



Επιστημονικό έργο SOS ΙΑΤΡΩΝ

*Μιχάλης Οικονόμου,
Γαστρεντερολόγος,
Πρόεδρος ΕΕΕΙ*



Δημοσιευμένες μελέτες στη διεθνή βιβλιογραφία

ORIGINAL PAPER

THE INTERNATIONAL JOURNAL OF
CLINICAL PRACTICE

Comparison of morbidity of elderly patients in August and November in Attica, Greece: a prospective study

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SUMMARY

Background: In our clinical practice, we have experienced a consistent increase in the morbidity of elderly in Greece during August. **Methods:** We prospectively analysed and compared the morbidity of elderly patients (≥ 75 years old) between August and November of the same year (2010), using data from the SOS Doctors (a network of physicians performing house call visits). **Results:** We analysed data on 739 and 738 elderly patient house-calls in August and November, respectively. Overall, the most common diagnoses were cardiovascular (17.6%), musculoskeletal (10.7%), gastrointestinal (9.5%), respiratory (8.5%), renal/genitourinary (8.1%), and neurologic/psychiatric (7.9%). In August, patients were older ($p < 0.01$), carried a heavier burden of disease (as inferred by specific types of comorbidity and associated medical conditions), were more frequently recommended emergency hospitalization ($p < 0.01$) and had a worse outcome of primary illness ($p < 0.05$). Mortality of elderly visited in August was significantly higher compared to November (5% vs. 2%, $p < 0.01$). The sole independent predictor of mortality was patient's bedridden status [adjusted odds ratio (OR) = 5.59, 95% confidence intervals (CI) 2.83–11.06, $p < 0.001$]. The identified independent predictors of recommendation for emergency hospitalization were patient's lethargic status [OR = 2.88 (1.80, 4.59), $p < 0.001$], fever [OR = 2.55 (1.84, 3.54), $p < 0.001$], heart stroke [OR = 2.08 (1.19, 3.64), $p = 0.01$], Alzheimer's disease [OR = 1.77 (1.15, 2.72), $p = 0.01$] and bedridden status [OR = 1.45 (1.07, 1.97), $p < 0.05$]. **Conclusion:** Morbidity and mortality of elderly patients was significantly higher in August compared with November, substantiating the informal term 'Augustitis' for the Greek elderly. Large, prospective population-based studies are warranted to further enlighten this field.

Conclusion: Morbidity and mortality of elderly patients was significantly higher in August compared with November, substantiating the informal term 'Augustitis' for the Greek elderly. Large, prospective population-based studies are warranted to further enlighten this field.

RESEARCH

CMAJ

Seasonality of mortality: the September phenomenon in Mediterranean countries

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Previously published at www.cmaj.ca

ABSTRACT

Background: Seasonal increases in the mortality rate have been associated with excessively cold or hot weather. We evaluated monthly patterns of mortality in selected countries.

Methods: We analyzed all-cause mortality statistics from 5 European Mediterranean countries (Cyprus, France, Greece, Italy, Spain), Sweden, North America (United States and Canada), Australia, New Zealand and Japan. We extracted and tabulated data on monthly all-cause mortality in the general population from the earliest to the latest year that records were available.

Results: We identified relevant data for a period of 2–57 years in each country. In the Mediterranean countries, the lowest average daily mortality was observed in September (all countries, 125/168 [74%] years). The fewest deaths were in August in Sweden (14/20 [70%] years) and North America (32/50 [64%] years). The fewest deaths in Japan occurred in July (2/2 [100%] years). In the southern hemisphere, the lowest mortality in Australia occurred in March (7/10 [70%] years) and in February for New Zealand (cumulative over 24 years).

Interpretation: Mortality in the general population declines in the late summer to early fall months in the countries evaluated. Environmental parameters may partly account for these associations, and further research is needed on the contribution of additional factors such as summer vacations.



Δημοσιευμένες μελέτες στη διεθνή βιβλιογραφία

Comparison of characteristics of outpatients with 2009 H1N1 pandemic and seasonal influenza

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Issue



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European Journal of Internal Medicine

Volume 21, Issue 6, October 2010, Pages 434–438



Original article

Evaluation of a direct test for seasonal influenza in outpatients

George Theocharis^a, Evidiki K. Vouloumanou^b, Petros I. Rafailidis^{b, c}, Theodore Spiropoulos^a, Spyridon G. Barbas^a, Matthew E. Falagas^{b, c, d}

Respiratory Medicine (2008) 102, 711–717



respiratoryMEDICINE

Effect of meteorological variables on the incidence of respiratory tract infections

Matthew E. Falagas, MD, MSc, DSc^{a,b,c,*}, George Theocharis, MD^d, Alex Spanos^e, Lambrini A. Vlara, MD^a, Evangelos A. Issaris^e, George Panos, MD, PhD, DTM&H (Lon)^a, George Peppas, MD^{a,d}

