Nursing of Tomorrow in Geriatrics

By Mr. Jayant B. Joshi

With the advent of modern medication the life span of humans has shot up. This has increased the responsibility of the health team. It is our duty to try and keep our elders fit, healthy, and happy. In advanced countries geriatrics is becoming a specialised field of study.

There is a general devitalisation of all systems of the body in elders. Apart from the numerous medical and physical problems they suffer from a feeling of uselessness which affects their psychological balance. Therefore, the medical team must handle the elders with “spirit-de-corps” bringing thereby a sense of security in them.

Role of the Nurse

Who can penetrate into the crux of the problems in a geriatric patient? Certainly not the physician, the surgeon or the therapist. It is the nurse who can grasp the real problems of a geriatric patient and convey them to the concerned specialist for advice. The role of the nurse is thus of utmost importance not only to take care of the patient, but to assess the patient’s needs.

Approach to the Patient

Since the majority of our elders are bound to possess profound psychological depression the approach of a nurse in dealing with them is of vital importance. It has to be right, compatible and encouraging in order to win the full confidence of her patient and boost his morale.

The nurse must keep in constant contact with the patient and converse with him with pleasing manners with respect. Once the nurse is able to establish rapport she will be able to elicit details of his difficulties which needs immediate medical attention. Also she has to be a critical observer of all his activities as a routine and make note of all the problems—the degree of deviation from the normal, the dangerous points in his activities—to be passed on to the various specialists who can plan and direct the treatment programme on the basis of the data collected by her.

Facts of Life

After winning the full confidence of her patient, the nurse should gradually explain to him the facts of life. She must try and bring home the point that old age is but a natural process in the life cycle and that he can certainly be a useful member of the family and the society at large in spite of the problems connected with his old age. If she succeeds in making him accept his old age with courage half the battle is won.

Aim of Treatment

The aim of treatment should be to restore and maintain the maximum independence so that the geriatric patient is capable of looking after himself, if possible, or with minimum possible assistance.

The nurse has to work hand in hand with the physical-therapist on whom rests the primary responsibility of preventing or delaying the onset of the problems of the patient.

General Revitalisation

(i) Care of Skin: Besides general hygienic training, the skin of a patient has to be kept clean, dry and odourless, especially when he has incontinence. Patients who spend most of their time in bed are very much prone to develop pressure sores. These pressure points need frequent inspection for the signs of sores, and need enough of protection. The patient’s position in bed also needs to be changed strictly once in two hours to prevent the hazards of pressure sores.

(ii) Core of Bones and Joints: There is generalised osteoporosis or a reduction in bone mass without any change in its chemical composition. The bone becomes brittle and even the light trauma can produce fracture. Thus all the activities of any elderly person should be well guarded and slow.

Degenerative changes, or what is known as wear and tear, is very common in the weight bearing joints (may be Osteoarthritis, Spondyloidearthrosis) which is painful, prevents the patient from moving the joints and leads to stiff joints which can be prevented only by a routine of full range light movements of all the joints though slightly uncomfortable.

(iii) Care of Muscles: There is generalised degeneration of muscles, resembling muscular dystrophy. Decreased elasticity, contractility, extensibility and tone not only produce general weakness but impair stability because muscles play an important role in the stability of a joint. Thus all muscle groups need simple exercises with emphasis on isometric contractions (sustained contractions). The period of each exercise has to be brief and interesting to the patient.

(iv) Respiration and Circulation: There is decrease in the vital capacity of the lungs. Breathing becomes shallow and may be associated with cough, expectoration, dyspnoea, and diminished movement of a thoracic cage, which in turn may give rise to Kyphoideformity and permanent fault in breathing which directly reduces the efficiency of the circulatory system.

(v) Nervous System: There is demyelination of the nervous system resembling incomplete myelination in children, giving rise to nervous insufficiency. Generalised toning of the nervous system can be achieved by increased respiratory and circulatory efficiency.

Thus simple but purposeful full range movements of all the joints and muscles for a brief period associated with breathing can help in toning up of all the systems of body giving a feeling of freshness.

Routine Activities

Deviations in performing the daily routine activities to be observed, noted and reported to the specialists concerned for their advice.

Normal posture needs balanced and co-ordinated action of various groups of muscles and joints. Even the small degree of impairment in...