



Short Communication

Caring of the elderly in the pandemic era- A Viewpoint

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ARTICLE INFO

Article history:

Received 29-10-2020

Accepted 22-12-2020

Available online 04-02-2021

Keywords:

COVID19

elderly

care challenges and strategies

ABSTRACT

Summary: The threat of coronavirus disease (COVID-19) and its massive adverse impact across the globe has forced us to consider course of interventions for betterment of the community dwelling at-risk population. One of the most vulnerable populations of the society is elderly, who are facing numerous challenges and issues. This manuscript discusses the impact of present pandemic on older adults and highlights major challenges, issues of this segment of population as well as strategies and ways for managing the same.

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1. Introduction

SARS-CoV-2 generated the threat of coronavirus disease (COVID-19) and is now spreading all across the world. Each segment of the society needs special care and attention to remain safe and secure. By today i.e. October 28th, 2020 the total confirmed cases globally were more than 27 million (43,540,739) with approximately 0.9 million (1,160,650) fatalities.¹ On the same date, in India, reported cases are 7,990,322 with 120,010 deceased.² These numbers are not only affecting one's basic living status but also developing unrest, uneasiness in everyone's mind. It will be worth mentioning that the severity and mortality of the disease is higher for older adults and people with underlying comorbidities. Therefore, elderly with poor health conditions are more at risk. It is reported that with increase in number of cases due to the pandemic, the death rates in elderly would also rise with a higher risk of mortality.³

Advancement in age comes with many changes in one's life including anatomical, biological, physiological, psychological, social, environmental and economic. Often, these changes give birth to many complexities and become the reason for poor health outcomes. To balance

the physical, mental, emotional, social and spiritual equilibrium, everyone needs proper diet, exercise, psycho-emotional ventilations. However, the pandemic broke the chain of normal life and almost everyone stagnated with their lives in one situation or the other. This created various issues for the elderly who are already had any kind of mental ailment. Studies report that majority of elderlies have more than one morbid condition and often need proper monitoring. Due to COVID-19, they fear consulting a doctor, because of the risks involved. Sometimes, they may need hospitalizations but it increases their chances of contracting the infection during this pandemic.³

A study reported old age as a predictor of mortality in SARS and middle east respiratory syndrome (MERS)⁴ and a recent finding on COVID-19 patients as well confirms that increased age is associated with increased mortality.⁵ It is stated that such pandemics generally affect wellbeing and quality of life as a whole and cause social dysfunction; people stigmatize it, creating panic.⁶ The pandemic has a detrimental psychosocial impact which is largely neglected in research studies so far. At present, due to COVID-19, when the entire society is living in a fearful situation, the care of elderly also gets ignored. Their basic needs and schedules like routine health checkups, walking, and exercises are hampered. As they are the senior most person

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in the family, they are often sidelined in family discussions. If living alone, they are faced with isolation and experience distancing from families. Anecdotal accounts suggest that issues related to health (physical/ mental), disabilities, finance, security, companionship etc. often makes the elderly more vulnerable. Telephonic conversations revealed that the elderly often face neglect and negligence in the family. However, they also indicated through veiled responses that while they faced hardships, it's not the fault of family members as everyone is facing a tough situation. This highlights some of the concerns as indicated by elderly during discussions for the benefit of the researchers, academicians and policymakers so that a strategic plan may be made for promoting a stress-free life.

There are also issues that are tough to handle for the elderly who live alone. Elderly concerns regarding their health, family issues, handling negligence/ loneliness, sharing fear etc. can be seen as a common thread here. One essential service that they require right now is the availability of at-home professional healthcare that is accessible and affordable. However, awareness about the availability, efficacy, safety and promptness of such services is missing. Elderly, especially those living alone, also require repeated assurances which necessitate the need of volunteers working in the field who can capably assist.

A group of such elderly may also be organized and telephonic group discussions thereafter can be helpful in minimizing their fear and anxiety. With advancement in age, a human begins to experience the degenerative state and therefore, vulnerability in old age increases. However, due to their seniority and other personality traits and issues, elderly often do not wish to reveal them. They also often do not wish to trouble their families and shy away from discussing their issues that may later become serious. During the pandemic, the elderly are witnessing the daily stressors/pain of the younger members of the family that further dissuades them for openly talking about their troubles. A support group or a medical team may be deputed to give online consultation to such elderly and/ an awareness drive for caregivers of elderly may also be beneficial.

United nations (UN) (2020) also prepared a policy brief and indicated a wide range of risk factors for elderly.⁷

It suggests main priority areas of action that needs to be considered and applied to help the elderly for living a fear-free life. The main priority area of action suggested by the UN are; i) identification of COVID-19 in the elderly population should be a priority; ii) person centered approach for medical treatments; iii) urgent and prioritized assessments; iv) ensure adequate treatment; v) proper reporting of mortality; vi) prevent and protect violence and other elder abuse specially with females; vii) confirm visitor policies in residential care facilities, hospitals and hospices; viii) prepare contingency plans and strategies address. Along with early adaptation of UN's recommendation a collective effort for giving a safe and secure life would be helpful for care and management of the elderly.

2. Conflict of Interest

None.

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Cite this article: Pandey NM. Caring of the elderly in the pandemic era- A Viewpoint. *Ann Geriatrics Educ Med Sci* 2020;7(2):78-79.