Eur J Clin Microbiol Infect Dis (2009) 28:709–712
DOI 10.1007/s10996-008-0679-z

BRIEF REPORT

Effect of meteorological variables on the incidence of lower urinary tract infections

M. E. Falagas · G. Peppas · D. K. Matthaïon ·
D. E. Karageorgopoulos · N. Karalis · G. Theocharis



Δημοσιευμένες μελέτες στη διεθνή βιβλιογραφία

European Journal of Clinical Microbiology & Infectious Diseases
November 2012, Volume 31, Issue 11, pp 2957-2961

Date: 02 Jun 2012

Outpatient parenteral antibiotic therapy (OPAT) at home in Attica, Greece

G. Theocharis, P. I. Rafailidis, D. Rodis, I. Kontopidis, S. G. Barbas, M. E. Falagas

Arch Virol
DOI 10.1007/s00705-016-2941-5



ORIGINAL ARTICLE

Impact of oseltamivir use on the reduction of complications in patients with influenza: a prospective study

Konstantinos Z. Vardakas^{1,3} · George Theocharis² · Giannoula S. Tansarli¹ · Petros Rafailidis^{1,4} · Matthew E. Falagas^{1,3,5}

European Journal of Clinical Microbiology & Infectious Diseases
September 2013, Volume 32, Issue 9, pp 1143-1147

Date: 27 Mar 2013

Association between use of air-conditioning or fan and survival of elderly febrile patients: a prospective study

G. Theocharis, G. S. Tansarli, M. N. Mavros, T. Spiropoulos, S. G. Barbas, M. E. Falagas

European Journal of Clinical Microbiology & Infectious Diseases
September 2012, Volume 31, Issue 9, pp 2141-2146

Date: 02 Feb 2012

Morbidity of foreign travelers in Attica, Greece: a retrospective study

G. Theocharis, K. A. Polyzos, E. K. Vouloumanou, G. Peppas, T. Spiropoulos, S. G. Barbas, M. E. Falagas

BMC Health Services Research



Research article

Open Access

An analysis of patient house calls in the area of Attica, Greece

George Peppas^{1,2}, George Theocharis², Efthymia A Karveli¹ and Matthew E Falagas^{*1,3}

Δημοσιευμένες μελέτες στη διεθνή βιβλιογραφία

OPEN ACCESS Freely available online

PLoS one

Surveillance of Community Outbreaks of Respiratory Tract Infections Based on House-Call Visits in the Metropolitan Area of Athens, Greece

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Abstract

Background: The traditional Serfling-type approach for influenza-like illness surveillance requires long historical time series. We retrospectively evaluated the use of recent, short, historical time-series for recognizing the onset of community outbreaks of respiratory tract infections (RTIs).

Methods: The data used referred to the proportion of diagnoses for upper or lower RTIs to total diagnoses for house-call visits, performed by a private network of medical specialists (SOS Doctors) in the metropolitan area of Athens, Greece, between January 01, 2005 and October 12, 2008. The reference standard classification of the observations was obtained by generating epidemic thresholds after analyzing the full 9 year period. We evaluated two different alert generating methods (simple regression and cumulative sum (CUSUM), respectively), under a range of input parameters, using data for the previous running 4-6 week period. These methods were applied if the previous weeks contained non-stemant observations.

Results: We found that the CUSUM model with a specific set of parameters performed marginally better than simple regression for both groups. The best results (sensitivity, specificity) for simple regression and CUSUM models for upper RTIs were (1.00, 0.82) and (0.94, 0.93) respectively. Corresponding results for lower RTIs were (1.00, 0.80) and (0.95, 0.91) respectively.

Conclusions: Short-term data for house-call visits can be used rather reliably to identify respiratory tract outbreaks in the community using simple regression and CUSUM methods. Such surveillance models could be particularly useful when a large historical database is either unavailable or inaccurate and, thus, traditional methods are not optimal.

Citation: Spanos A, Theodoris G, Karageorgopoulos DE, Peppas G, Fouskakis D, et al. (2012) Surveillance of Community Outbreaks of Respiratory Tract Infections Based on House-Call Visits in the Metropolitan Area of Athens, Greece. PLoS ONE 7(8): e40110. doi:10.1371/journal.pone.0040110

