

LETTER TO THE EDITOR

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How Argentina is training their mental health residents to face its Silver Tsunami?

In low- and middle-income countries, there is an increase in the percentage of aging population similar to or greater than that of high-income countries (World Population Ageing 1950–2050, UN, 2001). The emerging health and economical challenges due to these demographic changes will have to be addressed by their health systems. In this context, an adequate training of available human resources in geriatric psychiatry/psychogeriatrics (GP/PG) should be an essential step to meet those challenges.

Two surveys, done in 1994 and 2002 respectively, were conducted to assess training in GP/PG of Mental Health Residents in the City of Buenos Aires Training Scheme (CABAMHR). Both of these surveys (which included 80% of CABAMHR) showed serious shortcomings in quantity and quality of training in GP/PG, as well as worrying levels of ageism (Bustin *et al.*, 2003).

Twenty years later, we conducted an anonymous cross-sectional survey online during the period from August to September 2014 to physicians and psychologists who were part of the CABAMHR during that year. We use the same multiple choice survey that was used in 1994 and 2002 in order to observe the current situation and compare.

A total of 198 emails were sent obtaining 100 answers (50.5% of the total population).

Regarding GP/PG theoretical training during medical school, 77.2% of the respondents reported not having received it and only 10% of those who had received it were satisfied with the quantity and quality. In total, 83.2% reported not having received GP/PG clinical training (direct contact with patients) and only 6% of those who received it were satisfied. During residency training, 58.4% of the respondents reported having received GP/PG theoretical training on the subject, with 23% qualifying it as adequate and sufficient. Regarding clinical training, 63.4% reported having received it, but only 24% of them considered that it was adequate and sufficient.

Residents of the first two years reported having received less theoretical formation (48%

vs. 83%) and clinical practices on GP/PG (55% vs. 83%) than residents in the third and fourth years. Regarding prejudices and feelings about the care of elderly patients, more than 40% of residents characterized the mental health problems of this population by the need to be treated in nursing homes, lack of response to pharmacological and psychotherapeutic treatments, and economic difficulties related to retirement. A total of 31% of CABAMHR reported looking after the mental health of older adults during their residency.

In summary, this new survey demonstrated that we are still lacking adequate training of CABAMHR in GP/PG. As in 1994 and 2002, the majority of CABAMHR have reported that they do not receive an appropriate training in those topics and, alarmingly, almost 1/3 of them were caring for older adults even with high levels of prejudice and nihilism regarding the care of this population. The lack of GP/PG training would be even greater in the first two years of residency, the time on which the preferences to care for this population would be especially determined (Rej *et al.*, 2015). Although this situation is similar to that found in other places (Lepetit *et al.*, 2014), in low- and middle-income countries like Argentina, it represents an unforgivable waste of resources and opportunities.

Conflict of interest

The authors have no conflict of interests to declare.

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