Facing an ageing society: The need of innovations in Medical Technology

G. Rakhorst Healthy Ageing Network Northern Netherlands (HANNN) Groningen, the Netherlands

Demographic change in Northern Europe



Europe 1950-2050

Increasing life expectancy
Decilining or stagnating fertility



Growing number of ageing people & Young people move to cities

Europe Life expectancy at birth by sex (years) Medium variant 1950-2050

Period	Both sexes combined	Male	Female
1950-1955	65.6	63.0	68.0
1955-1960	68.0	65.2	70.6
1960-1965	69.7	66.6	72.5
1965-1970	70.4	67.0	73.5
1970-1975	70.8	67.2	74.2
1975-1980	71.2	67.3	74.9
1980-1985	71.7	67.7	75.5
1985-1990	72.8	69.0	76.5
1990-1995	72.6	68.3	76.8
1995-2000	73.1	68.9	77.3
2000-2005	73.8	69.6	78.0
2005-2010	75.1	71.1	79.1
2010-2015	76.1	72.3	79.9
2015-2020	77.1	73.5	80.7
2020-2025	78.1	74.6	81.4
2025-2030	78.9	75.6	82.1
2030-2035	79.6	76.4	82.7
2035-2040	80.2	77.1	83.3
2040-2045	80.9	77.8	83.9
2045-2050	81.5	78.5	84.5



Empty Regions

Baltic Sea Region 2000-2050: Percentage of active working people of 65+

	2000	2005	2025	2050
Denmark	22,2	22,6	33,8	40,0
Estonia	22,4	24,1	31,3	43,1
Finland	22,2	23,7	41,4	46,7
Latvia	22,1	24,1	30,7	44,1
Lithuania	20,8	22,5	29,2	44,9
Poland	17,6	18,7	32,8	51,0
Sweden	26,9	26,4	36,5	40,9

R.Muenz, Ageing and demographic change in European Societies, 2007

How to survive in empty regions?



Initiate migration of young people to low populated areas (new jobs)

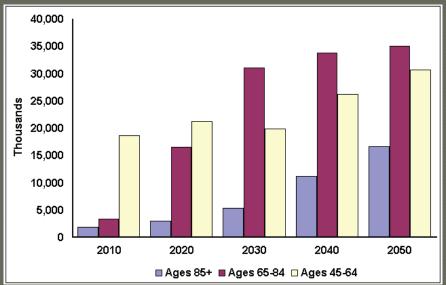
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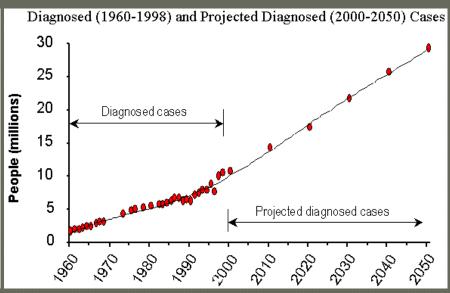
Stimulate technological innovations in health care (work longer)

Projected age and chronic disease numbers in the USA (period 2000-2050)

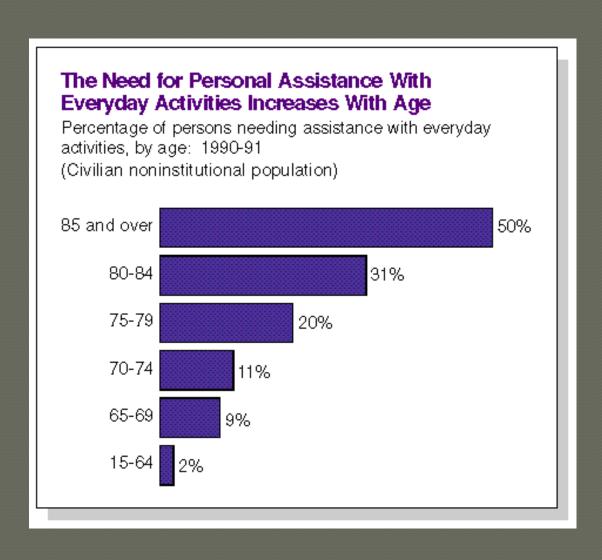
Cumulative Change in Population by Age Groups, 2000 – 2050

Prevalence of Diagnosed Diabetes in the United States





Ageing people need more often personnal assistance

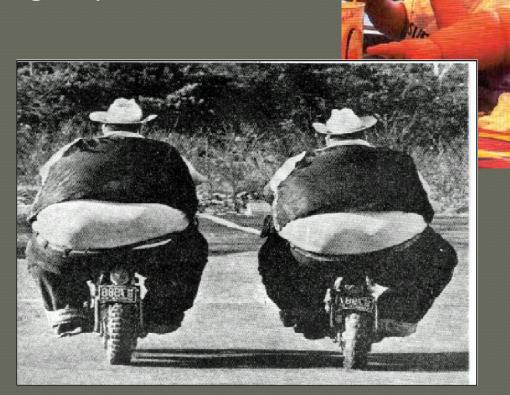


Requirements for ageing people to survive in "empty" regions

- Safe place to live
- Easy access to health care
- Mobility and public transportation
- Recreation
- Money

Obesitas and ageing

Obesitas at young age influences health at older age: How to treat obesitas in a stimulating way?