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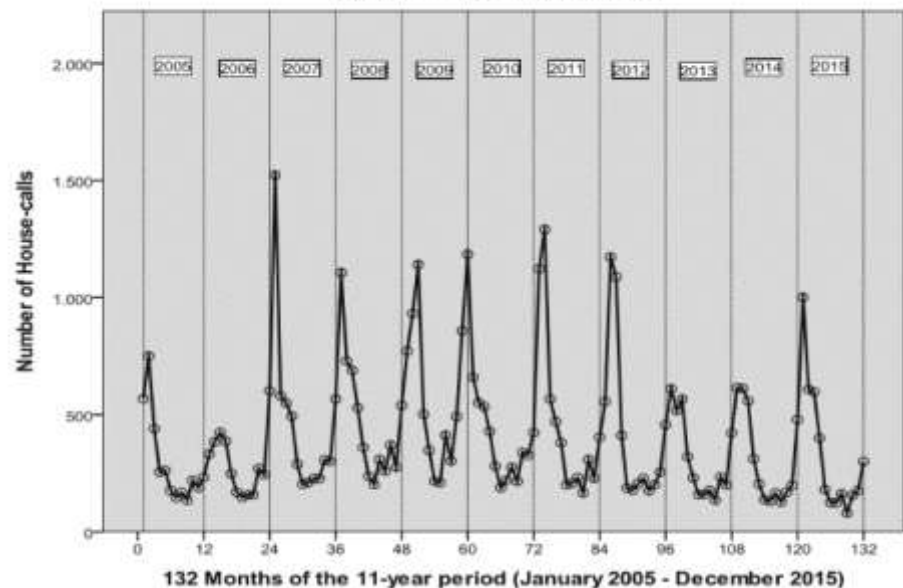
Copyright: © 2012 Spanos et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

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Competing Interests: The authors have declared that no competing interests exist.

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Distribution of upper & lower respiratory tract infections within the 11-year study period





Πρόσφατες μελέτες

Theocharis et al. *BMC Health Services Research* (2018) 18:304
<https://doi.org/10.1186/s12913-018-3111-0>

BMC Health Services Research

RESEARCH ARTICLE

Open Access

Patient house calls in Attica and Thessaloniki, Greece (2005-2015): a model for out-of-hospital multispecialty emergency medicine

George Theocharis^{1,2}, Spyridon G. Barbas¹, Theodore Spiropoulos¹, Petroula E. Stamouli¹, Dimitrios N. Perdikis¹ and Matthew E. Falagas^{3,5,6*}

Abstract

Background: The SOS-doctors are a network of physicians who perform house-call visits in the areas of Attica and Thessaloniki, Greece.

Methods: Patients requesting medical services by the SOS doctors during the period 1/1/2005 – 31/12/2015 were eligible for inclusion in this retrospective analysis.

Results: During this period 335, 212 home visits were performed. Females used this service more frequently compared to males (60.5% versus 39.5%). Among the age-groups, patients aged over 75 years made 56.6% of all house calls. Fewer phone requests were recorded during autumn than in winter (21.1% versus 29.1%). Infections were the most common cause of house-visits (29%), followed by cardiovascular diseases (10.3%), musculoskeletal (9.1%), gastrointestinal (6.3%) and neurological disorders (3.7%). An increasing demand for radiology at home was observed, starting at 352 calls in 2009 and reaching 2230 in 2015. Finally, 9.2% of patients were advised to be admitted into a hospital.

Conclusion: A shift towards older age, but not the oldest old (> 90 years), and acute conditions was observed during the study period. The study confirms that home visits retain a significant role in the modern health care systems.

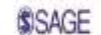
Keywords: Home visit, Frailty, Elderly, Disability

A Model for Out-of-Hospital Multispecialty Emergency Medicine: Accomplishments and Challenges

George Theocharis^{1,2}, Konstantinos S Kechagias³, Michael Oikonomou^{1,4}, Stamatia Chorepsima^{3,5}, Dionisis Rodis^{1,2}, Ioannis Salpigiaktis^{1,2} and Matthew E Falagas^{3,5,6}

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ABSTRACT: Home care has been traditionally considered as an important type of medical service. "SOS Doctors" is a Greek organization providing out-of-hospital multispecialty emergency medicine services the past 25 years. Its services mainly meet the demands of the elderly and the nonambulatory patients. The decreased number of hospitalizations, hospital-related infections, and need for patient transportation are the main advantages of a model for out-of-hospital multispecialty emergency medicine. However, the time consumed by the doctor related to transportation is a drawback of medical house calls. Despite the challenges, medical house calls are a useful part of health services in the modern health care system.

