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Red flag: Violence against elderly people. What every medic needs to know

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INTRODUCTION: Projections indicate that the elderly population will double by 2050, making violence against this group a serious, frequently underreported public health issue. Early identification of clinical and behavioral signs is essential to break the cycle of abuse and protect their dignity. This study aimed to develop a practical, evidence-based guide of warning signs for the early detection of elder mistreatment. **METHODS**: Narrative review conducted at FMABC University Center. Searches were performed in BVS, SciELO, and PubMed (Jan/2015–Feb/2025). The following DeCS terms were used: "violence", "elder", "physical violence", "psychological violence", and "neglect". Full-text articles in Portuguese, English, or Spanish addressing signs, manifestations, or associated factors of geriatric violence were included. Editorials, duplicates, and unrelated studies were excluded. Ethics committee approval was waived due to the use of public secondary data. **RESULTS**: Important signs included clinical history inconsistent with injuries, delayed healthcare seeking, recurrent injuries, and behavioral changes in the caregiver's presence. Physical signs featured unexplained bruises on the head, neck and torso, lacerations, and restraint marks. Psychological signs comprised isolation, depression, anxiety, and sleep disturbances. Neglect manifested as dehydration, malnutrition, pressure ulcers, poor hygiene and inadequate medical follow-up. Functional dependence and dementia increased vulnerability. **DISCUSSION**: Findings confirms that geriatric violence is multifactorial and often concealed, requiring additional clinical attention. Standardizing warning signs facilitates screening across care levels, overcoming barriers such as fear of reporting or abuse normalization. Integrating these indicators into routine practice may reduce underreporting and foster interdisciplinary approaches, although real-world clinical validation of the guide remains necessary. **CONCLUSION**: Evidence-based systematization of warning signs enable healthcare professionals to detect elder mistreatment early, promoting timely interventions, appropriate reporting and strengthened protection networks, thereby supporting healthy aging.

KEYWORDS: Violence; Elder; Elder mistreatment; Adult protective service.

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