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George Christodoulou

The Address of the EAPE President

by **George Christodoulou**,
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OCTOBER 2025

Athens, 29.10.2025

Dear Friends and Colleagues,

With my previous month's letter to you I expressed the hope that at last Peace will come back to our world and Europe. I also forwarded to you our Position Statement on "Preservation of Peace" (see below). I would certainly be accused of having delusions of grandeur if I dared to say that peace in the Middle East was achieved as a result of our Statement! Yet, it is with great relief that all of us witnessed the peace agreement. Let us hope that it will last.

Turning now to our matters in the EAPE, we had three wonderful sections' webinars during last month, on the relationship of Medicine and Music, on Artificial Intelligence and on issues related to the Young and Old-olds.

On October 30, 2025, 3.00 pm, Rome time, our section "The Elderly in our Society" organized an interesting and ambitious webinar.

Our 4th EAPE Congress, an Anniversary Congress to celebrate the 10 years of productive existence of our Association will take place on 11-13 June 2026.

The Congress will be hosted by the National and Kapodistrian University of Athens that has provided its auspices to the Congress.

The Opening will be held at the Aula in the evening of the 11th June and in addition to the inevitable greetings and talks there will be a musical performance organized in collaboration with the Department of Musical Studies of our University. The scientific program will run at the Ioannis Drakopoulos Amphitheatre of the University. Free communications will be presented electronically during the three days of the Congress.

Please let me have any ideas you may have about the Scientific Program. I will be happy to discuss them with you at my personal email, which you can see below.

With cordial regards to all,

George Christodoulou

EAPE President

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POSITION STATEMENT OF THE EUROPEAN ASSOCIATION OF PROFESSORS EMERITI

ON PRESERVATION OF PEACE



War has a catastrophic influence on humanity. It steals life, health and hope. It destroys economy, nutrition and ecosystems. But, its effects on infrastructure and economies cannot be compared to human suffering.

On an individual basis it produces short term and long term psychological trauma like Post-traumatic Stress Disorder (PTSD) depression and anxiety. In children it produces emotional dysregulation, disruption of attachment as well as cognitive and behavioral problems. Additionally, parental trauma can influence offspring stress.

On a social level it destroys societies from within, produces displacement and forced migration that creates a multitude of problems to victims but also to host countries, causes disruption of social fabric and inter-group violence.

The story does not end with termination of war. The trauma of war persists through transgenerational trans-mission of stress and thus robs future generations. These effects have been highlighted in the Athens Anti-war Declaration (2016).

In view of the above and having considered that in the present historical period the drums of war and destruction are becoming more and more loud,

WE, THE MEMBERS OF THE EUROPEAN ASSOCIATION OF PROFESSORS EMERITI DECLARE THE FOLLOWING:

1. We perceive it as an ethical obligation to raise our voice on a matter that threatens the fate of mankind.
2. Having spent all our lives in education at its highest level and graced with professional and human experience and wisdom arising from academic conscience and ethics, we raise our collective voice to CONDEMN WAR and appeal for PEACE.. We cannot remain silent. Not only humanity but the whole living world on earth is in danger of total catastrophe.
3. Our appeal is by no means motivated by political or ideo-logical considerations and we will not allow its misuse to serve such purposes.
4. In this moment of mounting global strife and widespread human suffering, we call for an immediate cessation of all wars - in every land, under every flag, by all sides. No geopolitical considerations can justify human-made disasters and the destruction and suffering associated with them.
5. We urge all leaders - political, military, religious and cultural - to act. How? By resisting armed conflicts and by stopping the existing ones. If they remain indifferent it is as if they agree with what is currently happening and its future perspectives.

Editor's Corner

The Burning Silence – Just a Fable?

G.-Andrei Dan, Professor Emeritus of Medicine, Romanian Academy of Scientists

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Editor in Chief



G.-Andrei Dan

Once upon a time, there was a quiet forest where all the animals lived in peace. Among them was a diligent little Squirrel, who spent her days gathering acorns, hazelnuts, and seeds, always content with the fruits of her labour.

But the Bear, large and powerful, had become accustomed to attacking her often, stealing her food without shame. At first, he would take just a few hazelnuts, but soon he wanted more and more. One day, the Bear growled:

“From now on, all your food is mine. You are obliged to give it to me. ”

Terrified, the Squirrel ran to the Lion, king of the forest, and pleaded for his protection. The Lion listened calmly, then said with a cunning smile:

“I will help you... but in return, I want half of your food. After all, my kindness must be rewarded. ”

With tears in her eyes, the Squirrel no longer knew what to do.

Meanwhile, the Fox, who had been watching everything from the shadows, rubbed her paws with satisfaction:

“Now is my moment, ”

she whispered to herself.

“I will gather surplus food from all the animals and sell it back to them, promising my protection from the shadows. This way, I will become richer than ever. ”

But deep in his dark burrow, the Badger – who hated all the animals and lived in isolation – began to roar with rage:

“I want everything for myself! I declare war on the entire forest! ”

And so, the Badger began attacking the animals, biting and tearing apart everything in his path. The forest, once peaceful, became filled with screams, chaos, and blood.

High up on a dead branch, a Crow watched with cold black eyes. He flew to a nearby human settlement, picked up a burning ember, and dropped it among the dry leaves of the forest floor. Flames erupted, engulfing the trees, while thick smoke rose to the sky.

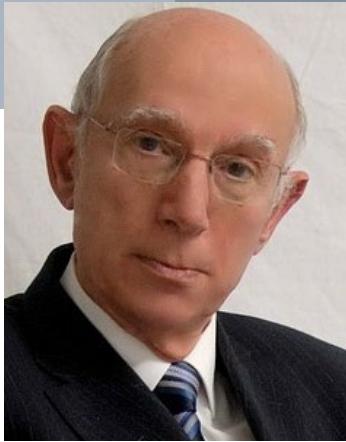


When the fire had consumed everything, the wind blew gently through the charred stumps and twisted trunks. The forest was quiet once more.

But there was no one left to hear it.

Moral

*When greed, pride, and fear unite,
And those with power demand their price,
Destruction becomes inevitable.
The crow only carries the ember –
The fire is born within them all.*



Dennis Cokkinos

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Introduction to an article by Professor Stella Priovolou

Very recently, on April 14th 2025, UNESCO established 9th February as the *Hellenic language World Day*. I must point out that the Greek language hails from the 15th century BC as witnessed by its identification in the Linear B tablets. As a physician, I want to point out two Linear B words that are still being used today.

i ja te	iater-ιατρός-iatrogenc
pa ma ko	φάρμακο Pharmaceutical

This accomplishment has a strong connection with EAPE and Professors Emeriti in general. The President of the European Association of Professors Emeriti of the University of Athens and Founding Member of EAPE, **Stella Priovolou**, played a fundamental role in this effort. She has written a very pertinent article on this subject in the respectable Greek newspaper "To Bima" (the step).

In addition, Professor Emeritus George Babiniotis, past Rector of the University of Athens, a leading linguist, undertook, together with Christos Klairis, Professor Emeritus of General linguistics of the University of Sorbonne undertook—apparently very successfully—the final report to the Executive Council of UNESCO. I believe and hope that in this era of global retreat of literacy, the Hellenic language will prove valuable in safeguarding the legacy of World Civilization.

The article of Professor Stella Priovolou is provided below:

Our language has become a world language. The strife towards a National success story.



Prof. Stella Priovolou

The executive Council of UNESCO after the initiative of the permanent representative council of Greece in this foundation, with a major role played by the representative of Greece, ex minister George Koumoutsakos unanimously proclaimed February 9th, the day of the

death of our national poet Dionyssios Salomos, as the World Day of the Hellenic Language.

The text of this decision was prepared in collaboration with Professor Emeritus of linguistics and past Rector of the University of Athens George Babiniotis and Professor Emeritus of the University of Sorbonne Christos Klairis.

- a. The following reasons are offered for this decision. Uninterrupted continuation of 40 centuries oral and 35 centuries written tradition
- b. The unique cultural contribution of this language, as regards word wealth, grammar, syntax. Employment by unsurpassed leaders of literature, poetry, theatre, philosophy, politics and science.
- c. Universal presence in many languages and influence in the most important languages and mother tongues.
- d. Constant and inexhaustible source of world scientific vocabulary.

It should be noted that the country that initiated interventions to UNESCO for this endeavour was Haiti, historically the first country worldwide to recognize the Hellenic Revolution and Greece as an independent state.

Moreover, Haiti as soon as it ended its own war of liberation, although economically ruined sent to the very prominent Greek philosopher and herald of Hellenic Liberty, Adamantios Koraes, 25 tons of coffee to be sold at auction so that weapons would be purchased for the Greek war of Independence.

Such a success demanded vision and content efforts during which I had already made references in this column. This Initiative for the dedication of such a day goes back to 2014, through the inspiration of Professor John Korinthios, who since 1979 teaches modern Greek language. In the University of Eastern studies of Naples and Calabria. He became the pioneer of the establishment of the world day of the Hellenic language. He activated the classical Lyceum and the Hellenic communities of Napoli and Campania.

The Prominent Literary Foundation of Parnassos, in order to support this common effort honored G. Korinthios and proclaimed him as its honorary

member. Then the president of the Hellenic Republic Katerina Sakellaropoulou awarded him the *Golden Cross Society of Honour*.

I had the pleasure of meeting J. Korinthios in Italy while there for studies and genuinely admired his inspiration and zeal for the teaching and dissemination of the Hellenic language abroad. This inspiration encouraged him to achieve a vision, the establishment of the World Day of Hellenic language and civilization. Many university professors from Greece and abroad participated in these efforts. I remember our discussions about the selection of the date and we concluded on the day of the death of our National Poet Dionysios Solomos (1798-1857), who had nothing else in mind "apart from freedom and national languages".