KEYWORDS: Out-of-hospital services, medical needs, Greece, home visit

Μάιος 2018

Σεπτέμβριος 2018



Φύλο ασθενών

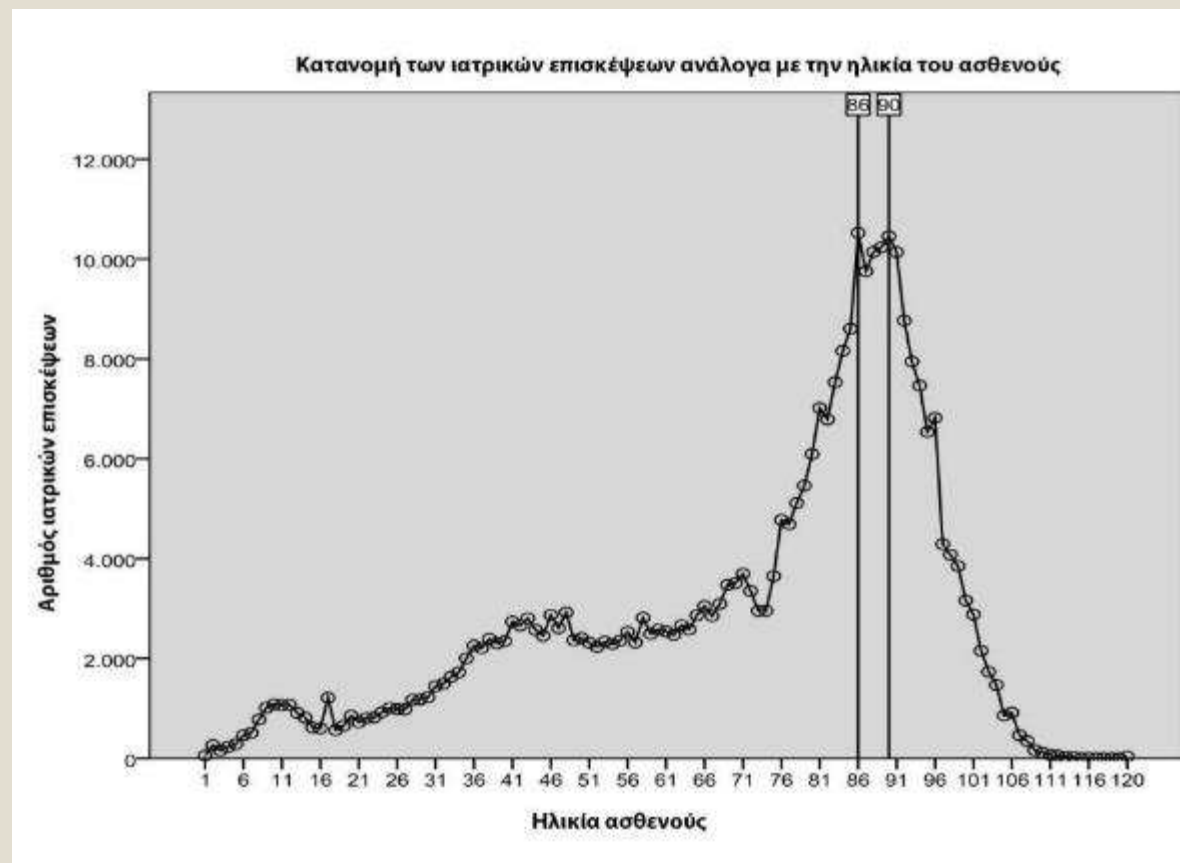
Οι γυναίκες χρειάστηκαν συχνότερα ιατρικές επισκέψεις στο σπίτι





Ηλικία ασθενών

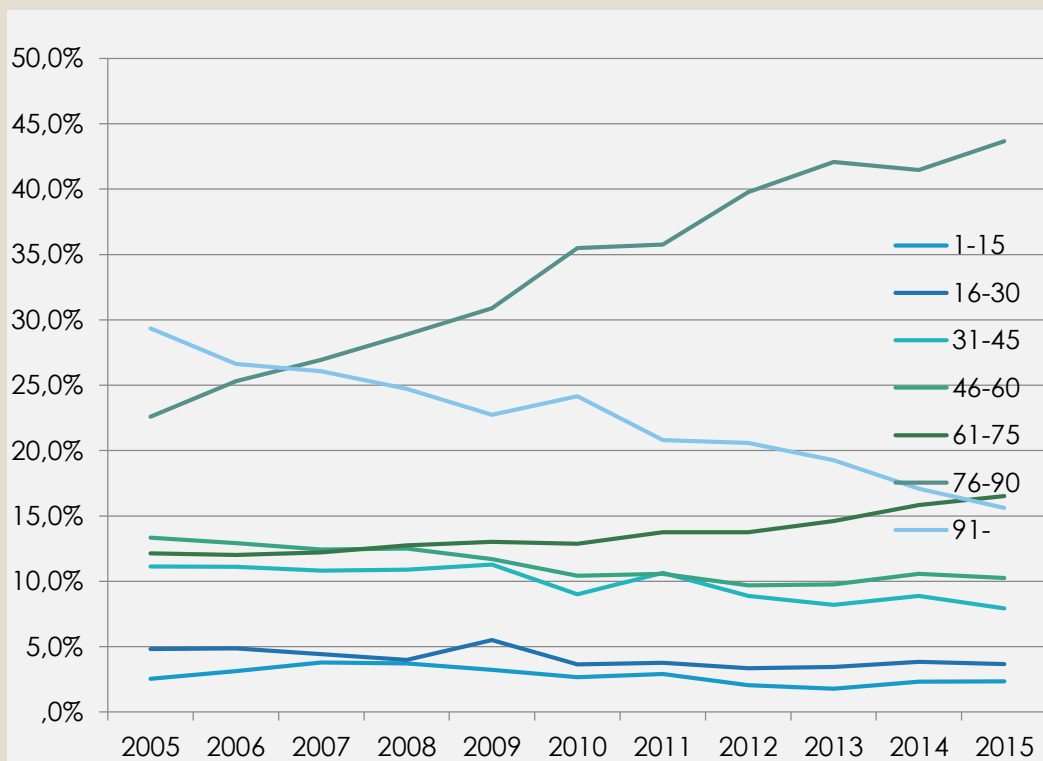
56,6% των κλήσεων έγιναν από ασθενείς άνω των 75 ετών





