

As seasons change,
so do we age!

Aging Adults



Agging Statistics

Persons 65 years or older:

- 2010 U.S. Data:
 - 40.4 million (13.1%)
 - 1 in every 8 Americans
- 2030 Projection:
 - 72.1 million (19%)

Chronic Conditions:

- 92% - one chronic condition
- 77% - at least two chronic conditions



WHAT CAN YOU DO FOR A LOVED ONE?



UNDERSTAND THEIR CHRONIC CONDITIONS

ASSIST IN MEDICATION RECONCILIATION

PREVENT FALLS

BE A FAMILY ADVOCATE

COMMON CHRONIC CONDITIONS



Heart Disease

Congestive Heart Failure

Chronic Obstructive Pulmonary Disease

Cancer

Stroke

Diabetes

Heart Disease

A chronic disease with no cure

Recognize Symptoms

- Chest pain
- Shortness of breath
- Palpitations
- Faster heartbeat
- Weakness
- Dizziness
- Nausea
- Sweating

Reduce Risk Factors

- High blood pressure
- High cholesterol
- Smoking
- Physical activity
- Nutrition
- Stress
- Diabetes

Take Medications

- Follow instructions
- Be compliant
- Reconcile medications

Regular Doctor Visits

- Schedule regular appointments

Know the Risk Factors

High Blood Pressure

- 1 in every 3 adults
- 140/90 or higher
 - *Between 120/90 and 139-89 is prehypertension*

High Cholesterol

- 1 in every 6 adults
- Total cholesterol level > 200
- HDL (good) cholesterol level < 40
- LDL (bad) cholesterol level > 160



Congestive Heart Failure (CHF)

What is it?

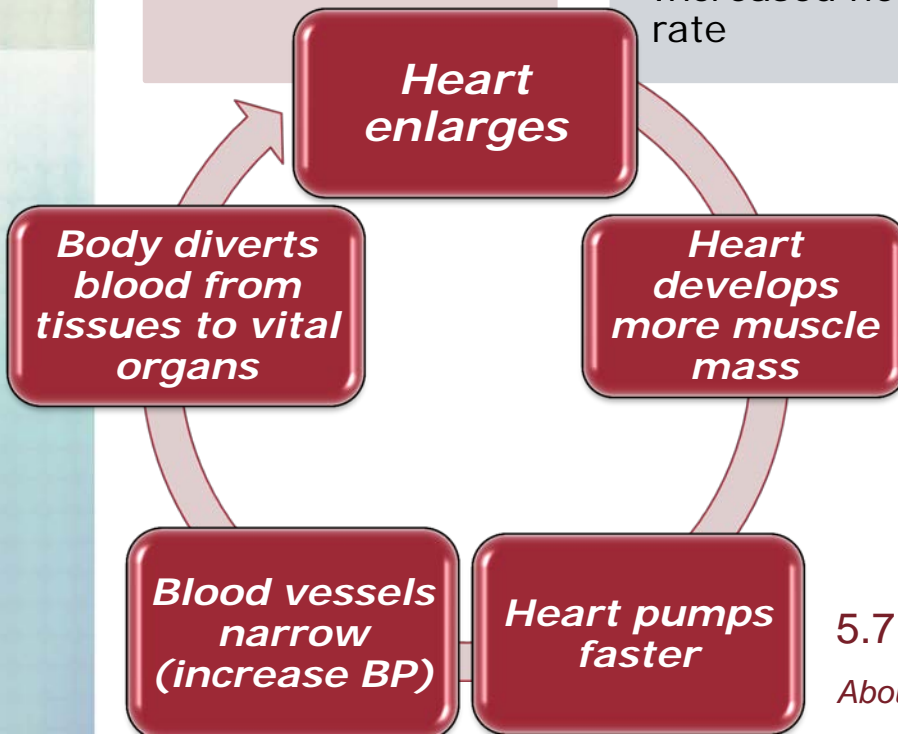
- Chronic, progressive condition
- Occurs when heart muscle does not pump enough blood through to meet the body's needs for blood and oxygen