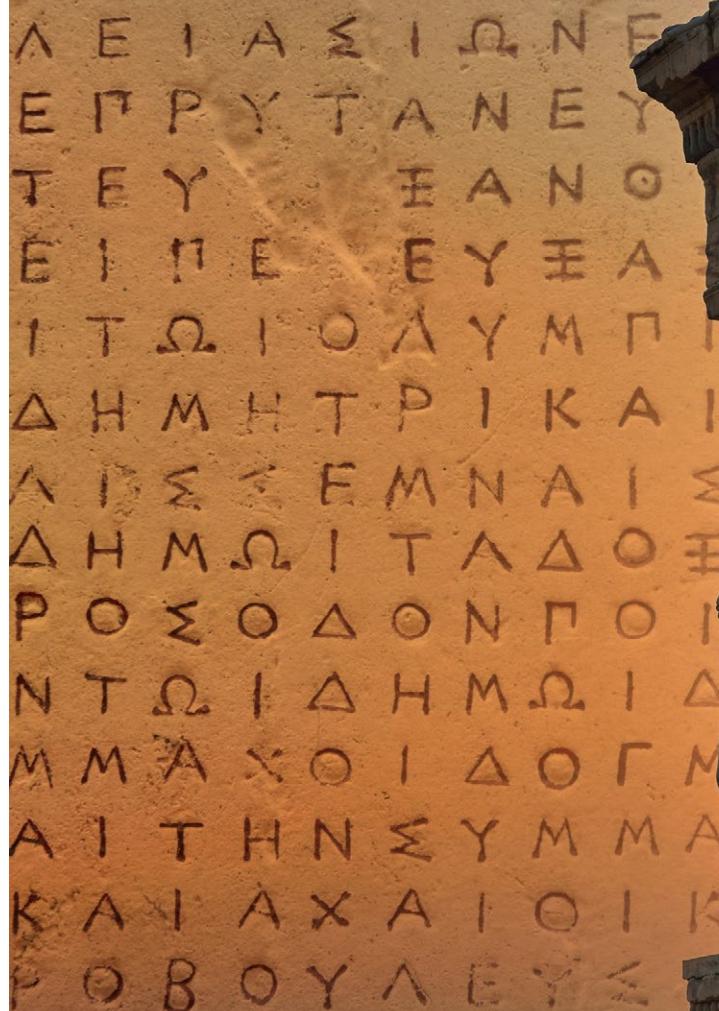
The first ray of hope came in 2017 with the proclamation from the Greek parliament of the 9th of February as world day of our language. Eight years have gone by, and this year the great event materialized in the city of Napoli which completed 2500 years since its foundation. In this city, for 10 years the World Day of Hellenic language is being celebrated. On this occasion a great celebration was organized in association and through the support of the Chair of Hellenic Studies and the support of the Chair of Hellenic Greek diplomacy through the untiring efforts of our permanently Representative in

UNESCO. This great millstone was finally achieved on April 14, 2025, 11 years after this initiative. It is great success.

I express my congratulations to all factors of this achievement. This success is a challenge to realize the value of our language, respect its prestige and proceed to further enhance the actions that contributed to this success.



The national poet of Greece, Dionysios Solomos (1798-1857)





The Church of Santa Maria Assunta
Frascineto, Italy

Frascineto 2024 World Day of Older Persons

October 1st 2024,
EAPE Event at Frascineto, Municipality of Migrants in Southern Italy

Different Ways of Aging:

**Professors emeriti at the University of Calabria,
the elderly who cannot speak of Didier Eribon
and the aged migrants, mentors of arts and crafts
custodians of the Calabrian cultural heritage**

Angelo Catapano¹; Caterina Adduci²; Giuseppe Trebisacce³; Natale Gaspare De Santo⁴; and Pantaleone Sergi⁵.

¹ Mayor of Frascineto; ² Cultural Policy Delegate of the Municipality of Frascineto; ³ Former Professor of Pedagogy, University of Calabria at Rende; ⁴ Emeritus Professor, ⁵ Migration Center University of Calabria at Rende.

Correspondence: Angelo Catapano - Email: protocollo@pec.comune.frascineto.cs

Frascineto, Calabria, Southern Italy

Frascineto (Frasnita in Arbëreshë) is a Calabrian municipality of less than 2,000 people (1). Frascineto, historically a territory of migrants, hosted for the second time, the EAPE event for the World Day of Older Persons. The event was organized by Angelo Catapano (the Mayor), and by Caterina Adduci (Cultural Policy Delegate of the Municipality). Both have been recently reconfirmed in their roles and functions at recent elections. The event took place in the Auditorium of the Comprehensive Institute "E. Koliqui", with relevant participation of students, professors, citizens and eminent local people.

The Mayor illustrated the experience of the Municipality of Frascineto at the time of the covid pandemic. At that time the Municipality experienced a model to protect the life of elders by caring for transporting eatables and drugs from shops and pharmacy to the home of citizen. The Mayor also explained that at Frascineto two clubs for aged men and women flourish with the support of the municipality, so the elders can meet and socialize and also have the possibility to elaborate on their needs. He also explained that the Municipality has got the economical support for the recovery plan of all important historical places of Frascineto.

Caterina Adduci, a lady with great interest in keeping alive the historical roots of Frascineto explained that the municipality has focused the interest in a program to avoid, minimize the loneliness of the Elders who are the keepers of the memory.

The Statute on Emeritus Professors of the University of Calabria, a model for Europe³

"I feel honored of this invitation of Professors De Natale Gaspare De Santo and Pantaleone Sergi. I am a retired professor of Pedagogy at the University of Calabria at Rende. My university founded in 1972 in 2024 has more than 800 professors (75 of them in the World's Top 2% scientists) and 27,000 students (4700 new registrations).

I am not a professor emeritus or even an honorary professor and, therefore, according to current case law, I am no longer even a professor. I do not have Emeritus status, because none of my departmental colleagues made the proposal, and they did not make it, it may be because they did not consider me worthy of such recognition, but also and especially because they knew that I was resolutely opposed to any proposal. It was my intention to take my leave of the University on tiptoe and without fuss, after having served it for 50 years (I joined it at the age of 22 as a scholarship holder), three decades of which as a full professor (including the three years as extraordinary professor), during which I held various institutional, academic and research positions at the University level, as well as nationally and internationally.

Although I am not interested in the prestigious title, I have great respect for this figure, deserving distinction for the original contribution of scientific, didactic order made to the Academy, and present in almost every university in the world.

At the university of Calabria the Statute on Emeriti has been changed after the introduction in Italy universities of the departmental system

1. Catapano A, Adduci C, Ferrari T, Ferraro U, De Santo NG and Pantaleone Sergi. The 2023 International Day of Older Persons celebrated at Frascineto, Calabria, Southern Italy. *Bull Eur Assoc Profs Emer 2023; 4(3):62-63*

(2012). The last formulation is dated February 3, 2021 (Presidential decree no.168) It consists of 10 articles, I will refer to the articles that make the University of Calabria at Arcavacata a model for Europe.

Art. 5. Concerns the research activity of emeritus and honorary professors.

They can continue their research activity in the Department of their last affiliation and can assume the scientific responsibility of research projects, financed by public and private bodies, and receive compensation for the work carried out according to contracts stipulated with the Department.

Art. 6. Concerns teaching activity.

Once the institutional tasks have been assigned to the permanent professors, the emeriti and honorary professors can have a free teaching assignment, authorized by the Rector with the stipulation of a regular contract, and be part of and chair an examination commission.

Articles 7-8,

are related to the participation in the meetings of the bodies of which he was a member, before retirement, without the right to vote, and the use of the Department spaces for a two-year renewable period for Honorary Professors and a four-year renewable period for Emeritus.

Article 9,

concerns other prerogatives, such as participation in commissions for the awarding of grants and scholarships for projects for which they are responsible, or in tender commissions within the projects for which they are responsible.

From personal and direct experience, I can attest that, even if there is not great interest and ambition among colleagues in obtaining this recognition, that of Prof. Emeritus remains a figure of prestige and reference in the Italian academic tradition and constitutes an incentive for the betterment of university, an institution that is increasingly worthy and deserving its role of higher education.

Additional note: From 2009 to today, the University of Calabria has awarded the title of Professor Emeritus to 34 professors, the majority belonging to scientific faculties".

The excluded old age of Didier Eribon⁴

Didier Eribon in 2023 has written a book (2, 3) on the final time of the mother (*Life, old age and death of a popular woman*). The mother, one of the people, who had done many jobs in life, never enjoying particular comforts, had become the widow of a husband who

had ended up in an Alzheimer's clinic and had kept him company by going every day to visit and comfort him.

At a certain point, very advanced in years, having refused to live with one of her children, she made the choice to live in a medical nursing home in Fismes, a converted former hospital, also beautiful, in white stone and red bricks.

On admission, the doctor informed the writer that "Elderly people who enter a nursing home are in danger for the first two months. A very serious danger is represented by slipping syndrome"..."the shock of uprooting is so strong that many people cannot bear it and die shortly after that radical and irreversible transformation."

From the nursing home suddenly, the mother began to complain and protest "My mother called me in the evening, at night. She told me that they forbade her to move, that she could no longer take a shower, that no one came when she pressed the call button... she was cold and no one went to close her window, she got dirty and no one went to clean her or change her diapers."

The mother died. She had spent "only seven weeks in that structure before passing away".

In retrospect the writer has the opportunity to learn that the slipping syndrome consists of "a refusal to fight and to deploy all the energy necessary to survive" (4).

"We can talk about the profound immorality of this system. Fundamental rights are violated".

Residences are total institutions that cut off from the world. Unlike prisons, it is a "definitive place of residence, and sometimes for a very short period, since death puts an end to this imprisonment"..."depersonalization causes a person to no longer be a person"..."my mother is not he could no longer tolerate a diminished life... he chose to let himself die".

The writer questions philosophical conceptions and political theories on the issue of old age and bitterly realizes that old age is excluded. And he concludes: "If philosophy and the theory of politics participate in the exclusion of old age, in the relegation of elderly people, developing concepts that give them no place or space... then we are forced to ask ourselves a series of essential questions that can thus be summarize.

"First: any social theory, any political theory that wants to be critical and emancipatory must ask itself: can older people speak?

And then, if this doesn't happen, if they don't speak, what can we, what should we do to make sure it is known."

2. Eribon Didier, *Vie, vieillesse et mort d'une femme du peuple*, Paris, Flammarion, 2023

3. Eribon Didier. *Vita vecchiaia e morte di una donna dl popolo*. Roma, L'orma Editore, 2024

4. Schilder JCM, Overmars SS, Marinus J ^a, Jacobus J. van Hilten JJ, Koehler PJ. ^b The terminology of akinesia, bradykinesia and hypokinesia: Past, present and future. *Parkinsonism & Related Disorders*, 2017; 37: 27-35



The elderly leaving Calabria mentors of arts and crafts and custodians of the cultural heritage⁵

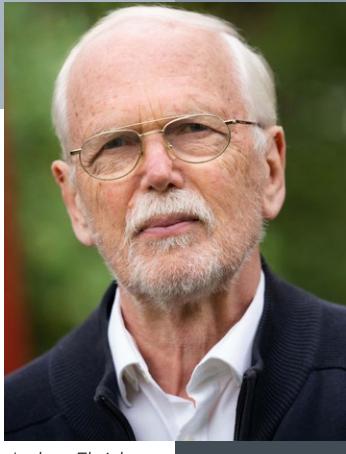
Addressing the theme of transoceanic migrations, having been working on the topic for years, Pantaleone Sergi focused on the role that the elderly played in the migratory waves that involved hundreds of thousands of Calabrians. Because of migration municipalities in Calabria emptied out, whole families left, and while many of the elderly on the one hand represented a burden, others - the most - were an important resource for rebuilding a life in the new world.

The elderly, in fact, were an important support for their families, since, although advanced in years, they contributed in different ways to facilitating settlement and family support as bearers of ancient knowledge. In addition to passing on their experience and "culture of doing" to their grandchildren especially, they were therefore useful in training the new generations, to whom they granted what we would now call "mentoring," in learning arts and crafts. And they were, finally, custodians of the "cultural" heritage brought from Calabria and

jealously guarded, passing it on not only in the circle of their own family but of the entire community that was being reconstituted in a foreign land. Thus, they became "the wise men" of the community.