Αναλογία ιατρικών επισκέψεων σε συνάρτηση με τις ηλικιακές ομάδες κατά τη διάρκεια της περιόδου μελέτης

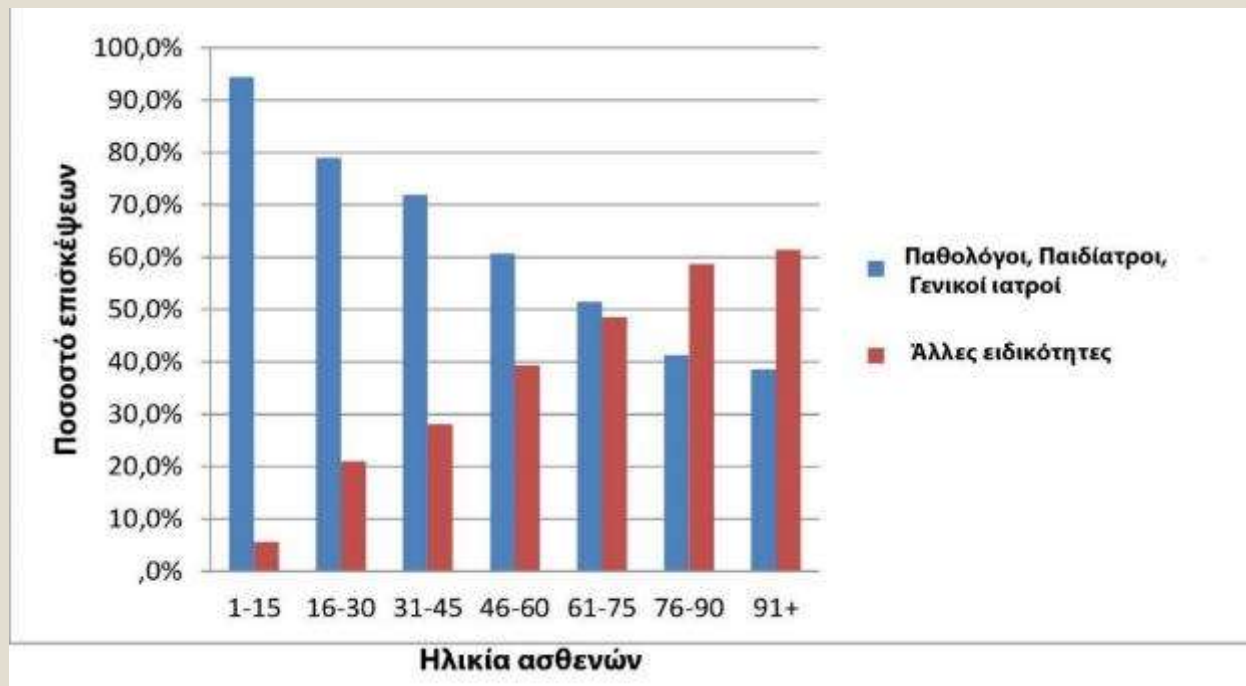
*Το ετήσιο ποσοστό κλήσεων από άτομα της ηλικιακής ομάδας 76-90 παρουσιάζει
συνεχή αύξηση μέσα στα χρόνια της μελέτης*





Κατανομή των ιατρικών επισκέψεων ανάλογα με την ιατρική ειδικότητα στις διάφορες ηλικιακές ομάδες

