

# Health Services for the Elderly

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The number of people over the age of 65 is growing all over the world, developed as well as the developing countries, like Pakistan. Aging is a continuous process from birth to death. The degree of disability or handicap associated with aging also depends on the society's response. A medical research council report<sup>1</sup> in USA estimated that the total population of USA is set to increase by 8% between 1991 and 2031, the increase in the elderly population will be much higher than that; estimates are:

- \* a 43% increase for those aged 60-74;
- \* a 48% increase for those aged 75-84;
- \* a 138% increase for those aged 85 and over.

Similar estimates are not available about the proportional growth of Pakistani population but according to the survey conducted by the Pakistan Medical Research Council, the prevalence of age related chronic diseases is substantial<sup>2</sup>. For the majority of elderly, quality of life is more important than the length of life.

Successful aging has been defined in terms of retaining the ability to function independently, remaining mobile and undertaking all the activities of daily living e.g., bathing, dressing, getting in and out of bed and eating<sup>3</sup>.

With increasing age there is increased prevalence of visual, auditory and locomotive disability in the elderly. This may result in falls with injuries that may have serious consequences. Wandering and forgetfulness associated with dementia may exacerbate these hazards.

Many citizens above the age of 65 remain active and can contribute a lot to the community. In the Western world a good number of elderly people live independently in the community with or without support from the family and community services. Some are in long-term institutional care and a few are living with their families. In contrast to this, the majority of the elderly in Pakistan live with their families.

The original paper with title, Are the Elderly in Pakistan getting their due Share in Health Services? <sup>4</sup> published in June 2000 issue of JPMA is an attempt to assess the health and social status of elderly in the pen urban and urban communities of Pakistan.

This cross-sectional study is obviously not truly representative of the entire elderly population of Pakistan but is a good effort to produce some work in an area of importance with negligible data to plan future health services for the elderly.

In a study in UK in 1997 on the physical problems found in the over 75s by the annual health check<sup>5</sup>, the most common were urinary problems, problems with the feet or legs and raised blood pressure. In the above Pakistani study the physical ailments found, included diabetes, hypertension, difficulty in walking, visual disturbances and hearing loss. The prevalence of type 2 diabetes and hypertension is obviously higher in the elderly population of Pakistan, requiring special attention to delay or prevent future complications from these two chronic diseases.

There is no doubt that there is a great need for improved geriatric Governmental and non-Governmental services in Pakistan. Increased funding for the care of the expected greater number of elderly in the future is imperative. Pakistan can draw on the experience of other countries. Health promotion and prevention activities including physical activity, social support, awareness of adverse reaction to medications, nutritional counseling and programs to prevent falls can help to develop and maintain optimum levels of functioning in old age. The wish of the

majority of elderly in Pakistan (as anywhere else in the world) to remain active and to be more independent requires attention from all concerned.

## **References**

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