They assumed a central role. The elders, more than the parents, engaged in work, who passed on to the younger generations the language and culture of their fathers, including the peasant culture. A striking example - the speaker explained - is that of the Albanians speaking community from Calabria that established in Lujan, Argentina. Just as the Albanians who fleeing their land centuries ago rebuilt their villages and communities in Calabria, so did the Albanians of Calabria in South America who were forced centuries later into another exodus for different reasons but still related to survival. Thanks to the wisdom and commitment of the elders, families long maintained (and in part still maintain) customs, traditions and language. And this was no small thing.





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Carole-Lynne Le Navenec

Between TABOO

"You shouldn't talk about child sexual abuse"

and TOTEM

"You have to talk about it":

How can Child Abuse be Prevented?

Part 2 - Addendum

PART 1, as well as an Editorial piece referring to it, were published in the previous issue of *Bull Eur Assoc Profs Emer*, 2025; 6(1): 01-48.

TABLE 1	
List of risky places, institutions and organisations for children and young people	
1	Religious and not religious institutions.
2	Kindergartens and schools.
3	Sports clubs and other training grounds.
4	Holiday camps.
5	Children's homes and orphanages.
6	Healthcare institutions.
7	Foster families.

TABLE 2	
Offenders and victims: Cascades of intergenerational child abuse	
1	A paedophile perpetrator chooses those victims throughout his life, who are unable to defend themselves and receives no support from his/her family.
2	Offenders often seek anonymity in order to achieve their goal. Anonymity is not an end in itself, but a means to achieve other goals such as paedophile gratification (7).
3	An unknown number of paedophile perpetrators may never be identified.
4	Some of the paedophile perpetrators go to jail, others may commit suicide.
5	Some of the victims become silent observers of the wicked scenario, suffer and remain silent.
6	Some of the victims become silent sufferers and, as adults, become abusers themselves.
7	Some of the silent victims become as adults fighters against child abuse.
8	Some of the victims commit suicide as teenagers or adults.

TABLE 3**Roots and causes of society's lack of attention to child sexual abuse, which may be related to the normalization of human behaviors that should not be considered normal**

1	Gradual desensitization. Emotional reactions diminish over time. The boiling frog syndrome. If putting a frog in boiling water, it jumps out. If putting it in cold water and gradually heat it up, it stays in and gets cooked.
2	Social normalization. Type 1. Society accepts behaviors that were once considered harmful. Type 2. Accepting habits of past generations that had been declared harmless, for example physical and psychological punishment in schools that had previously been regarded as a necessary part of education.
3	Social conformity: People adapt their behavior over time, especially in their workplace (group think).
4	Moral disengagement: The Canadian psychologist Albert Bandura described the cognitive process by which people justify harmful behaviours such as spilling TV violence onto the streets, inducing social media abuse.
5	Normalization of deviance: Things happen without obvious negative consequences if they are normalized within a group or wider society.
6	Cognitive dissonance: This happens when people can't solve the conflict between what they think is right and what is happening in their group.
7	Disconnection from reality: Disconnecting from reality and using terms such as "collateral damage" leads to catastrophe.
8	Euphemistic labelling by lies and fake news (terminological inaccuracy). For example, there is a variety of sexual abuse that needs to be treated differently in society.
9	Parents don't listen to their children or don't believe them.
10	Parents are not familiar with the role of behavioural signals in stressed children ranging from acute sleeping disorders, bed wetting to chronic psychosocial growth failure and mental disorders.

TABLE 4**List of selected arguments and feelings of witnesses of child abuse who seem to be standing by uninvolved**

1	Fear.
2	Shame.
3	Frustration.
4	Lack of civil courage.
5	Unconscious alliances, pact of denial and the perverse pact function (8).
6	The risk of destroying the institution involved.
7	Blunting of bystanders to collective aggression due to habituation to depictions of violence in the media.

QUESTIONNAIRE TO BE ANSWERED BY CHILDREN AND ADOLESCENTS**A. Your affiliation to organizations and institutions**

1	Are you part of a religious community (Christian religions or others)? If yes, is your participation in the religious community of support to you? No, yes, or don't know. If yes, please specify:
2	Are you part of a non-religious spiritual community ? If yes, is this participation in a non-religious community of support to you. No, yes, or don't know.
3	What level of school education do you have? Please specify
4	Have you finished school, and do you attend vocational training ? No, yes, or don't know.
5	Are you participating in competitive sports (football, soccer, hockey, swimming, gymnastics, other?) No, yes, or don't know. If yes, how often per week do you have sports? Enter number of days. How many hours per day? Enter number of hours:
6	Are you a member of other organisations which are run by adult people (e.g. boy scouts, vacation camps, volunteer fire brigade other?) Yes, no, or don't know. If yes, please specify:
7	Are you a member of peer group led organisations (computer games, other? Yes, no, or don't know. If yes, please specify:

B. Your experiences and feelings

8	Did you ever feel any imbalances/weaknesses/negative changes of your body, mind and spirit , e.g. disturbances of growth, pubertal development, fatigue during sports, sleep disorders, anger, fear, reduced learning capacity, cognitive limitations such as handicaps of hearing, visual, muscular, skeletal or nervous systems? No, yes, or don't know. If yes, please specify:
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9	Would you like that your doctor will address spiritual issues such as your bad feelings/sadness/unhappiness which are negatively affecting your well-being? No, yes, or don't know. If yes, please specify:
10	<p>Stress, shame and burn out. Did you experience very shameful moments in your life such as to feel left alone, to be badly treated, or to be abused? Enter no, yes, or don't know. Did you experience a burn out? If yes, please specify the cause: If yes, how often did it occur? How does stress manifest itself physically and emotionally? Please specify: Are there specific triggers for your stress? Please specify: To whom can you speak when you are suffering from stress and shame? Please specify:</p>
11	<p>Fear. Are you afraid of people that surround you? No, yes, or don't know. If yes, please specify: If yes, please specify: afraid of a. adults, b. peers. Did you explain your fear to other people? No, yes, or don't know. If yes, please specify: If yes, please specify: to a. adults, b. peers.</p>
12	<p>Complicated communicational relationships. How do you perceive your relationship with your trainers, teachers, priests, doctors, nurses and other therapists? Please specify or write don't want to answer. How do you perceive the adults' relationship with you? Please specify or write I don't want to answer. Did you ever get the feeling of being severely and inadequately hurt by adult people, thus loosing your inner balance, self esteem and dignity? Please specify or write don't want to answer.</p>
13	<p>Red flag. Did you ever want to show a RED FLAG to anybody in your community? Yes, no, or don't know. If yes, please specify:</p>
14	<p>Child abuse. Do you think that the disaster and tragedy of child abuse (physical, psychological and sexual) must be more urgently addressed? Yes, no, or don't know. If yes, please specify why you come to this conclusion:</p>
15	Do you think that totem poles/warning signals should be placed in front of organizations and facilities that are at risk to become places of child abuse? No, yes, or I do not wish to answer. If yes, please specify:
16	Did somebody else help you in filling in this questionnaire? No, yes, or I don't want to answer. If yes, please specify:





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Childcare throughout History

The term "pediatrics" comes from two Greek words, "pais", which means child, and "iatros", which means doctor and healer. So, this term is supposed to mean a healer of children (1). Today, we define pediatrics as a branch of medicine that deals with children from birth to adolescence. We can say that pediatrics is the medicine of the developmental period. The development path of pediatrics as the medicine of the developmental period is very long. Pediatrics has its roots in ancient Egypt, China, India (Sanskrit), as well as in ancient Jewish scriptures (the Bible). The oldest records of pediatrics are found in the Ayurvedic texts "Sushruta Samhita" and "Kashyapa Samhita" from the 6th century BC.

In ancient times, Hippocrates, Demosthenes, Philalethes, Soranus, Aristotle, Celsus, Galen wrote about childhood diseases. They emphasized: "Ex toto non sic pueri ut viri curari debent" (In general, boys should not be treated in the same way as adult men), i.e. they understood that an organism that grows and develops requires different treatment (1).

In the Middle Ages, a whole series of Arab authors, Avicenna, Averroes, Maimonides, Serapion and others, described childhood diseases and connected Greco-Roman and Byzantine medicine. The Persian scholar and physician al-Razi described many childhood diseases, including measles and smallpox (1).

From the later Middle Ages, we must mention the Italian Paul Bagellardi and his work "Libellus de aegritudinibus infantium ad remediis" published in 1472 in Padua, the Germans Bartholomew Metlinger, H. von Louffenburg and the work "Pediatric Incunabula" published in 1491. The Englishman Glisson (1597 - 1677) described rickets (2).

Throughout history, children were not given special care, especially not health care as we understand it today. Changes have occurred in the last 300 years. The condition for this was social changes,

the development of science and the understanding of child development.

In the 17th and 18th centuries, the child was seen as a miniature, imperfect adult who grew and matured under the care and guidance of his parents. The number of doctors at that time was small and only the wealthier class of people could afford medical care. Sick children, as well as sick adults, were cared for by family members to the best of their ability. Unsanitary conditions led to high morbidity and mortality among children. Childhood illnesses were so common that only 50% of children lived to their 5th birthday. In fact, illness and death in early childhood were almost inevitable. Due to the terrible poverty, mothers often abandoned their newborns, infants, and toddlers. This led to the establishment of orphanages. The high mortality rate in these homes became an interest for some doctors who wanted to help children. It was documented that children were wrapped very tightly in three to four layers of clothing. Few children were breastfed. Children were fed with boiled bread with sugar or with thin bran, already one hour after birth and then 10 times a day. Various spices, wine and beer were added for taste (3).



Alexandra Orphanage, Haverstock Hill, London.

1. Wikipedia – <http://en.wikipedia.org/wiki/Pediatrics>

2. N. L. Buford, A. Balabriga, N. Kretchmer, History of Pediatrics 1850-1950, Raven Press, 1990.

3. M. L. Thompson, Pediatric nursing, Springhouse Corporation, 1995.

The industrialization of the 18th century resulted in the emergence of the proletariat. Parents sent their children to work in factories in order to improve the economic situation and life of the family, and in factories children represented cheap labor, so they were welcome. However, great physical and mental exertion requires terrible morbidity and mortality of older children. In the second half of the 18th century, the first institutions serving exclusively children were opened. In such institutions, poor mothers received free advice and medicine, and home visits to a sick child were also possible. The first dispensary ("Dispensary for sick children") was organized in 1769 in London by doctor George Armstrong. In the German-speaking area, the first such institution was in Vienna, in 1788, founded by Johann Joseph Mastalier (2). However, these are only the beginnings of children's health care, which only developed in Europe more than 100 years later to such a degree that it could be separated from other branches of medicine, finally from internal medicine, from which it developed.

During the 19th century, reception centers for inpatient treatment of people or hospitals were organized. Children and adults were placed in the same wards. Since many children had infectious diseases, the spread of infections was a regular occurrence. Gradually, in order to stop the spread of infections, children began to be separated from adults. The first hospital intended exclusively for sick children was founded in 1802 in Paris. In that year, the French state transformed the orphanage "Maison de l'Enfant Jesus" into the "Hopital des Enfants Malades" hospital, which played a very important role in the development of pediatrics and was the cradle of modern pediatric surgery. This was followed by the opening of children's hospitals across Europe, in 1830 in Berlin the Pediatric Pavilion of the Charite, in 1834 in Saint Petersburg, in 1837 in Vienna. From 1850 to 1879, 67 children's hospitals were opened across Europe (2).