Signs/Symptoms

- Shortness of breath
- Persistent cough or wheezing
- Buildup of excess fluid in body tissues
- Tiredness, fatigue
- Lack of appetite, nausea
- Confusion
- Increased heart rate

Reduce Risk Factors

- Exercise more
- Reducing salt intake
- Manage stress
- Losing weight
- Control:
 - Coronary artery disease
 - High blood pressure
 - Diabetes
 - Obesity



5.7 million Americans have heart failure

About half of people who have heart failure die within 5 years

Pulmonary Disorder (COPD)

Chronic Obstructive

COPD

CHRONIC AIRFLOW LIMITATION
"EMPHYSEMA AND CHRONIC BRONCHITIS"

- Easily Fatigued
- Frequent Respiratory Infections
- Use of Accessory Muscles to Breathe
- Orthopneic

- Cor Pulmonale (Late in Disease)

- Thin in Appearance



- Wheezing
- Pursed-Lip Breathing
- Chronic Cough
- Barrel Chest
- Dyspnea
- Prolonged Expiratory Time

- Bronchitis - Increased Sputum

- Digital Clubbing

Where may your loved one need help?

- Giving medications
- Monitoring symptoms
- Advocating for appropriate medical care
- Providing transportation to and from appointments, tests, and treatments
- Communication with the older adult's health care team
- Helping with housekeeping
- Handling insurance issues
- Managing finances
- Preparing meals or buying groceries
- Caring for pets
- Participating in end-of-life care



SPOT A STROKE



Stroke Warning Signs and Symptoms

Diabetes

Affects 12.2 million Americans aged 60+ (23% of the population)

An additional 57 million Americans aged 20+ have pre-diabetes

Type 1 Diabetes

- Body is unable to produce insulin
- Insulin injections needed

Type 2 Diabetes

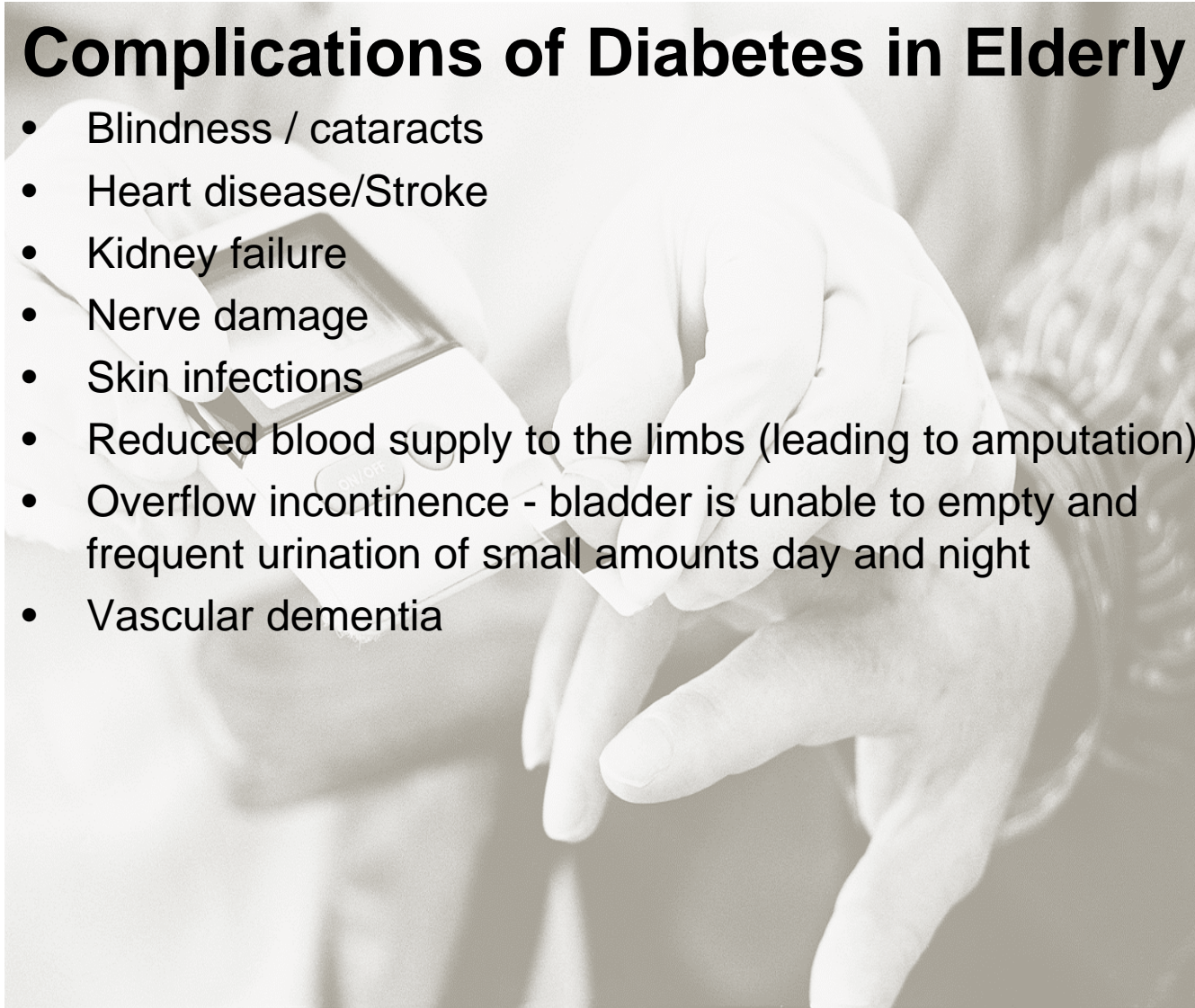
- Body is insulin resistant
- More common form

