



E J G G European Journal of Geriatrics and Gerontology

2019

Volume: 1
Issue: 3
December

REVIEW

- Overview of Geriatrics Studies via the 14th EUGMS (European Geriatric Medicine Society) Congress 2018: From Turkey's Point of View
Fatma Özge Kayhan Koçak, Sevnaz Şahin, Selahattin Fehmi Akçiçek; İzmir, Turkey

ORIGINAL ARTICLES

- Functional Evaluation Tests as Prognostic Factors of Falls in Elderly Patients
Javier Benítez, Juan Manuel Ignacio, Sofía Perea, José Antonio Girón; Cádiz, Spain, Boston/MA, USA
- Delirium and Associated Factors Among Older Patients in Coronary and Internal Medicine Intensive Care Units of a University Hospital
Zeynep Dilek Aydın, Hatice Yıldırım; Isparta, Turkey
- The Physicians' Attitudes and Barriers to Proactive Sexual History Taking During Comprehensive Geriatric Assessment
Doha Rasheedy, Mohamed Mortada; Cairo, Egypt
- Chronic Pain and Related Factors in Patients Aged ≥80 Years
Serdar Özkök; İstanbul, Turkey

CASE REPORT

- Approach to DRESS Syndrome Associated with Allopurinol Use in a Geriatric Patient
Can Sevinç, Pınar Tosun Taşar, Elif Büyükkurt; Erzurum, Turkey

LETTER TO THE EDITOR

- Aging and Fall: Vision Related Signs on Head Computed Tomography
Sunny Chi Lik Au, Simon Tak Chuen Ko; Hong Kong, China

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Publisher Certificate Number: 14521 Printing Date: November 2019 E-ISSN: 2687-2625

International periodical journal published three times in a year.

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Reviewing the articles' conformity to the publishing standards of the Journal,
typesetting, reviewing and editing the manuscripts and abstracts in English and
publishing process are realized by Galenos.

European Journal of Geriatrics and Gerontology is the official open access scientific publication organ of the Academic Association of Geriatrics. It is a double peer-reviewed journal published quarterly in April, August and December.

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Technical and other assistance should be provided on the title page.

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Title: The title should provide important information regarding the manuscript's content.

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Abstract and Keywords: The second page should include an abstract that does not exceed 300 words. Moreover, as various electronic databases integrate only abstracts into their index, important findings should be presented in the abstract.

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Materials and Methods: Important methods should be written respectively.

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Other types of manuscripts, such as case reports, reviews and others will be published according to uniform requirements. Provide at least 3 keywords below the abstract to assist indexers. Use terms from the Index Medicus Medical Subject Headings List (for randomized studies a CONSORT abstract should be provided (<http://www.consort-statement.org>)).

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Original articles should have the following sections;

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Materials and Methods: Clearly describe the selection of observational or experimental participants, such as patients, laboratory animals, and controls, including inclusion and exclusion criteria and a description of the source population. Identify the methods and procedures in sufficient detail to allow other researchers to reproduce your results. Provide references to established methods (including statistical methods), provide references to brief modified methods, and provide the rationale for using them and an evaluation of their limitations. Identify all drugs and chemicals used, including generic names, doses, and routes of administration. The section should include only information that was available at the time the plan or protocol for the study was devised on STROBE (<http://www.strobe-statement.org>).

Statistics: Describe the statistical methods used in enough detail to enable a knowledgeable reader with access to the original data to verify the reported results. Statistically important data should be given in the text, tables and figures. Provide details about randomization, describe treatment complications, provide the number of observations, and specify all computer programs used.

Results: Present your results in logical sequence in the text, tables, and figures. Do not present all the data provided in the tables and/or figures in the text; emphasize and/or summarize only important findings, results, and observations in the text. For clinical studies provide the number of samples, cases, and controls included in the study. Discrepancies between the planned number and obtained number of participants should be explained. Comparisons, and statistically important values (i.e. p value and confidence interval) should be provided.

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Examples of References:

1. List All Authors

Bonanni E, Tognoni G, Maestri M, Salvati N, Fabbri M, Borghetti D, DiCoscio E, Choub A, Sposito R, Pagni C, Iudice A, Murri L. Sleep disturbances in elderly subjects: an epidemiological survey in an Italian district. *Acta Neurol Scand* 2010;122:389-397.

2. Organization as Author

American Geriatrics Society 2015 Updated Beers Criteria Expert panel. American geriatrics society 2015 updated Beer criteria for potentially inappropriate medication use in older adults. *J Am Geriatr Soc* 2015;63: 2227-2246.

3. Complete Book

Ham RJ, Sloane PD, Warshaw GA, Potter JF, Flaherty E. Ham's primary care geriatrics : a case-based approach, 6th ed. Philadelphia, Elsevier/Saunders, 2014.

4. Chapter in Book

BG Katzung. Special Aspects of Geriatric Pharmacology, In: Bertram G. Katzung, Susan B. Masters, Anthony J. Trevor (Eds). *Basic and Clinical Pharmacology*. 10th edition, Lange, Mc Graw Hill, USA 2007, pp 983-90.

5. Abstract

Reichenbach S, Dieppe P, Nuesch E, Williams S, Villiger PM, Juni P. Association of bone attrition with knee pain, stiffness and disability; a cross sectional study. *Ann Rheum Dis* 2011;70:293-8. (abstract).

6. Letter to the Editor

Rovner B. The Role of the Annals of Geriatric Medicine and Research as a Platform for Validating Smart Healthcare Devices for Older Adults. *Ann Geriatr*. 2017;21:215-216.

7. Supplement

Garfinkel D. The tsunami in 21st century healthcare: The age-related vicious circle of co-morbidity - multiple symptoms - over-diagnosis - over treatment - polypharmacy [abstract]. *J Nutr Health Aging* 2013;17(Suppl 1):224-227.

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CONTENTS

REVIEW

- 70 Overview of Geriatrics Studies via the 14th EUGMS (European Geriatric Medicine Society) Congress 2018: From Turkey's Point of View**
Fatma Özge Kayhan Koçak, Sevnaz Şahin, Selahattin Fehmi Akçiçek; İzmir, Turkey

ORIGINAL ARTICLES

- 78 Functional Evaluation Tests as Prognostic Factors of Falls in Elderly Patients**
Javier Benítez, Juan Manuel Ignacio, Sofia Perea, José Antonio Girón; Cádiz, Spain, Boston/MA, USA
- 87 Delirium and Associated Factors Among Older Patients in Coronary and Internal Medicine Intensive Care Units of a University Hospital**
Zeynep Dilek Aydın, Hatice Yıldırım; Isparta, Turkey
- 94 The Physicians' Attitudes and Barriers to Proactive Sexual History Taking During Comprehensive Geriatric Assessment**
Doha Rasheedy, Mohamed Mortada; Cairo, Egypt
- 101 Chronic Pain and Related Factors in Patients Aged ≥80 Years**
Serdar Özkök; İstanbul, Turkey

CASE REPORT

- 107 Approach to DRESS Syndrome Associated with Allopurinol Use in a Geriatric Patient**
Can Sevinç, Pınar Tosun Taşar, Elif Büyükkurt; Erzurum, Turkey

LETTER TO THE EDITOR

- 112 Aging and Fall: Vision Related Signs on Head Computed Tomography**
Sunny Chi Lik Au, Simon Tak Chuen Ko; Hong Kong, China

INDEX

2019 Referee Index
2019 Author Index
2019 Subject Index