

Problems of Geriatrics

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Abstract

Old age is traditionally considered to be synonymous with deteriorating physical and mental health. There are well-recognized health problems which accompany old age. Vision dwindles, hearing diminishes, bones become weak, muscle tone decreases, and memory starts failing. Ageing is a normal universal change taking place even with the best nutrition & health care. During the old age, the scope & sphere of their social interaction is reduced mainly in the family circle. Studies have shown that most common old age problems are economical dependency, loneliness, insecurity and diminished self-concept. In the families when the elderly cease their functional ability they may viewed as a burden for the family, community and may end up in institutionalization.

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Introduction

Ageing is an inevitable consequence of life. Every organism that is born must grow old and eventually die. Human beings are no exception. The past century was marked by a considerable increase in the proportion of older people, with which came a stratified set of medical, social, psychological, financial and ethical problems distinct enough to pave the way for evolution of a separate branch of science-Gerontology; the science of ageing. Geriatrics then evolved as bifurcation dealing with the medical problems and care of the elderly.

West have considered those above the age of 65 years as elderly, it has been suggested that 60 years of age may The UN defines a country as 'Ageing' when the population of people over 60 years of age in that country reaches 7%. Many countries-both developed and developing, have already crossed this mark and Population Ageing has established itself as an important public health challenge of the 21st century.

Health

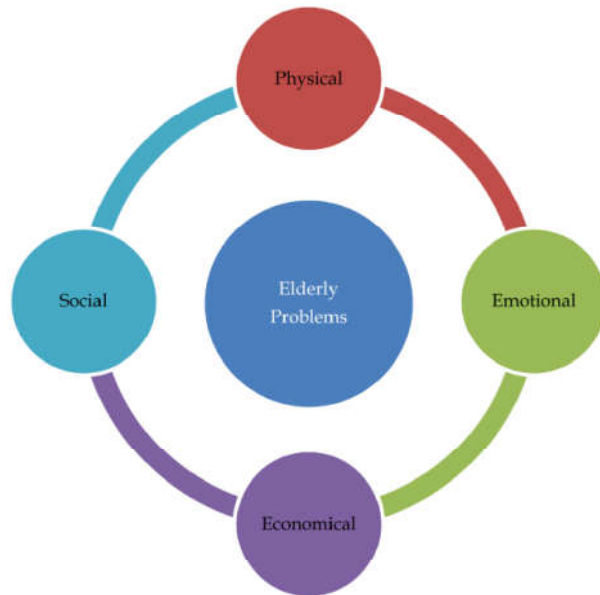
Health is a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.

-W.H.O

The attitude of the nurses towards older adults comes in part from personal experiences with older adults, education, employing institutions. The nurse's own aging, also contributes to the nurse's attitude towards older adults. Given the increasing numbers of older adult in health care setting, cultivation of positive attitude towards older adults and specialized knowledge about aging and the health care needs of older adults are priorities for nurses [10].

In the view of above facts, in our country, where data regarding geriatric population is limited and only a few studies have been attempted to know morbidity pattern of elderly, this study will add information to available database and latest

scenario about needs of such a huge population. This feedback to programme managers and policy makers will help to take appropriate measure to improve their quality of care and better serving the comma. The researcher felt that a study on this aspect will help to understand the old age problems, and to educate old age population regarding coping with same.



Materials and Methods

Problem Statement:

A study to assess problems of elderly population in selected areas of Yewalewadi.

Objectives

1. To assess the general health status of the elderly population.
2. To classify the geriatric health problems.
3. To associate the elderly health problems with selected demographic variables

Operational Definition

1. *Assess:* Measure the level of knowledge about the Health problems of the elderly people.
2. *Elderly Population:* The people who is above 60 years of age and residing in a given area.

Research Methodology

Research Approach

Quantitative Research Approach

Research Design

A non-experimental descriptive research design

Sampling Technique

The sampling technique used in this study will be non-probability convenient sampling technique.

The Tool Consists of the

Section I- Consent form

Section II- The tool will comprise of self reporting questionnaire which will comprise of demographic data of the people (Age, gender, education, occupation, Income)

Section III- Modified likert scale to assess the geriatric health problems

Results

The data was analysed as per the objectives of the study.