Requirements for the society to enable ageing people to survive in "empty" regions

- Promotion of healthy life style: fall prevention, healthy food, etc.
- Initiate innovative medical and technological research and education
- Better use of innovations in Medical Technology and ICT

Possibilities of Modern Medical Technology

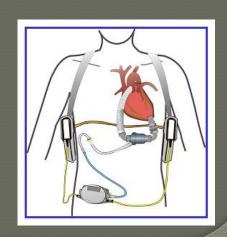
New (bio)materials, nanotechnology, hybrid techniques, etc. make development of miniaturized complex systems and custom build devices possible

MT can facilitate independent living of disabled and chronically ill patients (bionic arm, artificial pancreas, portable dialysis, implantable blood pumps)









Limitations of modern MT

- Most home care devices are too technical to handle for elderly
- Physiology of ageing patients differs from "avarage" patients (stiffening)
- Use of medical implants much longer than expected
- MT Assessment is performed after the market introduction of a product

Hemodialysis an unhealthy but life saving therapy

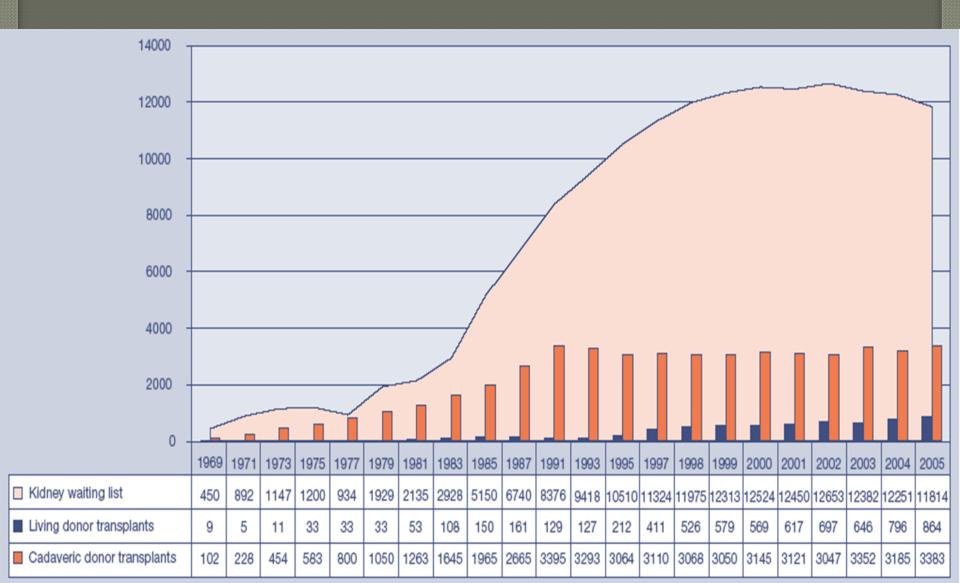
Complications of HD:

Low blood pressure
Muscle cramps
Itching
Sleep problems
Anemia
Bone disease
High blood pressure
Fluid overload
Inflammation
Access site complications
Amyloidoses
Depression



MayoClinic.com, 2013

Waiting list kidney transplantation Eurotransplant



Organ Transplantion



Preservation – hypothermic conditions

Cold Storage (CS)

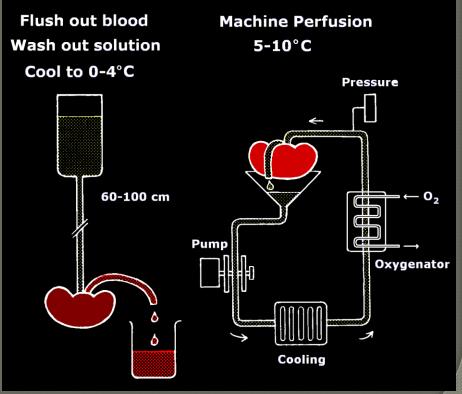
Machine Perfusion (MP)





Advantages of MP:

