P88 217 DEBRECEN LONGEVITY STUDY I. THE HEMORHEOLOGICAL STATUS IN OLDEST OLD RESIDENTS

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Introduction: Among the elderly population the number and proportion of the oldest-old (defined as age 90 years or older) will increase most significantly in the near future. Since there was no similar study on this target group in Hungary, we decided to make a systemic analysis of the social, clinical and biological conditions of them under this title: Debrecen Longevity Study. Debrecen is the second largest city in the country, and the oldest old residents represent 0.4% of the total population (834 residents). Methods: The pro-bands were examined in their homes with an interview, based on a questionnaire which contained questions about their nutrition, health status, physical activity, etc. After the interview medical and laboratory investigation were performed in order to evaluate the general health status of the subjects. We examined 52 routine laboratory parameters. Since age-specific reference values are not available for the oldest-old persons neither in clinical practice, nor in the scientific literature, our results could be compared only to the general, adult reference values. Results: Blood samples were obtained from 304 persons (228 women, 76 men) randomly selected from the total oldest-old population. Most of the investigated parameters were in the normal range. The alterations were not extreme, but they were statistically significant. We compared these results with our earlier laboratory screening test (completed in 2001) of Debrecen residents between 60-74 and 75-89 years respectively. Thus we had the opportunity to compare three age groups. We have experienced significant decreasing trends at cholesterol and triglyceride levels, while there is an increasing trend at HDL-cholesterol level. Conclusions: During aging the population becomes increasingly selected, namely over 90 years only the “survivors” are alive. As the proportion of “survivors” increases, some parameters stop worsening or even show some improvement.