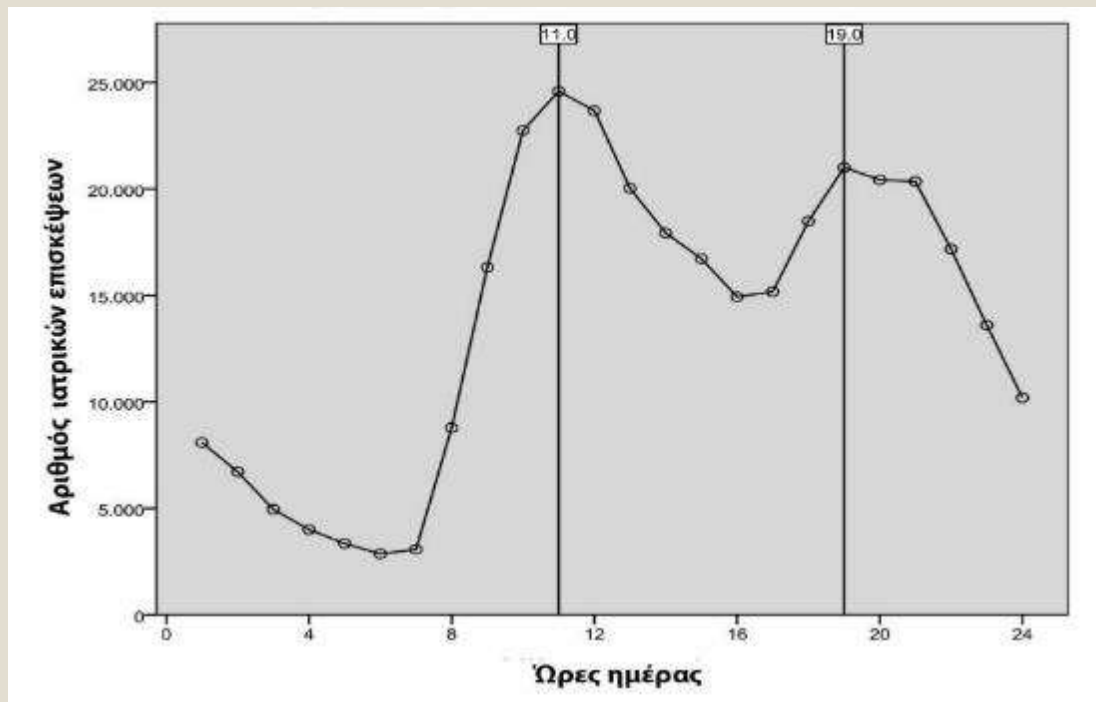
Η μέση ηλικία των ασθενών που εξετάστηκαν από παθολόγους ή γενικούς ιατρούς είναι τα 75 έτη, ενώ των άλλων ειδικοτήτων τα 85 ($p < 0.001$)





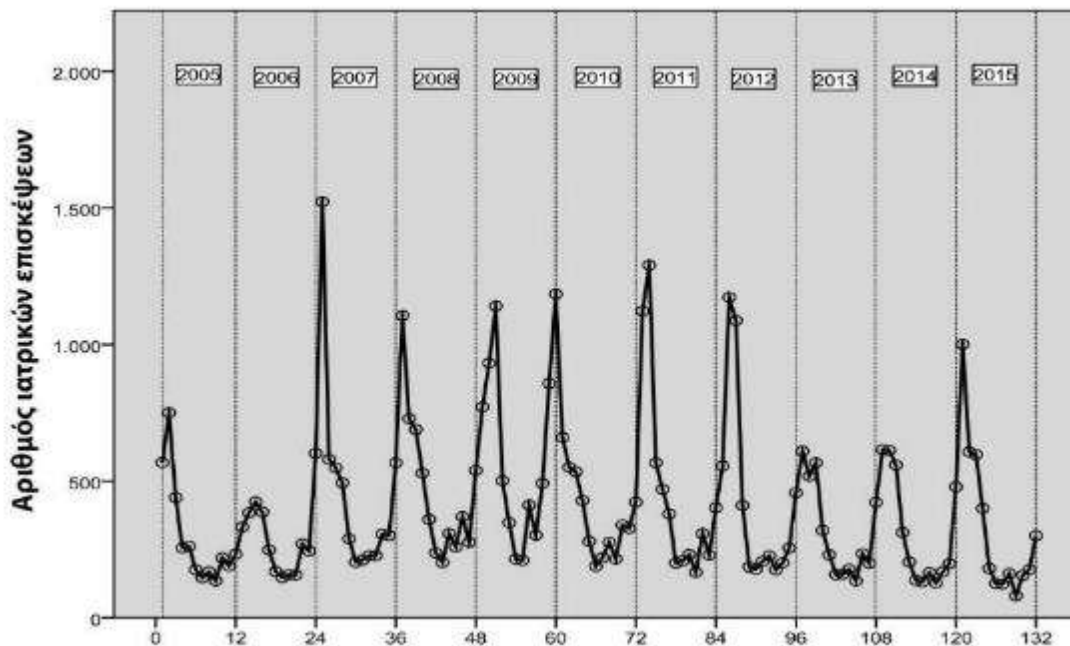
Κατανομή των ιατρικών επισκέψεων εντός της ημέρας

