

# Ergotherapy in geriatrics

Aging is accompanied by degenerative changes, which manifest as comorbidities (multiple diseases at the same time, the organism is weakened and healing is slowed down). Cardiovascular diseases, diabetes, arthrosis, decrease of cognitive functions, and injuries of the musculoskeletal system are the most frequent. There are significant interindividual differences amongst seniors – some are capable of an active and independent life up until death, others need help early on.

## Main principles

During ergotherapy, it is best to **avoid**:

- head tilts;
- extensively difficult physical activities;
- sudden movements;
- rapid changes of positions.

## Ergotherapy

It is important to start with therapy **as soon as possible**, because the changes from inactivity and immobility are fast, compared to regeneration, which is slow.

- Activation program
- Provides opportunities on how to spend free time (universities of the 3rd age, senior clubs)
- Helps adjust home environment
- Selects compensatory aids
- Reminiscence program

## Selected diagnoses

- Parkinson's disease
- Alzheimer's disease

## Links

### Used literature

- VOTAVA, Jiří. *Ergoterapie a technické pomůcky v rehabilitaci*. 1. edition. Technická univerzita v Liberci, 2009. ISBN 978-80-7372-449-8.
- KLUSOŇOVÁ, Eva. *Ergoterapie v praxi*. 1. edition. Národní centrum ošetrovatelství a nelékařských zdravotnických oborů, 2011. ISBN 978-80-7013-535-8.