Hopital des Enfants Malades, Paris (1802)

The realization that children's illnesses differed from those of adults helped to establish hospitals for children. In the mid-19th century, a trend began to promote a homely atmosphere in hospitals, encouraging parental participation in the treatment of children, children had their own toys, and nurses and doctors did not wear uniforms. During the 19th century, the care of a sick child changed dramatically again. Scientists discovered more and more bacteria as pathogens. In order to prevent infections, hospital wards were closed to visitors. Hospital treatment was aimed at treating organic disease and preventing the spread of the disease to the surrounding area, while very little attention was paid to the psychological and emotional aspects of the disease.

In the 20th century, pioneering research by R. Spitz and J. Bowlby led to changes in the hospitalization regime for sick children (4, 5). They found that separation from mothers during first year produces irreparable psychosomatic damage to normal child. In 1970, J. Robertson, investigated the effects of hospitalization on young children (6). He found similar behavioral patterns, even in relatively short hospitalizations, and divided them into: protest, despair, and denial.



In response to increasing knowledge about the emotional effects of illness and hospitalization, health policy regarding child health care slowly changed during the second half of the 20th century.

Pediatrics has undergone many important changes and advances in the last 50 years, especially in terms of diagnosing, treating and preventing childhood diseases. Key advances have been made in the areas of vaccination and the development of new

4. E. J.M. Bowlby, Attachment: Volume One of the Attachment and Loss Trilogy, July 1997.

5. R. A. Spitz; Hospitalism - An inquiry into the genesis of psychiatric conditions in early childhood: Psychoanalytic study of the child, 1945.

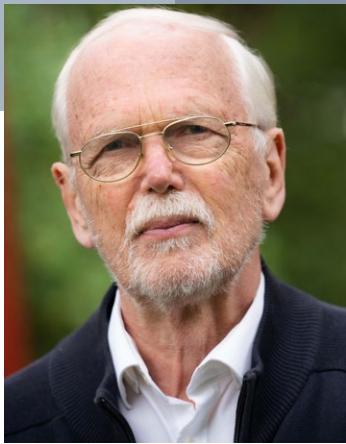
6. J. Robertson, Young Children in Hospital; 2nd Edition, Tavistock, London, 1970.



vaccines, in intensive care and neonatal care, pediatric surgery, prevention, management and treatment of chronic diseases, psychosocial care and mental health. With the humanization of hospitalization and the permitted visits and stay of parents in the hospital, the way of communication in hospitals has also changed. For each procedure, pediatricians talk to the parents and the child, everything is explained and the parents sign a consent for the procedure. With these changes, pediatrics has become even more focused on the holistic treatment of children, which includes the physical, psychological and social aspects of their health.

In the 21st century and the coming years, with the use of artificial intelligence, various new technological methods and digitalization, new and rapid progress is expected in the field of all medical sciences. This raises questions that touch on the ethical foundations of our profession and the healthcare of children and adolescents. In this regard, it is also necessary to have some legal frameworks, such as the United Nations Convention on the Rights of the Child.





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Can Love, Eros, and Sexuality in Older People Benefit from Logos and Sophia?

Background

In 2017, we published an article (1) entitled "Back to experience: retired professors of pediatrics as a solution to the crisis in European healthcare for children?" in the EAPE brochure on human capital in old age. In my new article, I would like to continue this line of thought by asking and answering the question of how the creativity of love, Eros, and sexuality can be protected in old age, especially among healthy, lonely, and chronically ill women and men, by involving retired professors from EAPE. I would like to encourage old people to recognize their own defence mechanisms and obstacles in relation to sexuality, not to judge them, but instead to ask: How can I understand the complexity of sex, and what is it good for (see Table below)? Michel Foucault (2) wrote in his book "Histoire de la Sexualité" that Europeans in the 19th and 20th century did not gradually liberate sexuality, but rather created it as a discussed object and made it an excellent space for experiencing the search for the truth of its existence. Today, this is still the subject of a necessary debate. I firmly believe that we must break down taboos, misguided approaches and reductionist thinking regarding sexuality among older people.

TABLE

Where should more case studies on sexuality, aging, and well-being be conducted that could explain the entire history of the influence of Logos and Sophia on love, Eros, and sexuality in old age?

1	Very few studies focus specifically on older people with a high intellectual or academic background (i.e. retired professors) and how their wisdom has shaped their sexuality or erotic love.
2	Longitudinal case studies that follow older people (especially retired scientists) over a longer period of time are rare.
3	Cultural differences have been less well studied in Europe, particularly with regard to traditions relating to aging, shame, and eroticism.

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- Ehrich J, Nwaneri D, De Santo NG, Manemann J (2017) Falling back to experience: retired paediatric professors as a solution to Europe's child health care crisis? In: The Human Capital of Age. Bonavita V et al (eds) La scuola di Pitagora editrice, pages 63-96.
- Foucault M (1976) Histoire de la sexualité. Gallimard

Aims

My intention is to search the literature for answers to the question of whether love, erotic feelings, and sexuality in older people can benefit from insight, reason (Logos) and wisdom (Sophia). Or, in our modern society, which worships the concept of eternal youth, are sexual activities in old age traditionally replaced by undesirable biological and cultural regression? This brief overview is a synthesis of philosophy, sociology, psychology, and medicine. It is based on systems theory, semiotics, and spirituality. The aim is to transform our concern for ourselves into a masterful art of being that is considered natural and reasonable and aims at the pure joy of our self. Because of the lack of space, this article is focusing on heterosexual love. However, love, Eros, and sexuality among LGPTQ people are a very similar topic but with additional challenges such as lack of social acceptance or other special factors such as promiscuity. Furthermore, interacting aspects such as pornography, prostitution, sex therapy, and the controversial role of social media are not covered in this short article.

Love and Eros

Love is a complex spectrum of all kinds of intense communications, not just a single emotion. It promotes a narrative of desire, pleasure, lust and satisfaction of subjects who shape themselves—through self-awareness, self-knowledge, and ethical practices—in order to develop an identity. This process is dynamic and represents a form of exercising power that has both repressive and productive dimensions.

The complex spectrum of Eros is also wide-ranging, extending from innocent fantasies or comedies to dirty thoughts and shows. Eros included also the exercise of power and thoughts of submission and unfortunately violence. In conclusion Eros is a stimulating borderline experience with oneself and with other people.



Sexuality

Complexity of all sexual activities is neither accurately reflected in our everyday language, nor in pornography and social media. This statement applies even more to the age-specific sexuality of older people. Published qualitative data is not so scarce and not limited to sexual intercourse (3). The results of quantitative demographic data vary from country to country. This diversity can be attributed to cultural idiosyncrasies and differences in surveys, questionnaires, and response rates among more or less embarrassed test subjects. Systematic reviews of qualitative studies have shown that the sexual behavior of older adults, especially women, has changed for the better in some European countries in recent years, although certain stereotypes regarding beliefs, subculture, and tradition still exist today that have a negative impact on the sexual activity of older adults. Not only age-related biological changes and diseases but also psychosocial complexities are causes of suppressed sexuality. These are loneliness, widowhood, separations, a disabling disease of the partner, poor quality of partnership, lack of self-esteem, and bad environmental influence. For instance, the influence of historical tradition means that some old people's views of sexuality are already so deeply ingrained that it can be rather impossible for them to change.

Terms

Semiotics encompasses the study of concepts, their meanings, and their communication. Semiotics is often regarded as a science with important anthropological and sociological dimensions, and every cultural phenomenon can be studied as verbal communication, even if it may be embarrassing and shameful.

Asexuality is a sexual orientation in which a person feels little to no sexual attraction to other people. Asexuality is not a choice: Just like other sexual orientations such as homosexuality, asexuality is not a conscious decision or a condition that can simply change. The percentage of men and women with asexuality increases with age however, imprecise statistics differ according to the complexity of the roots, causes and long-term effects. Asexuality is on the rise and loneliness is the main root cause in Germany. A third of all elderly Germans live alone at home. Asexuality is not an illness and is not synonymous with abstinence from all erotic feelings. Asexual people may still experience various forms of attraction, such as romantic, aesthetic or sensual attraction, but these do not lead to a desire for sexual activities. Asexuality differs from voluntary abstinence, as asexual people do not feel sexual attraction. Celibacy is based on a conscious decision to abstain from sexual activity. Both asexuality and

celibacy can be interpreted differently by religious and non-religious spirituality. Some people may limit celibacy to sexual intercourse with a partner. For other people it can mean abstaining from all sexual acts, including masturbation.

Solitary sexual activity such as **solo masturbation** is a free, safe, and accessible way to experience sexual pleasure. Despite these advantages, the qualitative and quantitative effects of masturbation in later life are highly understudied. Fisher et al. (4) reported in 2021 that the proportion of 60-75 year olds who had masturbated in the previous month in four different European countries ranged between 40-60% for men and between 30-40% for women. Generally, those men and women believing that sex is beneficial to older people were more likely to masturbate.

Sex lives of older women seem to be a taboo subject in those societies, which are geared towards eternal youth. Women often experience ageing with a continuous decline in their sexual appeal after menopause, which is not correct. In my opinion, there are too few sophisticated studies on female sexuality in later old age. Questions about individual sexual experiences and sexual needs, such as sex toys, sexual pleasure during vaginal or oral sex, and the occurrence and frequency of orgasms, were seldom asked. However, it can be stated that, on average, sexual interests and needs are maintained in old age, and women remain sexually pleasurable and orgasmic into old age, although a decline in libido and sexual activity with increasing age seems undisputed.

The main endpoints of **sexual activities of old men** are orgasm and ejaculations during solo masturbation or sexual intercourse with a partner. However, these endpoints are less frequently achieved at old age. Relatively few older men were using erection medications like Viagra. In Germany it was less than 10%. Since Viagra does not stimulate libido, one might conclude that fear of erectile dysfunction could become the main problem for sexual activity in old age. If older people cannot find their own solutions for their sexual health and appropriate forms of sexuality, there is a risk of interpersonal friction in their relationship. What may be the role of unfulfilled expectations, of frustration due to lack of sexual desire and last but not least of feelings of loneliness during sex? To what extent has the majority of old people intuitively adjusted to an age adequate life style with a new balance of love, Eros and sexuality? In fact there are so many ways of sharing attraction, feeling aroused by body massage and cuddling, thus moving away from the genitalia to the whole body.

Spirituality of sexuality views sexual energy as a powerful force that can be channeled for personal health, intimacy, and a deeper connection

with oneself and others. The concept of spiritual sexuality suggests that both can be interwoven, thus enriching all aspects of life. Last but not least I regard conscious sexuality for old people as a helpful tool to cope with loneliness, involving mindfulness during sexual experience, and paying attention to the sensations, emotions, intentions and disease associated limitations involved. Developing emotional maturity and self-awareness is important for navigating the complexities of sexuality and intimacy. Sexual satisfaction correlates positively with the quality of life of people.

Eros, in its essence, represents a powerful, creative life force that includes more than just sexual desire. Eros is a dynamic force driving individuals towards wholeness, connection, and the pursuit of the good, often manifesting in love, passion, and creativity. The influence of Eros extends to various aspects of human experience, including relationships, intellect, culture and philosophical issues.