Ο μεγαλύτερος αριθμός εμφανίζεται στις 11 το πρωί



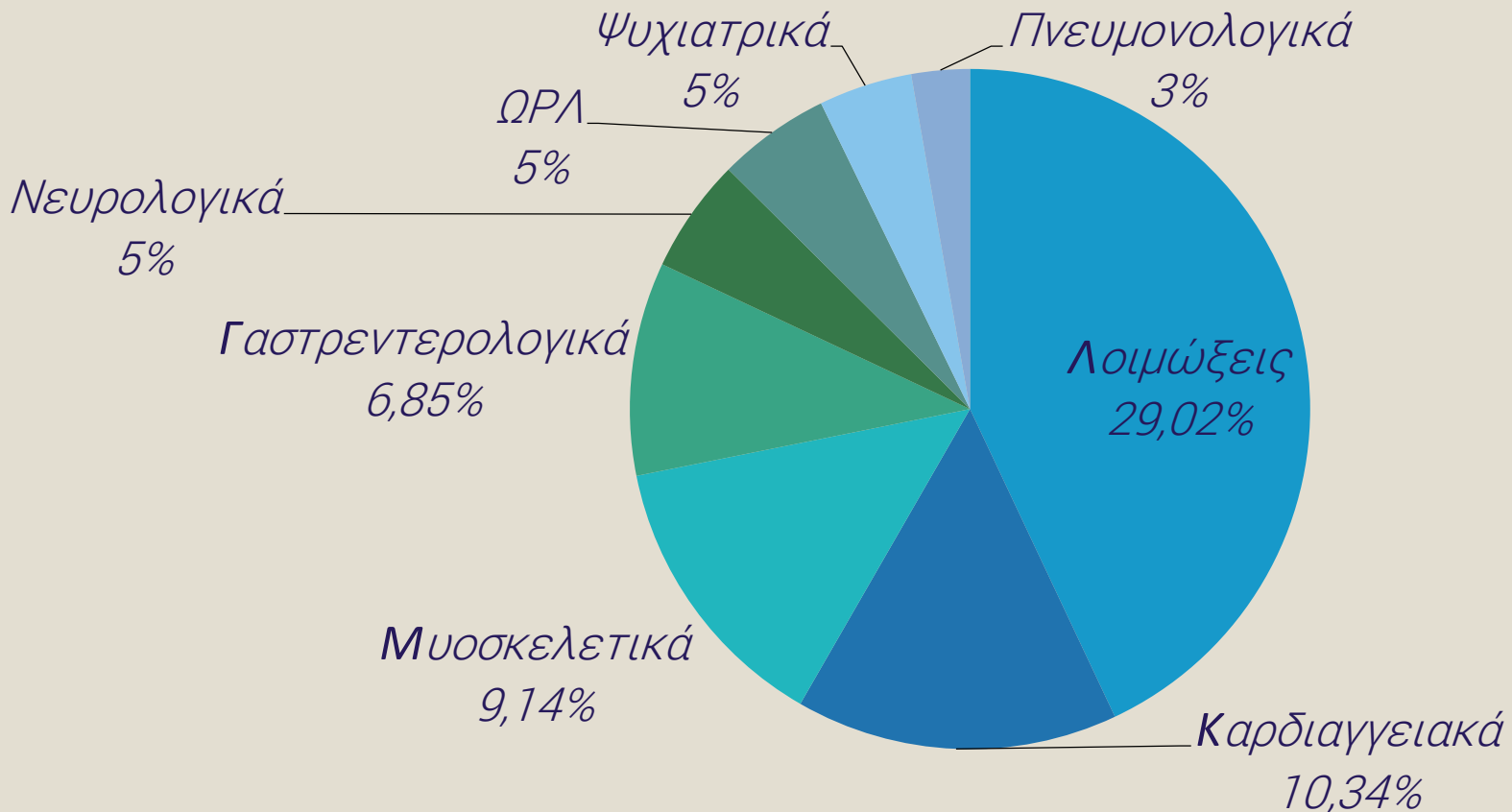
Κατανομή των λοιμώξεων αναπνευστικού (δραστηριότητα γρίπης) κατά τη διάρκεια της περιόδου μελέτης

*Κάθε χρόνο καταγράφεται αύξηση των λοιμώξεων
του αναπνευστικού (γριπώδης συνδρομή),
συνήθως την περίοδο από τον Ιανουάριο έως τον Μάρτιο*





