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**Multimodal Rehabilitation in Geriatric Emergency Surgery**

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**Abstract**

*Introduction:* Perioperative application of multimodal rehabilitation pathways represents the anticipated evolution of a concept that has arisen in recent decades, initially named fast-track surgery and known today as enhanced recovery after surgery (ERAS). This concept refers to the use of standardised perioperative care protocols that are supported by evidence-based medicine and aim to reduce surgical trauma and stress. Although application of such protocols to emergency surgery has produced favourable results, the use of ERAS in the geriatric emergency surgery setting has not been widely applied, and no studies have produced results that support its use in this setting. However, ERAS could help improve outcomes in this group of patients, who already have high surgical morbidity and mortality rates.

*Material and Methods:* In preparation for a lecture presented at the 18th European Congress of Trauma and Emergency Surgery (Bucharest, May 2017), the authors performed a literature search using the terms 'ERAS', 'fast-track', 'emergency surgery', 'emergency medicine', 'multimodal rehabilitation', and 'elderly patient' to gather scientific evidence with which to present suggestions in support of their opinion that ERAS could be applied successfully to improve postoperative outcomes for geriatric emergency patients.

*Conclusion:* Urgent surgical treatment of elderly patients is associated with morbidity and mortality rates higher than those of younger patients, and there is room for improvement. A multimodal rehabilitation program seems to be a good working model for achieving this goal.

**Key words:** multimodal rehabilitation, elderly patient, emergency surgery, fast-track