1. To assess the general health Problems of elderly population.
2. To associate study findings with selected demographic variables.

Discussion

This study will be useful for the population residing in selected area, the study finding suggest that there is no any significant association with health problems and selected demographic variables.

Section- 2

Table 1: Age wise Distribution of Samples (n=20)

Sr.No	Demographic Variables	Frequency(f)	Percentage (%)
1.	AGE		
a.	60- 65 years	9	45%
b.	66- 70 years	8	40%
c.	71- 75 years	1	5%
d.	76 - 80 years	2	10%
	Total	20	100%

Age wise Distribution of Samples

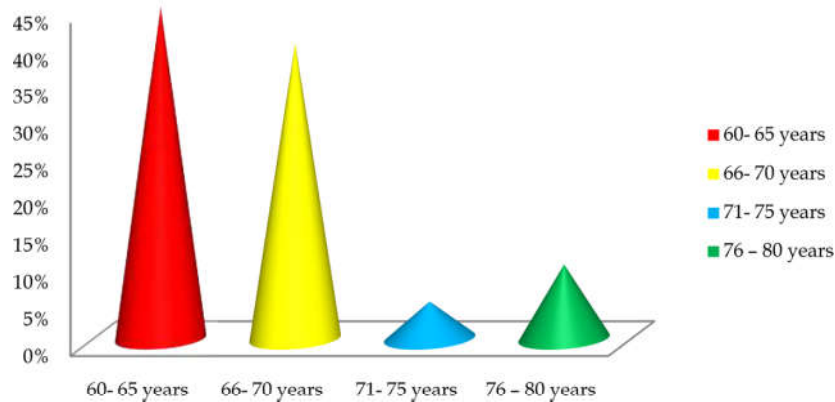


Fig. 1: Age wise Distribution of Samples

Table 1 and Figure 1 Represent that 9(45%) of 60-65 years, 8(40%) of 66-70 years, 2(10%) of 76-80 years and 1(5%) of 71-75 years.

Table 2: Gender wise Distribution of Samples (n=20)

Sr.No	Demographic Variables	Frequency(f)	Percentage (%)
2.	Gender		
a.	Male	14	70%
b.	Female	6	30%
	Total	20	100%

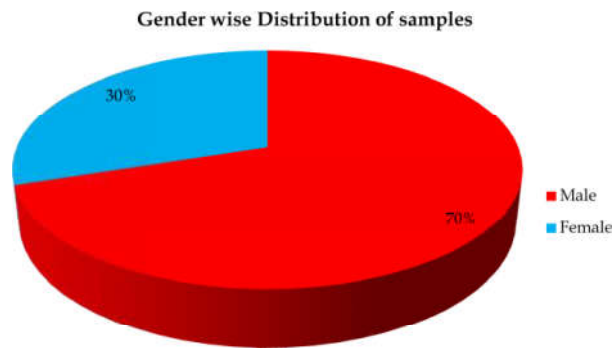


Fig. 2: Gender wise Distribution of Samples

Table 2 and Figure 2 Represent that male are 14(70%) and female are 6 (30%).

Table 3: Marital status wise Distribution of Samples (n=20)

Sr.No	Demographic Variables	Frequency (f)	Percentage (%)
3.	Marital Status		
a.	Married	17	85%
b.	Unmarried	3	15%
c.	Divorce	0	0%
d.	Widow / Widower	0	0%
	TOTAL	20	100%

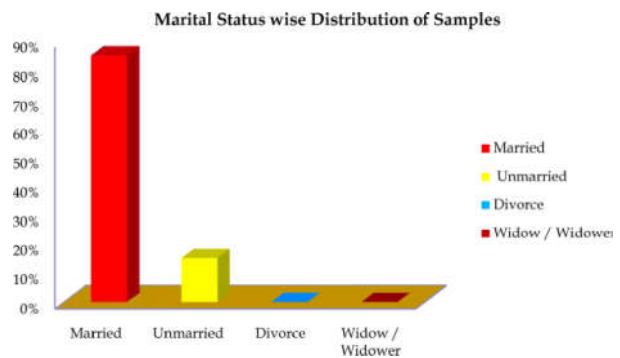


Fig. 3: Marital status wise Distribution of Samples

Table 3 and Figure 3 Represent that 17(85%) peoples are married and 3(15%) are unmarried.