By contrast, an **“amour fou” or toxic love of old people is a love affair** that is perceived as “obsessive” due to its intensity. Even more serious than the intensity of the feelings themselves is the fact that the people affected may already be at such an advanced age and find themselves in situations where they could harm themselves or others by acting out their feelings.

Conclusions

When asking myself the philosophical question if there is a role of reason and wisdom in practicing sexuality at old age, my answer was: ‘Yes’. Following the sexual revolution among women at the end of the 19th century and the sexual revolution among young people in the 1970s, a new form of sex education for older men and women could become an important part of healthy aging at the beginning of the 3rd millennium. This new approach to sex education could herald a new era of enlightenment, offering a spectrum of sexuality that can be individually tailored according to the needs and wants. Michel Foucault (2) was right when he wrote that sexuality must be liberated from everything. I conclude that above all the exercise of psychological power and physical violence during sexual activities must be strictly prohibited. In addition, I conclude that the influences

of advanced age, health status and health culture on sexuality should be studied more intensively through complex systems thinking. All academic disciplines must be involved and not only health care clinicians and sex therapists. Sexual behavior is part of our Western culture and differs from other continents. The grade of diversity between different European countries should be systematically studied by multidisciplinary teams. Many of the sexual practices that older people have accepted out of habit seem to be less the result of scientific findings and more the result of cultural prejudices that are detrimental to people’s well-being and health rather than beneficial.

Appeal

The search for appropriate semantics for open and trustworthy discussions about sexuality among retired professors from various disciplines could form the intellectual basis for a new enlightenment about sexuality in old age and, not least, for the liberation of female pleasure from male violence. More than 50 years after the publication of Simone de Beauvoir’s (5) book “La vieillesse”, her question remains: Can the entire system of ageing and the demand for change ultimately only be radical in order to change life?

The philosophy of progression and regression in the context of ageing means observing our very own experience of “going beyond”. Fearful observation of the own dying body functions will cast shadows on love and Eros. Focussing on the end point of unavoidable regression and death will reduce resilience in old people, especially when there is no life goal left, but only a vague perception that seems to block their healthy ageing. Could old people learn to understand their mental standstill, resistance and regression as a moment of learning, in which coherence penetrates consciousness?

I doubt that declining sexual activity at old age is biologically and neurologically related to increasing or decreasing intellectual or moral strength. On the contrary, I conclude that logos, reason and wisdom are very strong strengths of older people, which could enrich their lives with love, stimulate their erotic fantasies and successfully guide their own sexuality until the end of their lives.

We need to have faith in the future. The Austrian novelist Stefan Zweig (6) wrote in 1929: ‘The future will be different, that is certain. The woman of tomorrow will care little about what people of yesterday and today wish or demand of her, for she has a development to complete: it is the final liberation from male-dominated morality.’



5. Beauvoir S (1970) *La vieillesse*. Gallimard.

6. Zweig S (1981) *Zeit und Welt*. Fischer, page 78



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"Tempus edax rerum" (time, devourer of all things)

Ovidius, Metamorphoseon Libri XV

Lost Traces* Series:

*These series intend to put in the right light great human values lost in oblivion because of the erosion done by time and human weakness. Bulletin's readers and collaborators are very welcome with ideas or papers

Episode 4: The Impossible Dilemma**

**This time, the vanished traces led me toward another expression of human value, one often forgotten in this age of haste: the power to understand and to accept what lies beyond ourselves. A true story.

The young doctor usually passed rather unnoticed. She was of average height; her face was not unattractive, yet neither did it stand out—only her eyes, which always seemed to burn. She had always been that way: a discreet presence. She was among the few who had not found a sweetheart in high school, and instead of weekend dates she preferred to stay home and read. Old-fashioned, she liked the rustle of pages more than the clatter of a keyboard. Sometimes she tried to share her opinions with a colleague or a friend, but she usually gave up halfway through.

During the Medical School years she had earned good grades, though never the best—"you don't persuade, dear," one of her professors had told her. Residency had been the same... always present, always active, but never with the will to impose herself in any way. For two years she had been a young specialist in a large hospital, dividing her life between patients and books. Her patients adored her and sought her out, though she treated them no differently than she treated anyone else... only that she had a unique gift for listening, smiling, and understanding. One patient once confessed to her: "Miss, you're like the sigh I can't manage to let out."

One day a colleague from another department asked her to take care of a VIP "connection." The patient was a man from Great Britain of far Romanian origin, a fairly well-known writer in his country. The young doctor spoke English quite well, the Englishman spoke broken Romanian, so "you're the perfect doctor for him," her colleague laughed—then added, with sudden intuition, "you'll feel like you're in that movie (*The English Patient* a.n.)."

The English patient was still a handsome, imposing man despite being well into his seventies. His thinning hair mixed white with traces of black; his tanned face, aquiline nose, and sharp green eyes



Ralph Fiennes and Dame Kristin Scott Thomas from "The English Patient", directed by Anthony Minghella. Miramax Films, 1996. The film received nine Academy Awards, six BAFTA awards, and two Golden Globe Awards.

gave him an a priori professorial air. Unfortunately, he had advanced lung cancer, though he had gone from three packs a day to cigars ("to give fate a more gentlemanly air," he liked to say). It didn't take the young doctor long to grasp the grim truth of his condition, but almost disregarding it, she began asking him about his current feverish episode. With an amused look, the Englishman said in accented Romanian, "so you're my savior," then, obediently, continued his story in English.

The young doctor arranged a better private room for him (the head of the department liked her, though he didn't understand her) and made a few calls to speed up the necessary tests. Soon she established that a pneumonia had complicated his already grave pulmonary picture. She went to obtain approval for the antibiotics (at that time, "expensive" antibiotics required signatures from superiors) and told the Englishman she would return later for the evening rounds. She found him afebrile, exhausted, yet somehow relaxed.

"You came to save me?"

"Just so," she replied with a smile.

"And if I don't want you to?" he asked, scrutinizing her intensely.

Their conversation unfolded in a mixture of English and Romanian, the former predominating, blending randomly and unconsciously. The young doctor had told him that her calling was to save life, which she saw as the supreme gift. The discussion slid toward literary examples tossed from one to the other... *Doctor Zhivago*, Cronin's *The Citadel*, Dr. Yvarsen from *The Torrent*, Michael de Grey from *That Scandalous Summer*—all sprang briefly to life in the small disinfectant-scented room. Her colleagues would probably have been amazed at the young doctor's unexpected eloquence, but to the Englishman the conversation felt perfectly natural.

The next day the discussion resumed where it had left off.

"So, I MUST be saved because it is ethical to do so?"

"If you wish, yes... I have an oath to respect—not the one recited at the end of medical school, but the one within myself."

"You see, my dear, people are governed by several sets of laws, but the conditions for obeying them differ: break the laws of the state and you go to prison; break the laws of morality and society punishes you with scorn and rejection; but ethics establishes rules only within the profession to which it applies—and according to its particular nature."

"Agreed, which is exactly why the supreme ethical law for us is to save life..."

"Even when it can no longer be saved?" he whispered.

"There is always a resource... you can never be entirely certain the fight is lost. That is my greatest dilemma: what will I do when I no longer know what decision to make?"

"But everyone has his own conception of what he is—and is surely correct in that conception. I, for instance, am no longer myself if I cannot write, cannot smoke my cigars, and—you'll laugh—cannot ride my motorcycle from home to the University, as I do every day. In any other condition—say, pinned to machines breathing in my place—I do not see myself, I do not recognize myself."

"You will be doing all of those things again soon," she replied with a smile.

The Englishman recovered from the pneumonia and left the hospital in a few days, but between him and the young doctor a warm, almost conspiratorial bond formed—free of both the parental tone and the usual vibrations between a man and a woman. They spoke occasionally by phone (when he returned to Romania), and exchanged some letters with impressions about art and literature.

Less than a year later, the young doctor was called from home: "One of your patients wants to see you

and have you care for him." The Englishman was now in very grave condition... breathing with difficulty, speaking in whispers, and his pallor foretold the end. Only his eyes remained as piercing as before.

He whispered in Romanian, "You'll take care of things, yes?"

She smiled as always, though she felt her pulse rising past a hundred. She stayed at the hospital. During the night his condition became critical: his oxygen saturation dropped alarmingly, and his brief moments of consciousness were interrupted by stretches of unresponsiveness.

The young doctor had dozed off for what seemed a fraction of a second in the chair beside his intensive care bed when a faint touch woke her. He did not speak... only his deep eyes pierced her with an unspoken plea. She shook herself as if out of a nightmare, looked at the monitors, and called the team for intubation. The Englishman, indifferent now, passed beyond in the early hours of morning.

A year later, while visiting a book fair at *Dalles* (a well-known book exhibition hall), the young doctor recognized the name on a small volume titled *The Last Things*—a translation of the final short stories written by the Englishman. She picked up the book with an involuntary tremor and instinctively opened to a story called "The Release." As she expected, it was an almost faithful retelling of their conversations, in which she was called "my doctor."

The ending made her stifle a moan, and a tear fell upon the pages:

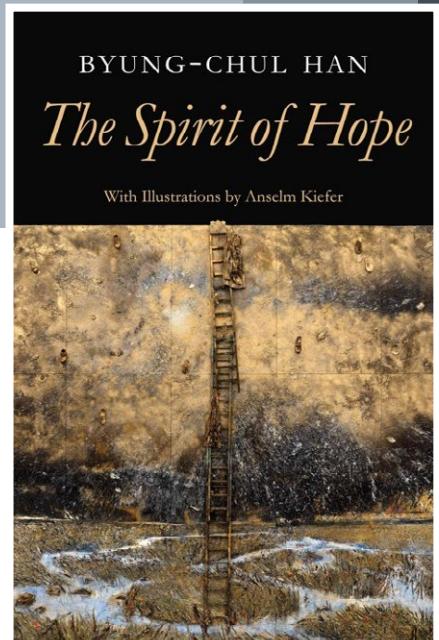
"Hers was the last woman's face I saw in this world, and likely the only one I will carry beyond..."

"I wish I could watch over her from the other side in all that she does with such devotion,

and tell her that the one decision that creates an impossible dilemma for a physician

is the decision not to intervene...and no true doctor is ever spared this terrible trial."





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Han B-C. *The Spirit of Hope*.
Translated by Daniel Steuer.
Cambridge: Polity Press 2024.

The Spirit of Hope of the Philosopher Byung-Chul Han

Byung-Chul Han, born in Seoul, South Korea in 1959, studied metallurgy at the local university. In 1980 he moved to Germany. There, he studied German literature and theology at the Universities of Freiburg in Breisgau and Munich, earning a doctoral degree with a thesis on Martin Heidegger (1994). Han later registered at the University of Basel for a PhD in philosophy. He has been professor at the University of Karlsruhe and the University of Arts in Berlin where he directed the *Studium Generale* from 2017 to 2022. The readers of the *Bulletin* know about Han's analysis of the present Western World, an analysis through his Eastern and Western culture (1).



