

ANZSGM Statement on Climate Change and the Health of Older People

About the Australian and New Zealand Society for Geriatric Medicine (ANZSGM)

The ANZSGM is a society of medical practitioners engaged in the practice of Geriatric Medicine or related disciplines. Membership of the Society is open to registered medical practitioners who demonstrate a commitment to clinical practice, research, education and administration in Geriatric Medicine and allied specialties and to those undergoing training in these fields.

Acknowledgements

The development of this Position Statement has been led by:

Dr Paul Yates FRACP PhD, Consultant Geriatrician

Dr Kristen Pearson FRACP, Consultant Geriatrician

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Position

The Australia and New Zealand Society for Geriatric Medicine:

- Accepts the scientific evidence on climate change and its impact on human health and human wellbeing,^{1,2}
- Accepts that increased carbon dioxide is the largest single contributor to human-induced climate change,¹
- Recognises climate change as a key public health issue,^{1,2}
- Accepts that the healthcare sector contributes significantly to carbon emissions, waste and pollution,²
- Advocates for policies to protect human health from risks of climate change at local, state, national and international government levels,
- Considers it important for geriatricians to understand and communicate the causes, health risks and consequences of climate change as well as mitigating actions and adaptation to climate change at individual and population levels.

ANZSGM is calling on the governments of Australia and New Zealand to:

- Adopt mitigation targets within a national carbon budget,
- Promote the health benefits of addressing climate change,
- Develop a National Strategy for Health and Climate Change,
- Promote an active transition from fossil fuels to renewable energy,

- Establish a National Sustainable Development Unit to reduce carbon emissions in the healthcare sector.

ANZSGM endorses the RACP Climate Change and Health Position Statement and stands alongside RACP and calls on the Federal Governments of Australia and New Zealand to recognise climate change as a public health emergency and introduce legislation in accordance with the science.

Background

The world's climate is changing in ways that will pose significant and increasing threat to health worldwide.³ The evidence implicating human influence on the changing climate system has grown and is now clear.² Increased carbon dioxide is considered the largest single contributor to human-induced climate change³ and greenhouse gas emissions in particular are extremely likely (95-100% probability) to have been the dominant cause of the observed warming since the mid-20th century.² Increased levels of carbon dioxide in the atmosphere, and the resulting increased heat, are altering planetary systems, including ocean circulation, prevailing winds and cloud cover.³

Climate change affects human health directly, indirectly and through societal responses. For example an increase in morbidity and mortality due to higher temperatures and heat waves, particularly among vulnerable groups such as elderly people and those with pre-existing cardiovascular and respiratory diseases.² The indirect impacts of climate change result from interactions of climate with other systems. Examples include declining agricultural yields and quality caused by drought, resulting in poorer nutrition despite higher caloric intake; and changes in the distribution of vectors that spread infectious disease caused by flooding. Socially mediated impacts of climate change may include conflict, migration, and damage to livelihood from droughts or cyclones.²

Air pollution and climate change are inter-related. Air pollution includes particulates and chemical in ambient air and has an adverse effect on human health, contributing to respiratory and cardiovascular morbidity and mortality (estimated to contribute to 3,000 deaths annually in Australia). Air pollution exacerbates climate change and vice versa⁴. Major sources of air pollution, particularly in Australia, include burning of fossil fuels, exhaust from vehicles and bushfires – each of which also contribute to climate change.

Australia and New Zealand

Vulnerability to the impacts of climate change depends on geographic, social, economic and biological factors. Overall, climate change will increase inequality, as people with fewer material, social and health resources will be more vulnerable to the adverse impacts of climate change.

Australia and New Zealand are both vulnerable to the adverse health impacts of climate change. In Australia there is already a noticeable impact from increased frequency and intensity of bushfires, floods,

dust storms, drought and extreme heat, biodiversity decline, and reduced quality and increased salinity of fresh water.⁵

As a result, Australians are already seeing higher rates of respiratory illness⁶, diarrhoea⁷ and morbidity requiring hospital admission⁸ during hot days, and higher rates of suicide in rural areas during drought years.⁹ New Zealand residents face increased ambient temperatures, shifts in rainfall, rising sea levels, erosion, scarcity of freshwater and increased flooding.¹⁰ These effects are predicted to worsen in the coming years, unless urgent action is taken.^{11,12}

The impact of climate change on older people

The health impacts of climate change are mediated by environmental exposures such as ambient heat, air pollution, storms, floods, reduced water quality, reduced food production, increased food spoilage, and change in disease vectors.^{13,14}

Older adults are particularly vulnerable to changing environmental conditions due to medical co-morbidities, altered homeostasis and physical limitations. Heat stress and dehydration affect elderly people more severely, as thirst response is blunted, renal function already impaired and concurrent medications may exacerbate effects. Prevalent respiratory and cardiovascular co-morbidities make older people vulnerable to exacerbations of disease related to air pollution. Physical disability is more common in elderly populations, rendering them more likely to suffer injury or death in situations such as bushfire or extreme weather events.

Some older people live alone and/or have reduced social support networks such that early deterioration in health, for example from heat stress, may be detected late with resultant increase in morbidity and mortality. Cognitive impairment further compounds these issues and delirium is a serious manifestation of physiological stress. The most frail elderly, living in residential aged care, are susceptible to outbreaks of disease via food spoilage, contaminated water or viral illness.

Responding to climate change – the role of ANZSGM

Facilitate provision of evidence-based education and resources for geriatricians and other aged care health professionals which communicate the causes and public health risks of climate change and the mitigating actions and adaptation to climate change at individual and population levels.

- Advocate for environmental and health policies which specifically protect and promote the health of older people protect human health from risks of climate change at local, state, national and international government levels.
- Support climate policies and action along with aligned organisations including RACP and AMA/NZMA
- Support a research agenda to study health effects and impacts from climate change upon older individuals and populations.

References

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