cause more adverse events (extrapyramidal signs) than atypical neuroleptics. However, other studies are necessary to determine the effectiveness and innocuous characteristics of neuroleptics.

The article includes 92 bibliographic references.

The review has been conducted as part of a pilot project entitled "Use of conventional and atypical neuroleptics in long-term care facilities".

### IUGM's LIBRARY

The article entitled **La bibliothèque de gériatrie de l'Institut universitaire de gériatrie de Montréal, une bibliothèque en évolution** (The Institut universitaire de gériatrie de Montréal library: a library in constant development), written by Audrey **ATTIA**, in collaboration with Louise **BOURBONNAIS**, library coordinator, has been published in the Spring 2003 (Vol. 32, No. 1, pp.38-42) edition of *Argus*, the publication of the Corporation of Professional Librarian of Quebec.

It discusses the library's most recent accomplishments and projects, in particular the publication of the **Thésaurus sur le vieillissement et la santé** (Thesaurus on Aging and Health), as well as the experience of working with members of the **Solidage** group—an unparalleled experience for the library team and a resource promoting service development and mutual enrichment.

### WORTH QUOTING

*"Ageing is like climbing a mountain; you get out of breath but you have a magnificent view"*

*Ingmar Bergman*

[http://www.euro.who.int/ageing/Lifestyles/20020319\\_1](http://www.euro.who.int/ageing/Lifestyles/20020319_1)

SOLIDAGE-Documentation is published by the Institut universitaire de gériatrie de Montréal, Geriatrics and Gerontology library for SOLIDAGE and the Interdisciplinary Health Research Team (IHRT).

### Editors

Audrey Attia  
Louise Bourbonnais

The library is located on the main floor of 4545 Queen Mary Road, Montreal.

### Hours

Monday to Friday,  
8:30 a.m. to 5:00 p.m.

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*The Solidage documentation centre focuses specifically on documentation related to the research topics encompassed by the 3 main branches of the research programme. The purpose of these branches is to:*

1) *determine the current and future health and social service needs of frail elderly persons;*

2) *document current health care and social service access, use, effects and costs;*

3) *determine innovative measures with respect to care delivery, effective clinical intervention and integrated service systems.*

