

Peculiarities of diseases in old age

14% of the population in the Czech Republic is over 65 years old. Among the peculiarities of diseases in old age are mainly polymorbidity and a change in the clinical picture of diseases.

Polymorbidity in the elderly

A higher number of diseases, several conditions can occur:

- concomitant diseases - they are not related to each other or cause each other causally, but one can worsen the course of the other and each of them affects (negatively) the overall condition of the patient;
- causal chain - the first causes another, and the latter causes another, ending in death (it is necessary to break the chain);
- a combination of both

Clinical picture of diseases in the elderly

The clinical picture is largely influenced by polymorbidity. Appears:

- microsymptomatology – symptoms are present, but they are less expressed than in the usual course of the disease – fever and leukocytosis are absent in acute infection;
- mono or oligosymptomatology - typically in diseases where the diagnosis is usually based on a scale of symptoms, only some appear and perhaps not fully expressed;
- non-specific symptoms for the disease such as weight loss, loss of appetite, fatigue (eg heart failure);
- the presence of only secondary symptoms – confusion in AMI, typical symptoms such as pain are absent (for example due to diabetes mellitus);
- complete absence of essential symptoms - e.g. lack of defense in peritonitis, pain in AMI.

On the contrary, a uniform reaction to disease (almost any) appears:

- fatigue,
- anxiety,
- depression,
- reduced psychomotor pace,
- delirium.

The most common diseases in old age

More than 90% of people over the age of 70 suffer from one or more chronic diseases.

- CVD – CAD (AIM, angina pectoris), heart failure, arterial hypertension, ICHDK, chronic venous insufficiency, CMP, arrhythmia (FiS).
- GIT - gastroduodenal ulcer, colorectal cancer, dysphagia appears.
- Endocrinology - diabetes mellitus, hypothyroidism, osteoporosis, obesity.
- Movement system - osteoarthritis, skeletal muscle atrophy.
- Excretory system – incontinence, urinary infections.
- CNS – memory disorders, dementia, depression, delirious states.
- Anemia from various causes (chronic diseases, iron deficiency, B12).
- Pain.

Non-pharmacological measures

The overall condition and severity of the disease can also be improved with the help of regimen measures (and thus reduce morbidity and mortality):

- physical activity - taking into account the load on the joints, short but regular walks, cycling or swimming are the most suitable, it works as a prevention of obesity and CVD, increases HDL cholesterol,
- energy supply through food – corresponding to physical activity, despite reduced appetite (if drinking), prevention of malnutrition and dehydration, increase the intake of fibre, fruit, vegetables and liquids,
- weight control - prevention of obesity, which worsens CVD and osteoarthritis,
- regular blood pressure and cholesterol checks, well-chosen treatment (statins) are also recommended.

Links

Related Articles

- Basic geriatric syndromes
- Mental disorders in the elderly
- Peculiarities of pharmacotherapy in old age

References

1. TOPINKOVÁ, Eva, Rudolf ČERVENÝ and Ivana DOLEŽELOVÁ, et al. *Geriatrics : A recommended diagnostic and therapeutic procedure for general practitioners* [online] . 1st edition. 2007. Also available from < https://www.svl.cz/Files/nastenka/page_4766/Version1/Geriatrie.pdf >. ISBN 80-86998-XX-X .
2. ↑Jump up to:a b TOPINKOVA, Eva. *Diseases in old age* [online]. Last revision 2008-11-12, [cit. 2012-02-13]. < <http://www.ordinace.cz/clanek/nemoci-ve-stari/> >.

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