His last book, *The Spirit of Hope* (Figure above), *Der Geist der Hoffnung: Wider die Gesellschaft der Angst* (2) (Left Figure), *Contro la Società dell'angoscia* (3) (Right Figure), nicely enriched by illustrations of Anselm Kiefer is preceded by a 1949 thought of the French Philosopher Gabriel Marcel (1889-1973) "Hope is a spring, it is the last leaping of a gulf".



"Hope is definitely not the same thing as optimism. It is not the conviction that something will turn out well, but the certainty that something makes sense, regardless of how it turns out. **"**

Byung-Chul Han

The book immediately links to Hesiod's Pandora and her unconscious curiosity inflamed by the subtle arts of Zeus. Pandora opened the jar. Sickness, death and many other unspecified evils were then released into the world. Only hope "expectation", was left under the lid.



Nowadays "digital communication isolates more and more people" and this leads to "loss of social coherence", there is no real

1. De Santo RM and Phillips ME. *The Palliative Society of Byung-Chull Han*. Bull Eur Assoc Profs Emer 2021; 2(3): 57-58.
2. Han B-C. *Der Geist der Hoffnung: Wider die Gesellschaft dr Angst*, Ullstein Verlag: Berlin, 1. Edition (27 Mar. 2024).
3. Han B-C. *Contro la Società dell'Angoscia. Speranza e Rivoluzione*. Translated by Armando Canzonieri. Turin: Einaudi, 2025.

union"... "There is no touching, we live in a touchless society... contact does not create closeness". "The relationship to other withers"... "The absence of attachment and touch deepens fear"... "Hope is a counter figure, even counter-mood, to fear: rather than isolating us, it unites and forms communities". Gabriel Marcel writes "I hope in thee for us".

In the prelude, hope appears immediately "a searching movement" opened into "what-is not-yet", "nothing comparable to optimism, that "requires no effort". Ernst Bloch wrote (*The Principle of Hope*) that "hope can be learned"... "it is teachable". But hope cannot be taught or learned in the way virtue can. In a climate of fear, there is no hope, fear represses hope".

In the chapter "Hope and acting" hope is seen as a generator of illusion. Even Camus wrote, "hope is evasion" and lacks the dimension of action (*The Myth of Sisyphus*). However, Fromm in *The Revolution of Hope* says that "to hope means to be ready at every moment for that which does not yet exist"... "Hope sharpens our sense for what-is-not yet, the not-yet-born that draws at the horizon of the future". "Without hope there can be no departure or revolution". For Nietzsche (*Daybreak*) "to hope means to be intensely prepared for what is to come".

Ingebor Bachman "elevates hope to a condition of the possibility of living. Hope represents the human condition as such. Hope is what guides human action, hope builds a bridge across the impassable, the abyss. Hope gives us orientation and a sure footing" (*Ein Tag wird kommen: Gespräche in Rom: Ein Portrait von Gerda Haller*).

Hope guided the action of Václav Havel who became President of Czechoslovakia. For Havel "hope is a state of mind... it is a dimension of the soul"... "it is not prognostication. It is an orientation of the spirit, an orientation of the heart"... "I feel that its deepest roots are in the transcendental" (*Disturbing the Peace: A Conversation with Kaarel Hvížd'ala*).

It is not without meaning if Orfeo invokes the goddess Speranza absoluta in order to travel through the hades (Claudio Monteverdi, *Orfeo: A Tale in Music*, beginning III act).

In the chapter *Hope and Knowledge* we learn that "Hope differs fundamentally from optimism. Amid absolute despair it raises me up again. The hopeful becomes susceptible to the new possibilities that in absence of hope, we would not even recognize. The spirit of hope inhabits a field of possibilities that exceed the immanence of the will. Prognostics make hope superfluous. The hopeful expects the incalculable, possibilities beyond all likelihood."

Finally in the chapter *Hope as a Form of Life* "The thinking of hope takes as its point of orientation... birth... coming-into the world... Hope is anticipation of a new birth. The fundamental formula of hope is the coming-into-the world of birth".

Comment

For the Merriam-Webster Dictionary, "hope is trust, reliance, desire accompanied by expectations or belief in fulfilment, someone or somebody on which hopes are centred, something hoped for".

Heraclitus of Ephesus (*floruit* c500 BC), in oracular language, wrote "if one does not hope, one will not find the unhoped-for, since there is no trail leading to it and no path" (*Fragment 18*). "When they [men] are born, they are willing to live and accept their fate [death], and they leave behind children to become victims of fate" (*Fragment 20*) (4).

For Thomas Aquinas (1224/25-1274), (*Summa Theologiae*, Vol. II, q. 40 a. 1), hope has four main characteristics, which he details: "Now in the object of hope we may note four conditions. First, that it is something good, since, properly speaking hope regards, only the good. Secondly, that it is future, for hope does not regard that which is present and already possessed... Thirdly, that it must be something arduous and difficult to obtain... Fourthly, that this difficult thing is something possible to obtain..." (4).

However, at the time of death hope is turned into desperation as in the case of the unforgettable hope (*Spes*) sculpted by Andrea Pisano on *formella 21* (tile 21) on the South door of the Baptistry of Florence where hope, although winged, waits sitted, and her arms, notwithstanding wings, are put up, like those of Tantalus, towards an unachievable fruit" (4,5,6).

For Maria Zambrano "Hope is a bridge". Maria Zambrano (4/12, 1904 – 2/4, 1991), a pupil of José Ortega y Gasset, discussed the roots of hope. "Hope sustains all events in life, trust sustains hope. Hope becomes available and evident during dejection and exasperation following events generated in the intimacy of someone being left to his own resources or imprisoned in a hopeless position when no exit exists. In that eventuality, by nurturing hope it is possible to find an exit even when an exit is not available. In that context the whole life is turned into hope which climbs over and clears the insurmountable hurdle. In difficult situations hope takes place, has a role. When life is going to give up, the earth comes in to rescue and sustain, even in the case where we do not appreciate it" (4).

Pope Francis (17.12.1936- 21.4.2025) on January 14, 2025 entitled his last book—originally written to appear posthumous—, "Spera. L'autobiografia /

4. De Santo NG. *What death is. A literary approach between fears and hope*. Ann Inst super Sanità 2014, 30: 249-265.

5. De Santo NG and Ehrich J. Comment on hope and resilience. In Ehrich J, Corrad F, De Santo NG, Eds. This is think should have priority in child health care service – The personal philosophies of people involved in child health care. Medizinische Hochschule Hannover 2016.

6. De Santo NG. Illustration of Tile 21, South Door of the Baptistry of Florence. Bull Eur Assoc Profs Emer 2023; 4(1), p.28

Hope: The Autobiography" (7,8). A spiritual testament. In the introduction we read: "we usually say wait and hope – thus in the Spanish vocabulary *esperar* (to hope) means both to hope and to wait -, but hope is the virtue of movement, is the engine of change, it is the tension that unites memory and utopia to truly build the dreams waiting for us"...

He added a lot in his last Homily read by Cardinal Comastri, on Easter Sunday the day of his last Buona Pasqua and last cattel call and hands shake on the Popemobile through Saint Peter Square. One should not forget that he had left the hospital at a time when there were problems about the prognosis since his state was critical, knowing that he would die, but at his home, in his bed, at Santa Marta, declaring "*passerò la Pasqua come posso/I will live Easter as I can*". So he decided to meet his people on Easter Sunday, shake their hands, caress them for the last time. In his sermon he said:

"The Jubilee invites us to renew the gift of hope within us, to surrender our sufferings and our concerns to hope, to share it with those whom we meet along our journey and to entrust to hope the future of our lives and the destiny of the human family".

*"We as Christians must know that hope does not disappoint! *Spes non confundit!* (Rom 5:5). That hope is not an evasion, but a challenge; it does not delude, but empowers us. On this day, I would like all of us to hope anew and to revive our trust in others, including those who are different than ourselves, or who come from distant lands, bringing unfamiliar customs, ways of life and ideas! For all of us are children of God!"... "I would like us to renew our hope that peace is possible!"* (9).

"Hope, on the other hand, is a gift and a task for every Christian... Hope is also a task that Christians have a duty to cultivate and put to good use for the sake of all their brothers and sisters. I said that hoping is a gift from God and a task for Christians. And to live hope requires a "mysticism with open eyes". "Let us train ourselves to recognise hope. We will then be able to marvel at how much good exists in the world. And our hearts will light up with hope" (9).

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Conclusion

7. Francesco con Carlo Musso. *Spera L'autobiografia*. Milan: Mondadori, 14 gennaio 2025.
8. Pope Francis. *Hope: The Autobiography*. New York: Penguin Random House, Jan. 14, 2025
9. Npr News, Accessed on April 24 2025 at <https://www.npr.org/2025/04/21/g-s1-61670/read-pope-francis-last-public-speech#:~:text=On%20this%20day%2C%20I%20would,us%20are%20children%20of%20God!>

Coming back to Byung-Chul Han and *The Spirit of Hope* it should be stressed that the illustrations of Anselm Kiefer meet the spirit of the book and add values. The English and the Italian translation are very accurate and stick to the original. Daniel Steuer and Armando Canzonieri deserve a special thank and mention. The notes are exhaustive, accompany the reader in understanding the details and the spectacular selection of the the words used for cites. We have been tempted to make lists of authors, works and words but have resisted to not deprive the readers of a personal fulfilling discovery.

The book has received a wide appreciation that is well deserved. Byung-Chull Han, the philosopher coming from far East, reveals his capacity to catch the spirit of European Culture and to revive it with his fresh, new and personal look. Yes is a truism. "the candor of a new gaze (that of science always is) can sometimes shed new light on ancient problems" (10).



George Frederic Watts, Second version of *Hope*, 1886
Tate Britain



10. Monod J. *Le hasard et la nécessité*. Paris: Seuil, 1970 (préface).

News

World Day of Older Persons Košice, 2024

by Oliver Rácz, Katarína Derzsiová

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The Košice World Day of Older Persons 2024 was dedicated to the theme "Vitality and Benefits of Physical Activity and Sport in Old Age". It was organised by Oliver Rácz, Katarína Derzsiová and Alena Buková at the premises of the Medical Faculty and the Institute of Physical Education and Sports, UPJŠ Košice on 30 September - 1 October 2024.

The WDOP 2024 Košice was a very successful event due to the variety of aspects dealing with the needs and possibilities of physical activity in old age and due to the participation of participants from Austria and the Czech Republic (In addition to experts from Slovakia, programme – attachment 1).

The first ceremonial session included a very interesting video about the 100-year history of the Peace Marathon in Košice (attachment 2, Fig 1).



FIG. 1: Seconds after the start of International Peace Marathon, Košice

In her introductory lecture Katarína Derzsiová (Fig 2) stated the main mission of WDOP, which is to direct the attention of the young generation to the growing aging of our population. She stated, that in 21st century it is a challenge to solve the needs of the aging population and create a world in which old people will live with dignity, will not feel discarded as unnecessary, will be respected and appreciated. It is important to prepare seniors for the digital world, which will enable them to participate into activities of modern society as citizens with full rights in social, economic and political fields. depending on their abilities, physical and mental state.



FIG. 2: The introductory lecture of Katarína Derzsiová

The second, professional part, consisted of six very interesting lectures on the main topic from the scientific and medical point of view (Figs 3,4).



