

It's Not Just Old Age

By Judith S. Parnes, LCSW, CMC



In many other parts of the world, older adults are revered and their advice is sought and respected. In our culture, the wisdom, knowledge and life learned skills of our elderly population are often overlooked and instead we focus on their mental and physical deficits. Because of this prevailing attitude, older people in our society are sometimes regarded as less valuable than younger populations.

Unfortunately, sometimes an older person's attitude toward seeking medical treatment manifests itself the same way. As a result, if an older person has a medical complaint and the cause is not readily apparent, he or she may be more likely to accept the condition as a consequence of old age. This attitude may cause older adults to not be aggressive in finding the cause of the medical complaint or not seek treatment at all.

A 90-year-old man meets with his doctor and complains about pain in his right knee. He tells the doctor,

"What can I expect? I am 90 years old."

The doctor replies, "But Henry your left knee is the same age as your right knee and you have no pain in that knee! Of course you need to tell me about your aches and pains".

When individuals consider old age to be a disease itself, medical problems can be inappropriately attributed to "old age" as if it were a medical condition. Since there is no cure for old age, appropriate tests and treatment may not be performed. Sometimes, important clues to treatable conditions such as changes in appetite or sleep, are dismissed as the normal results of "old age." Therefore, medical problems that may not be related to age and may just as frequently occur in younger people may not be treated. Contrary to myth, the following symptoms are **not** inherent to aging. When detected, they must be thoroughly evaluated to find the underlying cause while they are still reversible:

Confusion

Decreased appetite

Dizziness

Falls

Incontinence

Decline in functional status

Pain

It's especially important for family members and caregivers to watch for symptoms that may appear differently in adults over 65 than they do in younger

people. For example, in an older adult, the first indication of cardiac failure may be loss of appetite. Urinary tract infections may come on with confusion and decreased ability to function rather than fever and chills.

Confusion, so often thought to be normal in an older person can also be a red flag. Inability to organize one's thoughts can be a sign of inappropriate combinations of medication, dehydration, depression, hypoglycemia, or even respiratory or other type infections. The assumption that depression is a natural consequence of aging leads to the missed opportunity to successfully treat it. Similarly, a fall might not be a sign of clumsiness but rather of heart problems, an inner ear problem or osteoporosis.

In summary, by understanding the aging process, older adults and their families can help themselves by identifying symptoms and assuring they are effectively communicated with their medical provider. Having a family member available to accompany "the patient" is always helpful. Geriatric care managers are professionals that can oversee care needs and assist with coordination of care.

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