Τα συχνότερα οξέα νοσήματα κατά τη διάρκεια της μελέτης





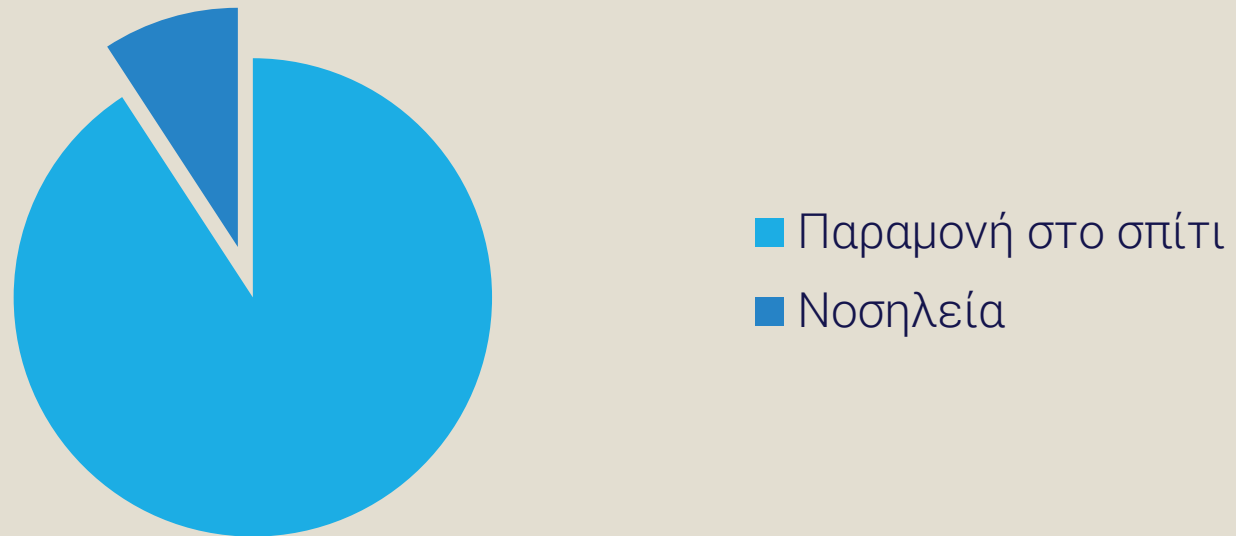
Κατανομή επισκέψεων κατά τη διάρκεια της μελέτης





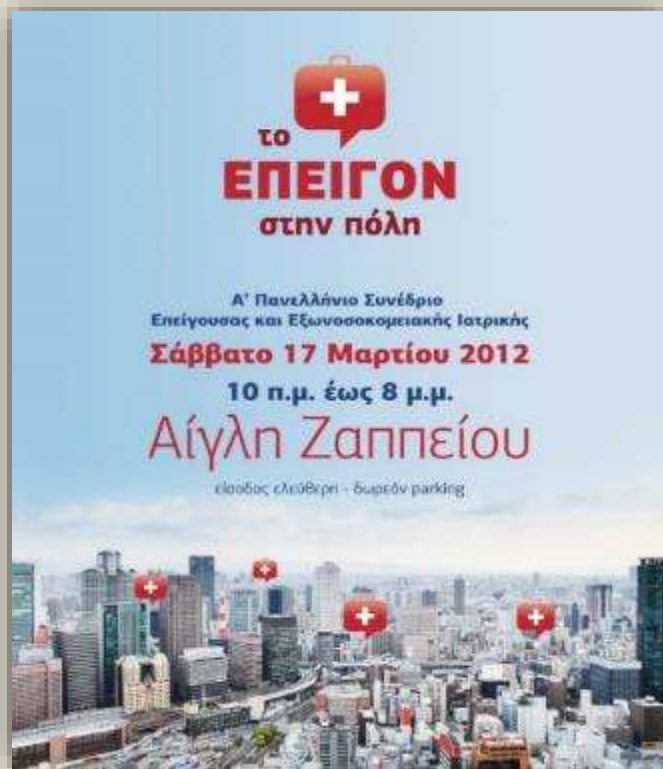
Πόσοι ασθενείς χρειάστηκαν μεταφορά στο Νοσοκομείο

- ✓ Μόνο το **9,2%** των ασθενών χρειάστηκε μεταφορά σε Νοσοκομείο

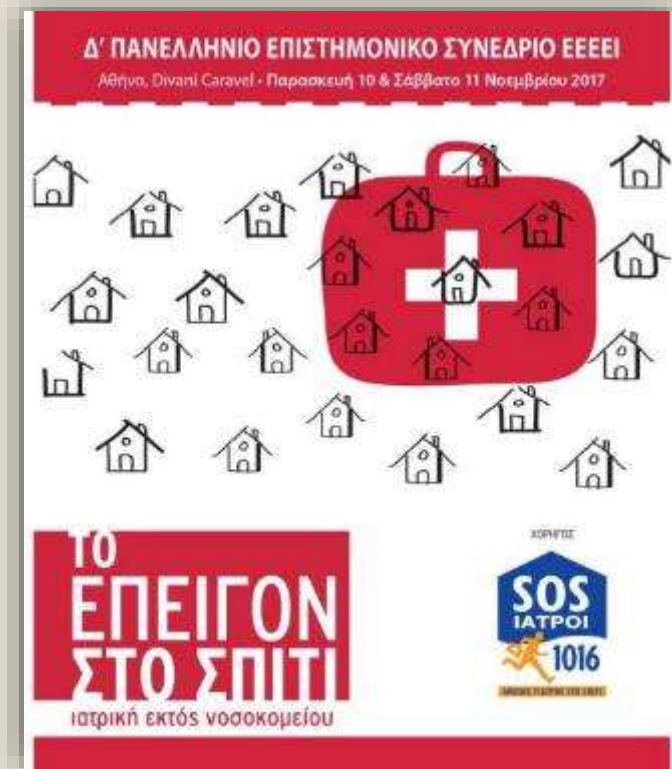




Τα Συνέδρια



[πρώτο]



[πρόσφατο]