- longer preservation time
- better post Tx orgaanfunction
- cost effective
- Administration of nutrients and oxygen during preservation
- Biochemical analys graft function

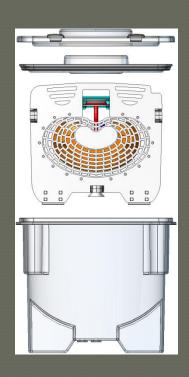


Transportable kidney perfusion machine (Belzer 1970, USA)



Organ-support and organ transplantation



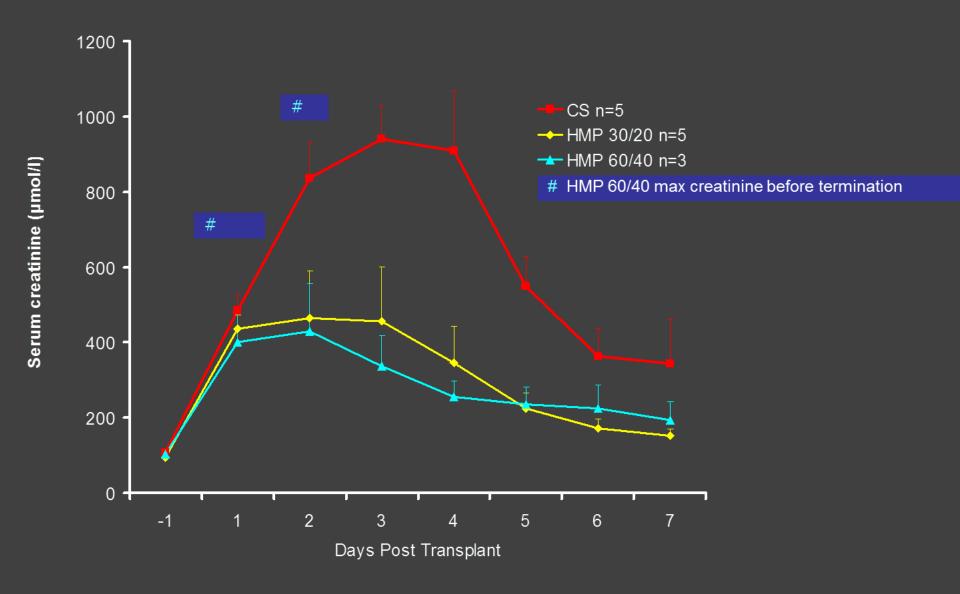






TE & RM: Organ Repair

Machinale Perfusie versus Cold Storage



MT and the ageing society What to do?

MT 2050 Create awareness of the physiology and needs of ageing people

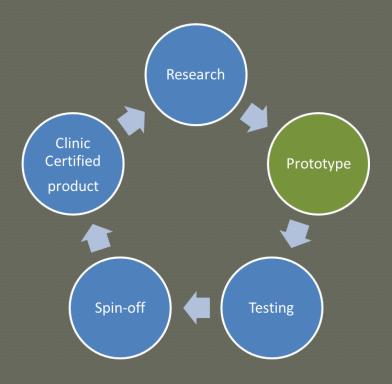
Learn from mistakes: Practice of an e-Diabetes pilot project

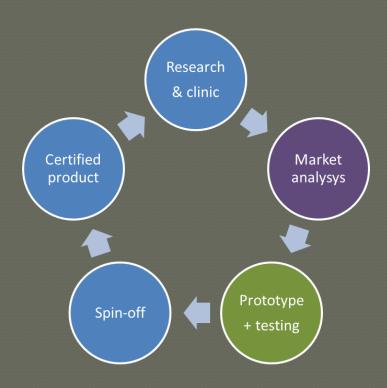
- No WIFI available
- Elderly are afraid to store and transfer their own medical data
- Doctors receive too many data
- Doctors need too much time to analyze all data adequately
- Electronic patient files differ per practice
- Difficult to maintain privacy
- Both doctors and patients prefer forms instead of e-mail

Medical product development

Traditional

Stanford Biodesign concept





EU long term vision: MT 2050

Multidisciplinary fundamental and applied research focused at the ageing society

Deliverables:

Affordable medical devices

Increased life cycle of medical devices

Personalised medicine: custom made medical devices, use of MT by elderly people

Technical nurse practicioners that assist doctors and patiënts





This certifies that

THE NORTHERN NETHERLANDS PROVINCES ALLIANCE

is a





Reference Site of the European Innovation Partnership on Active and Healthy Ageing





Brussels, 1st July 2013



Neelie Kroes

Vice President of the European Commission responsible for the Digital Agenda for Europe







European Commissioner for Health

MT 2050: Innovations guaranteed

Thank you for your attention