Pre-Diabetes

- Elevated blood sugar levels
- Need to minimize risks

Complications of Diabetes in Elderly

- Blindness / cataracts
- Heart disease/Stroke
- Kidney failure
- Nerve damage
- Skin infections
- Reduced blood supply to the limbs (leading to amputation)
- Overflow incontinence - bladder is unable to empty and frequent urination of small amounts day and night
- Vascular dementia



MEDICATION RECONCILIATION



Medication Reconciliation

- Average number of prescriptions for an elderly patient – 28.5
- Almost 250,000 seniors are hospitalized each year due to reactions between prescriptions and over-the-counter medications
- Common misuses leading to adverse drug events:
 - Incorrect doses
 - Taking doses at the wrong times
 - Forgetting to take doses
 - Stopping a medication too soon

Top 10 Medications Involved in Adverse Events

Out of the Hospital

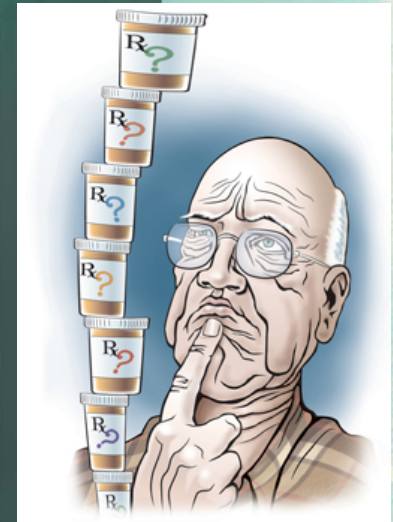
- Insulin
- Anticoagulants
- Amoxicillin
- Aspirin
- Trimethoprim-sulfamethoxazole
- Hydrocodone/acetaminophen
- Ibuprofen
- Acetaminophen
- Cephalexin
- Penicillin

In the Hospital

- Insulin
- Morphine
- Potassium Chloride
- Albuterol
- Heparin
- Vancomycin
- Cefazolin
- Acetaminophen
- Warfarin
- Furosemide

How are errors made?

- Incorrect patient information
 - Age, weight, allergies, diagnoses
- Communication
 - Collaborative teamwork between ALL healthcare members and the patient
- Drug labeling, packaging, and nomenclature
 - Look-alike and sound-alike drug names, confusing packaging
- Drug storage
- Environmental factors
 - Poor lighting, interruptions
- Staff competency and education
- Patient education



What YOU can do for your loved one!