Table 4: Family type wise Distribution of Samples (n=20)

Sr.No	Demographic Variables	Frequency(f)	Percentage (%)
4.	Family Type		
a.	Nuclear	8	40%
b.	Joint	12	60%
	Total	20	100%

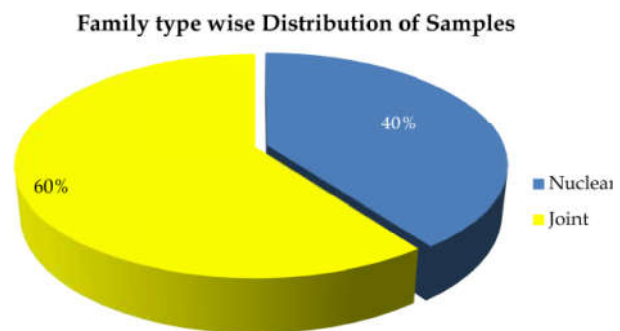


Fig. 4: Family type wise Distribution of Samples

Table 4 and Figure 4 Represent that 12(60%) peoples from joint family and remaining 8(40%) peoples from nuclear family.

Table 5: Any Previous Illness wise Distribution of Samples (n=20)

Sr.No	Demographic Variables	Frequency (f)	Percentage (%)
5.	Any previous illness		
a.	Backache	7	35%
b.	Joint pain	5	25%
c.	Hypertension	5	25%
d.	Any Other	3	15%
	Total	20	100%

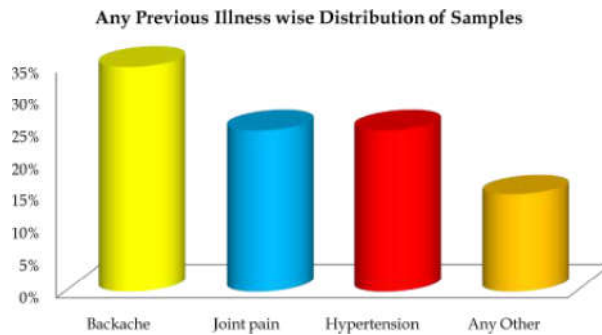


Fig. 5: Any Previous Illness wise Distribution of Samples

Table 5 and Figure 5 Represents that 7(35%) peoples having previous illness such as Backache, 5(25%) peoples having joint pain and hypertension, remaining 3(15%) peoples having any other illness.

Section- 3

By overall, analysis frequency and percentage distribution of the samples according to modified checklist to assess the general health status among study samples.

Table 6: Distribution of the subjects according to General Health Status

Sr. No	Grading	Score	Frequency {f}	Percentage %
1	Mild	20-39	02	10%
2	Moderate	40-59	17	85%
3	Severe	60-80	01	5%
	Total		20	100

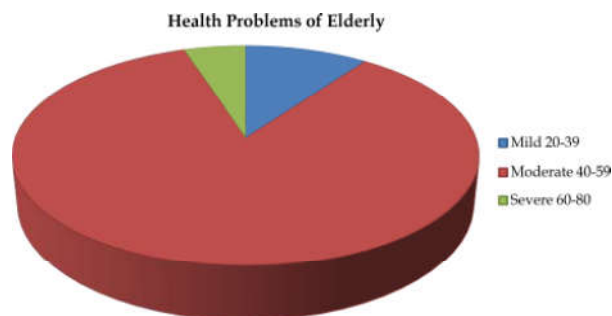


Fig. 6: Distribution of the subjects according to General Health Status.

Conclusion

India may have a younger population but the number of those aged above 60 is rising rapidly too. These elderly population are facing majority of health problems due to ageing with the changes in the body, mind and thought process. This brings to light that the younger generation needs to be motivated to understand the problems faced by the elderly and take appropriate measures to enhance “Happy Ageing” of their dear and near ones. The study reveals that Majority of the elderly population were able to cope up with their physical activities without much of a deviation from normal. The elderly population looks forward to their family and friends for their social, psychological and performance of various role functions.

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