

GERIATRIC CENTRE - AN ESSENTIAL REQUIREMENT

Rekha Bhatkhande

Post Graduate Diploma in Hospital & Healthcare Management, Mumbai

Email: gastro111@gmail.com

Of old age: *“Made weak by time and fate, but strong in will, to strive, to seek, to find, and not to yield”*

A. Tennyson

Preamble:

- Currently, India has the second largest population of elderly people in the world. This will rise to approximately 140 million by 2020. Over the next 40 years, India's demographic structure will shift dramatically from a young to an ageing population resulting in 320 million elderly persons by 2050.
- Common ailments among the Geriatric population are non-communicable diseases like hypertension, heart diseases, diabetes, and osteoarthritis, cancers, hearing impairments, cataract, respiratory problems, nutritional problems and mental disorders. Commonest communicable disease is tuberculosis.
- Elderly persons in India often succumb to preventable conditions like bronchitis, asthma, and pneumonia.
- This mandates steps to be taken for elderly care

In the community:

The Senior Citizens Organizations in Mumbai are very vibrant and will appreciate a proactive step taken in the care of the Elderly. The elderly are very focused on **the activities of daily living**. There are five factors that influence these activities:

- Biological factors
- Psychological factors
- Socio-cultural factors
- Environmental factors
- Politico-economic factors

Addressing these activities is the only way forward if the Age Friendly City Mission is to be launched

Biological factors of aging difficulties are in:

- Communicating
- Maintaining a safe environment
- Breathing
- Eating and drinking
- Eliminating waste
- Controlling body temperature
- Mobilizing
- Sleeping
- Expressing sexuality

Proper and due geriatric medical care will alleviate the sufferings of the elderly

Psychological factors of aging are changes in:

- Intelligence
- Cognition and Memory
- Personality
- Adaptation in old age
- Motivation and Enthusiasm
- Emotions (love, caring, family pride, social responsibility)

Relative under-activation of brain centers leads to psychosocial changes in the elderly.

Socio-cultural factors of aging are the tackling of:

- Retirement
- Loss
- Empty Nest syndrome
- Boomerang Kids
- Bereavement and Grief
- Stereotypes and Discrimination
- Changing values and obligations
- Social support

The social aspects of ageing should emphasize: the QOL in older people, health and active ageing without abuse, neglect, exploitation or isolation of older persons

Financial factors of aging that need to be faced are:

- Poverty in Old age
- Govt. Support
- Health Insurance/ RGJAY
- Savings for Retirement
- Management of Assets
- Pension
- Decreasing Personal Income
- Financial commitments: (marriage and education of children/ failing health/ maintaining lifestyle/ inflation)

The financial instability leads to social problems like marginalization and propagates elder abuse

Legal factors of aging often neglected are:

- Will
- Certificate of Succession

- Property / Reverse Mortgage
- Living Will
- Organ Donation
- Rights of elderly Patients (to get a second opinion, to refuse treatment, to refuse resuscitation, to refuse to eat and drink VSED)
- Ichha Maran

Lawyers are familiar with three legal concepts that often involve older persons: diminished capacity, consent and undue influence

Active Ageing:

If all these factors of Ageing are addressed in a structured manner we can promote Active Ageing.

- The word “active” refers to continuing participation in social, economic, cultural, spiritual and civic affairs, not just the ability to be physically active
- It allows seniors to realize their potential throughout the life course
- It urges them to help the Govt. build age-friendly cities

Is there a need for a Geriatric Centre at all levels?

Good governance is about ensuring that all ages of citizens are kept safe, secure and happy. For the elderly, an Adult Daycare Centre for daily needs, a Geriatric Centre for encouraging active ageing, would be an ideal way to go about this fulfillment.

A Geriatric Centre would therefore need to evaluate, integrate and promote active ageing in all its beneficiaries at the Community level, and use a structured healthcare model for the benefit of all.

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