FIG. 3, 4: The attendants of the WDOP 24 listening the professional lectures - Oliver Rácz discussing with his sister Katarína

The WDOP Košice event continued on 1 October at the Institute of Physical Education and Sports, moderated by Dr. Alena Buková, Head of the Institute, Katarína Ráczová, President of the Fair Play Club at the Slovak Olympic Committee and Barbara Fastner, National Coordinator for Fitness and Health Promotion, ASKÖ National Organisation, Austria (Figs 5,6).



FIG. 5, 6: Discussion with students about principles of Fair Play - Relaxation during students' competition in the sense of Fair Play principles

ATTACHMENT 1 - PROGRAMME

September 30

Session I (Social and Ceremonial)

- Derzsiová K.** Introduction and mission of WDOP.
- Peace Marathon in Košice, 1924-2024.** Video presented by **Margita J.**
- Ráczová-Lokšová K.** Presentation of Fair Play movement activities.
- Fastner B. (ÖSKA, Austria).** Presentation of 50 Tage Bewegung, project.

Session II (Professional)

- Zusková K., Borský P. (Hradec Králové, Czech Republic).** Movement for quality of life and mental health of seniors.
- Ukropcová B., Ukropc J. (Bratislava).** Regular exercise influences of metabolic and cognitive health and improves quality of life.
- Polan P. (Košice).** Sports activities after total hip and knee replacement implantation.
- Bužga M., Horká V., Holéczy P. (Ostrava, Czech Republic).** Streng training as prevention of sarcopenic obesity.
- Hagovská M. (Košice).** The importance of dual tasking in cognitive-motor rehabilitation in seniors.
- Vahovič M. (Humenné).** KAATSU - a pathway for maintaining physical fitness in polymorbid patients in the elderly.

October 1

Session III (Workshop for students)

- Fastner B.** Presentation of "50 Tage Bewegung" activities.
- Ráczová-Lokšová K.** The history and present state of fair play movement with examples.

THE WDOP Košice 2024 was finished by plays for students to show them the principles of fairness in sport.

ATTACHMENT 2

The short history of Peace Marathon in Košice

The International Peace Marathon (In Slovak Medzinárodný maratón mieru, shortly MMM) the oldest marathon competition in Europe, was founded a hundred years ago by the enthusiast Vojtech Bukovský, who watched this discipline at the 1924 Olympic Games in Paris. A few weeks later the first eight runners took to the start line on October 28. The marathon, which celebrated its centenary last year, is a showcase of Slovakia's relationship with sport, passion, determination and skill of its organizers.

In the following years the number of participants rose significantly as well as their performance. After 1948 this outstanding event was also a small open window from the communist isolation of the country to the free world.

In recent years there has been an explosion in the number of participants (recently over 10,000), together with the opening the competition for women and seniors, and the introduction of various other disciplines such as half marathon, inline and hand bike competitions and relays. The event is accompanied by different cultural and social programmes.

"One of the first steps we took this year was at the Olympics in Paris, where after a hundred years we stood in the places where Vojtech Bukovský stood," event director Branislav Koniar said at a press conference before the start of the 2024 event.



World Day of Older Persons

Košice, 2025

The mission of WDOP 2025

by Katarína Derzsiová

World Day of Older Persons is a global event dedicated to raising awareness of the challenges and various aspects of ageing. The day is dedicated to honouring the contributions of older people to society, love and admiration for seniors, who are a jewel of wisdom, experience and storytelling, for which we owe them our thanks. Storytelling and passed down from generation to generation teach us what to value and how to treat one another. The past WDOPs focused on different aspects of ageing through various annual themes. Each of the topics explored and discussed key issues important to older people. In 2025 the theme "Healthy and Inclusive Ageing" was devoted to the transformative role of older persons in shaping societies and highlights their valuable contributions in building resilient and sustainable societies. The theme of this year was created in response to the growing number of seniors in the world, to a rapidly aging global population.

The 35th United Nations International Day of Older Persons observed, under the theme "Older Persons Driving Local and Global Action: Our Aspirations, Our Well-Being, Our Rights." By celebrating the International Day of Older Persons, we wanted to draw the attention of the younger generation to the growing index of population aging, which is a challenge for the world of the 21st century.

As a sign of gratitude, the organizers in Košice dedicated the WDOP 2025 to the pioneer of Slovak surgery and the founder of Medical Faculty and the surgical school in Košice, to Professor Ján Kňazovický and his successors.



His Excellency, Rudolf Schuster, previous President of Slovakia in discussion with Ms. Katarina Derzsiová and Prof. Andrej Jenča

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RIGHT: The organizers of WDOP 2025 in Košice, Prof. Oliver Rácz, Prof. Jana Kaťuchová and Ľuboslav Beňa MD, director of Louis Pasteur University Hospital in Košice

The Big Four of the Faculty of Medicine at UPJŠ Košice

by Kňazovický M.

The lecture presented the historical background of the establishment of the medical faculty in Košice (the second in Slovakia) and the personalities who stood at its foundation. There are parallels with the American model of medical education — the Johns Hopkins University and its legendary "Big Four." The Slovak counterpart of the Big Four, was represented by Professors **Ján Kňazovický, Teodor Schwarz, Zoltán Klímo, and František Pór.**

From their life stories and professional achievements, the audience gained an integrated retrospection to the development of medical education in post-war Košice. The lecture emphasized their scientific contributions, teaching activities, and participation in the Slovak National Uprising. It also recalled the hardships of wartime, which paradoxically laid the foundations of higher education and modern medical science in eastern Slovakia.

The final part focused on the establishment of the Faculty of Medicine at Pavel Jozef Šafárik University in 1948 and its gradual growth. The lecture highlighted the importance of personalities who combined professional excellence with moral integrity and a clear vision for the future. Participants gained insight into historical connections that transcend medicine and reach into the cultural and social development of Slovakia.



The participants of WDOP 2025 in Košice



Symposium "Age and Health"

Sarajevo, October 4, 2025

by Academician Prof. Halima Resic

Email: halimaresic@hotmail.com



The symposium "Age and Health" was held at the Olympic Committee of Bosnia and Herzegovina. The organizers were the International Academy of Sciences and Arts in Bosnia and Herzegovina and the Olympic Committee of BiH, with the support of the Federal Ministry of Education and Science, the Ministry of Health of Sarajevo Canton, and the European Association of Professors Emeriti (E.A.P.E.).

The symposium demonstrated that Bosnia and Herzegovina is facing accelerated population aging, but at the same time has the potential to become a regional example in developing models for active and healthy aging. A multisectoral collaboration is needed—between health institutions, educational establishments, local governments, and civil society—to ensure a dignified, healthy, and quality life for all elderly citizens.

Global aging and technological innovation are advancing at an unprecedented pace. The intersection of these two global macro-trends creates a significant need and opportunity for new products and services to transform and technologically enable the experience of aging.

Based on expert presentations and the research presented, the following conclusions and recommendations were adopted:

- Growing economic and social insecurity caused by transition, negative demographic trends, population aging, and the increasing burden of chronic diseases cumulatively result in unfavorable health conditions across all European countries.
- There is no single model or universal solution; therefore, each country must design its own models of health and social protection for the elderly population.
- The health system in BiH must be flexible and ready to provide adequate and timely responses to (1) demographic and social changes, (2) changes in epidemiological patterns of disease, (3) users' expectations regarding quality and participation in decision-making, (4) inequalities in health, and (5) scientific and technological advancements.
- The health system must also be proactive in responding to population aging.

- It is necessary to develop an integrated model of health and social care for older persons.
- The role of primary healthcare must be continuously strengthened in monitoring, prevention, and treatment of chronic diseases—especially in maintaining cardiovascular, renal, gastroenterological, gynecological, and oral health.
- The use of modern information and communication technologies—DIGITAL HEALTH—should be promoted for care and support of older person.
- Mandatory geriatric education should be introduced for healthcare professionals at all levels, including specialization, both for physicians and nurses/technicians.

A National Strategy for Healthy Aging must be developed as a fundamental document enabling a coordinated and integrated approach to supporting healthy aging.

Support should be provided for establishing and expanding Healthy Aging Centers in local communities. These centers should be available in all larger municipalities and cities. Their activities should include physical exercise, education, counseling, social events, and psychological support. Institutional and financial support from local authorities is needed for the sustainability of these centers.

Increase awareness and education on healthy aging:

- Launch public campaigns to raise awareness about the importance of healthy lifestyles in older age.
- Include the principles of healthy aging in employment, education, and urban planning policies.
- Introduce continuous education programs for families caring for elderly persons.
- Promote healthy nutrition, regular physical activity, and mental stimulation as key components of healthy aging.

Social inclusion of older persons must be a priority:

- Combat social isolation and loneliness through inclusive social programs.
- Support intergenerational projects and activities connecting the elderly with younger generations.
- Actively include older persons in decision-making processes concerning their lives.

Psychological support and mental health are key components of elderly care:

- Ensure access to psychological and psychiatric support for older persons, especially those in rural and isolated areas.
- Pay special attention to the prevention of depression, anxiety, and cognitive decline (dementia).

Improve data, research, and evaluation:

- Enhance statistical data processing on the health and needs of older persons.
- Support academic and field research in geriatrics, psychogeriatrics, and social gerontology.
- Establish a system of regular evaluation of existing programs and services for older persons.



On **Friday, 12 September 2025**, the webinar on Medicine and Music, organised by the Cultural Section of the EAPE in collaboration with the Association of the Friends of the Museum for the History of Medicine (SFMHM), took place. This event formed part of the broader thematic series "Medicine and the Arts". A previous webinar, held on 25 January this year by the same Cultural Section, focused on the connection between Medicine and the Visual Arts. The present session extended this exploration

to the Sound Arts - namely music. The programme featured both theoretical and musical contributions relevant to the theme. The selected pieces either addressed medical subjects or were performed by medical professionals. Nevertheless, the relationship between medicine and music remains somewhat tenuous - perhaps more accurately described as a partnership than a true union. To borrow the memorable and apt phrase of Derrick Dunlop, it may best be characterised as a "state of happy symbiosis".

A full recording of the webinar is available on our website, under "ACTIVITIES & EVENTS" menu. You can see the program of the Webinar below:



WEBINAR-Medicine and Music

Friday, 12 September 2025, 15.00 GMT (18.00 Athens time)

15.00- 15.10

Welcome addresses

George Christodoulou, EAPE President

Athanasios Diamandopoulos Chair, Section on Culture, EAPE, President SFMHM

15.10 -15.30

Reconciliation through music. **George-Andrei Dan**

15.30-15.50

Music in the clinic: a surgeon's view. **Dimitrios Dougenis**

15.50- 16.10

Singing Byzantine Medicine: The Case of Michael Psellos.

Athanasios Diamandopoulos

16.10-16.30

Singing Byzantine Medicine: The Case of Nikephoros Blemmydes. **Petros Bouras-Vallianatos**

16.30 -16.40

Something lighter: The song "Piensa en mi" by Augustin and Maria Teresa Lara

George Christodoulou

16.40 - 17.00

Discussion

On September 22, EAPE hosted the Webinar "From Exclusive to Inclusive Society by AI: Dreams or Reality?"