- ✓ Gather all medications
 - Prescriptions
 - Over-the-counter drugs
 - Vitamin/herbal supplements
- ✓ Reinforce the medications
 - Desired effects
 - Instructions (how and when)
 - Possible side effects
 - Drug interactions
- ✓ Develop a medication usage sheet
- ✓ Encourage use of ONE pharmacy
- ✓ Take **current** medication list to **EVERY** physician appointment

Additional Safety Steps

- Ensure proper storage
- Discard any medications expired or without labels
- Never take medications in the dark
- If using a pill box, always keep one pill in the original medication container for identification purposes
- Never mix more than one medication in a pill container



Medication Usage Sheet / List

- ✓ Name of patient
- ✓ Name of medication
- ✓ Color of medication
- ✓ Shape of medication
- ✓ Dosage
- ✓ Frequency
- ✓ Reason taking medication
- ✓ Date started taking medication
- ✓ Prescribing physician's name and contact information
- ✓ Any special instructions/side effects

Drug name <small>(brand name, generic name, dose)</small>	This looks like	How many?	How I take it	I started taking this on:	I stop taking this on:	Why I take it	Who told me to take it
When I get up, I take:							
In the afternoon, I take:							
In the evening, I take:							
Before I go to bed, I take:							
Other medicines that I do not use every day:							

FALL PREVENTION



5 Key Risk Factors

Osteoporosis

- Calcium
- Vitamin D
- Exercise

Lack of Physical Activity

- Exercise regularly
- Wear proper fitting, supportive shoes

Impaired Vision

- Regular screenings
- Clean eye glasses often
- Use color and contrast strips on steps

Medications

- Know side effects
- Talk with physician or pharmacist of fall concerns
- Limit alcohol intake

Environmental Hazards

- Home inspection

Two-thirds of those who experience a fall will fall again within six months

One-third of all falls involve environmental hazards in the home

Home Inspection

- Outdoors
 - Repair cracks of sidewalks and driveways
 - Trim shrubbery along pathway to home
 - Install handrails on stairs and steps
 - Remove high doorway thresholds
 - Keep walk areas clear of clutter and rocks
 - Keep walk areas clear of snow and ice
 - Install adequate lighting by doorways and along walkways leading to doors



Home Inspection

- All Living Spaces

- Use a change in color to denote changes in surface types or levels
- Secure rugs and carpet edges with nonskid tape / avoid throw rugs
- Remove oversized furniture and objects
- Have at least one phone in each level of home
- Reduce clutter
- Adequate lighting (motion or night lights)



Home Inspection

- Bathrooms
 - Install grab bars on walls around the tub and toilet
 - Add nonskid mats to bathtub
 - Mount liquid soap dispenser on bathtub wall
 - Install a portable, hand-held shower head
 - Add a padded bath or shower seat
 - Install a raised toilet seat
 - Use nonskid mats or carpets on floor surfaces that may get wet



Home Inspection

- Kitchen
 - Keep commonly used items within easy reach
 - Make sure appliance cords are out of the way
 - Avoid using floor polish or wax to reduce slick surfaces



Home Inspection

- Living, Dining, and Family Rooms
 - Keep electrical and telephone cords out of the way
 - Arrange furniture to allow ease walking around
 - Remove caster wheels from furniture
 - Use chairs easy to get in and out of
 - Use television remote control and cordless phone
 - Avoid clutter



Home Inspection

- Bedroom
 - Put a bedside light with an easy to reach switch
 - Have a nightlight
 - Locate telephone within reach of bed
 - Adjust height bed to ease getting in and out
 - Have a firm chair, with arms, to sit and dress



Home Inspection

- Stairways, Hallways, and Pathways
 - Keep free of clutter
 - Make sure carpet is secured and remove throw rugs
 - Install handrails along both sides of stairs
 - Apply brightly colored tape to the face of the steps to make them more visible
 - Adequate lighting



ADVOCATE!



Useful Links

www.heart.org

www.caring-for-aging-parents.com

www.cdc.gov/aging/index.htm

www.cpinpa.org