A full recording of the webinar is available on our website, under "ACTIVITIES & EVENTS" menu.

You can see the program of the Webinar below:



EUROPEAN ASSOCIATION OF PROFESSORS EMERITI
WEBINAR-From Exclusive to Inclusive Society by AI: Dreams or Reality?
Monday, September 22nd, 2025, 15.00 GMT (18.00 Athens time)

Welcome address

Chairs: Luigi Campanella (Section on Ethics)
Stavros Koubias (Section on Education Reform)

Introductory remarks of the Chairs of the proposing Sections on Ethics and on Education Reform

Artificial Intelligence, Panacea or Threat?

Stavros Koubias, Emeritus Professor and Former Rector of University of Patras

Can AI deal with hidden curriculum?

Nikos Christodoulou, Associate Professor of Psychiatry, University of Thessaly Medical School Head, Department of Psychiatry, University Hospital of Larisa

Existential Threats of AI

Sergios Theodoridis, Professor Emeritus of Signal Processing and Machine Learning in the Department of Informatics and Telecommunications, National and Kapodistrian University of Athens

Attainment Gaps in Higher Education

Les Ebdon, Vice-Chancellor of the University of Bedfordshire and Director of Fair Access to Higher Education (Head of the Office for Fair Access)

General Discussion and End of Webinar

Free Registration here!



Technical assistance kindly provided by
the Lilian Voudouri Foundation

On September 26, EAPE's **Section on Meeting the Needs of Young and Old-olds**, hosted a Webinar, of which, a full recording is available on our website, under "ACTIVITIES & EVENTS" menu.

You can see the program of the Webinar below:



EUROPEAN ASSOCIATION OF PROFESSORS EMERITI
WEBINAR-Section on Meeting the Needs of Young and Old-olds
Friday, September 26th, 2025, 15.00 CET (16.00 Athens time)

Program

15.00- 15.10

Welcome address

George Christodoulou, President of E.A.P.E.

Halima Resic, President of Section on Meeting the Needs of young and Old-Olds

Dušanka Mirčetić-Turk, Vice president of Section on Meeting the Needs of young and Old-Olds

15.10 -15.30

Do Love, Eros and Sexuality become Logos in Old People or are they replaced by unwanted Regression?
A qualitative analysis. **Jochen Ehrich**

15.30-15.50

Changes in intestinal microbiota during aging.

Dusanka Micetic-Turk

15.50- 16.10

Some trends in the introduction of land-based intergenerational learning. **Dianne Newell**

16.10-16.30

Public health initiatives in prevention of childhood obesity in Federation of Bosnia and Herzegovina
Aida Filipovic-Hadziomeragic

16.30 -17.00

Discussion and Closing Remarks.

Free Registration here!



Technical assistance kindly provided by
the Lilian Voudouri Foundation

On October 30, EAPE's Section on The Elderly in Our Society, hosted a Webinar, of which, you can see the program below:

EAPE-EOS

The Elderly in Our Society

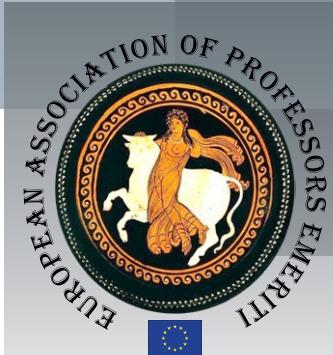
EAPE Section WEBINAR

October 30, 2025

3.00-5.22 PM, Rome Time

Online Event from Circolo Canottieri Napoli

3.00 PM	<i>Chairs, Natale Gaspare De Santo & Giancarlo Bracale</i> <i>George Christodoulou, President of EAPE, Athens</i> A thought on EAPE Sections
	<i>Miltiades Karayannis, Co-Chair of the EAPE Section The Elderly in Our Society, Athens</i> Greetings from Athens
	<i>Vincenzo Savica, Secretary of the EAPE Section The Elderly in Our, Society, Messina</i> Greetings from Messina
3.20 PM	<i>Dennis Cokkinos, Chair of the EAPE Section on Health Promotion and Prevention Athens</i> The Physician as clinician, scientist and educator
3.35 PM	3 min comment: by George Christodouplou, President of EAPE
3.38 PM	<i>Natale Gaspare De Santo, Chair of the EAPE Section on The Elderly in our Society, Naples</i> The Creativity of old artists: The Age of Masterpieces.
3.53 PM	3 min Comment by Athanasios Diamandopoulos President EAPE Section on Culture
3.56 PM	<i>Massimo Capaccioli, Professor Emeritus University Federico II, Naples</i> Women in scientific research. From marginality to protagonism
4.11 PM	3 min comment by Prof. Nikos Markatos, General Secretary of EAPE
4.14 PM	<i>Patrizia Bottaro, Vicepresident of "Civilizzare l'Urbano ", Naples</i> Building cities friendly to children and old-old
4.29 PM	3 min comment Natale G. De Santo, Former EAPE President
4. 44 PM	<i>Gaetano Thiene, Co-Chair EAPE Section on Culture, Padua</i> Lethal cardiovascular diseases in the elderly and how to prolong longevity through primary and secondary prevention.
4.59 PM	3 min comment by Dennis Cokkinos, First EAPE President
5.02 PM	Discussion Speakers, Members of EAPE, Commentators, Invited persons
5.20 PM	<i>Natale G De Santo & Giancarlo Bracale, Arrivederci</i>



Bulletin Redistribution

Restrictions and Guidelines

We would like to inform all colleagues, members of the EAPE and all readers of this Bulletin, for the possibility that a version of this issue may have come into their possession containing an article or articles that have been removed from the official version currently being read.

This happened because of a procedural misunderstanding, in which some colleagues thought it appropriate to redistribute the issue that came into their possession before the official distribution, without taking into account that it was addressed exclusively to authors of articles, in order to check their texts and make the appropriate corrections to them, if necessary.

This resulted in some colleagues receiving an issue containing the wrong material which was not approved by the Editorial Board of the EAPE Bulletin.

For all the above reasons, we consider it necessary to inform all our colleagues, in whose possession each issue of the Bulletin comes, either by direct distribution or by redistribution, of the way in which each issue is completed and reaches its official distribution. And on this occasion, to inform you of some restrictions that exist during this process.

The procedure is the following:

STEP 1: The authors send their contributions for each issue to the Editorial Board.

STEP 2: The Chief Editor together with the Deputy Editors make the first editing of the material and send it to the team responsible for the creation of the Bulletin.

STEP 3: When the first DRAFT is created, it is sent back to the Editorial Board to receive its approval or comments and corrections that need to be implemented.

STEP 4: After Step 3 is completed and potential corrections instructed by the Editorial Board have been implemented, this DRAFT, is sent to all authors so they can check their respective contributions and send back their approval or comments and corrections that need to be implemented.

STEP 5: After everything is checked and corrected if needed, then the Issue is ready for its official distribution.

Prior to its official distribution and during the above mentioned process, the redistribution of the DRAFT between colleagues, members or not, IS STRICTLY PROHIBITED.

Redistribution is allowed ONLY AFTER the official distribution that is made through the usual method, which is the sending of an email containing the link to see and/or download the Bulletin, from the official email account of the EAPE.

Thank you all for your understanding and cooperation.

THE CHIEF EDITOR
G.-Andrei Dan

INSTRUCTIONS TO AUTHORS

The *Bull Eur Assoc Profs Emer* is the bimonthly cultural Journal of the European Association of Professors Emeriti (www.Europemeriti.org) that supports the vocation of Professors Emeriti for teaching and Research. It is structured in two main section *Original manuscripts* that undergo peer review and the *section on News* that covers the life of the association and is under the care of the Editorial board.

The Bulletin adopts the Vancouver style. Authors are invited to visit the website of the Association and read the last issue. Manuscripts shall be in good English in Word, font 12, with good illustrations and shall be emailed to the editor in Chief, Gheorghe-Andrei Dan.

- Email: andrei.dan@gadan.ro

Original manuscripts (Word file) around 900-1100 words shall include affiliation(s), email and phone numbers of the authors, as well as 5 keywords from the manuscript. Preferably titles should not exceed the length of 50 characters (spaces included). A portrait of the 1st author is required. 1 Figure and 1 Table (emailed on separate sheets) and a maximum of 6 references and a minimum of 3 are allowed. References must be numbered and ordered sequentially as they appear in the text. When cited in the text, reference numbers are to be in round brackets.

Manuscripts related to news about emeriti and their associations shall be limited to a maximum of 500 words, and up to 3 references; no portrait of the author is required, but 1 Figure or 1 Table can be added.

All manuscripts undergo editing.

At the end of the article number references consecutively in the order in which they are first mentioned in the text. For articles with more than 6 authors, list the first 3 authors before using "et al." For articles with 6 authors, or fewer, list all authors.

JOURNALS

1. *Journal article published electronically ahead of print*: Authors may add to a reference, the DOI ("digital object identifier") number unique to the publication for articles in press. It should be included immediately after the citation in the References.

Bergholdt HKM, Nordestgaard BG, Ellervik C. Milk intake is not associated with low risk of diabetes or overweight-obesity: a Mendelian randomization study in 97,811 Danish individuals. *Am J Clin Nutr* 2015 Jul 8 (Epub ahead of print; DOI: [doi:10.3945/ajcn.114.105049](https://doi.org/10.3945/ajcn.114.105049)).

2. *Standard journal article*. List all authors when 6 or fewer; when 6 or more, list only the first 3 and add "et al." Abbreviate journal titles according to *Index Medicus* style, which is used in MEDLINE citations.

De Santo NG, Altucci P, Heidland A et al. The role of emeriti and retired professors in medicine. *Q J Med* 2014;107: 407-410

3. Committee on Infectious Diseases, American Academy of Pediatrics. Measles: reassessment of the current immunization policy. *Pediatrics* 1989; 84:1110-1113.

BOOKS and other MONOGRAPHS

1. Personal authors

Antier JJ. Jean Guitton. Milan, Paoline, 2002

2. Committee report or corporate author

World Health Organisation. Good Health Adds Life to Years. Geneva, WHO, 2012.

3. Chapter in book

De Santo NG. The priority: broadening the boundaries of paediatrics and turning basic science into cures. In Erich J, Corrard F, De Santo NG, ed. This I think should have priority in child health care services. Joachim Barke, Hannover 2018:69-71.

4. Agency publication

Committee on Infectious Diseases, Report of the Committee on Infectious Disease, 22nd Edn. American Academy of Pediatrics. Elk Grove Village, 19991; 319-320.

INTERNET REFERENCES

1. Website

Plato. Laws.<http://data.perseus.org/iterations/um:cts:greek-Lit:tlg034,perseus-eng1:3.666> (accessed May 14, 2020).

2. Online journal article

De Santo NG. The Impact of Covid-19 on Education and Science Florence in the XIV century -after plague, famine, death and depopulation- generated Renaissance Scholars such as Filippo Brunelleschi, Giovambattista Alberti and Leonardo An Achievable goal for our Universities. *Bull Eur Assoc Prof Emer* 2020; 1(2): 19-20. (accessed 14 May, 2020)

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