

Geriatric Goalposts: Of Independence And Interdependence

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Abstract

Our elder population has a unique set of needs and necessities, challenges and concerns. This reflects in the approach of geriatric medicine, which aims to ensure functional freedom and independence, as well as healthy ageing, of older citizens. We propose another, higher, aim of geriatric medicine: that is interdependence. This creates a spirit of optimism, in persons of geriatric age group as well as in their health care providers, who are able to interpret goals of medical care in a broader perspective.

Keywords: ADL, geriatrics, gerontology, independence, interdependence, Person centred care.

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Geriatric Medicine

Geriatric medicine is a rapidly evolving field of medicine.¹ Enhanced understanding of the physiological characteristics of our older population, the clinical manifestation of disease in them, and their unique response to drug interventions, has helped us to improve the quality of geriatric care. One of the geriatric-specific issues in medical care is individualization of therapeutic targets. Conventional teaching suggests that achieving a shift from dependence to independence is the overarching aim of geriatric medicine.² While this is certainly true, we suggest another, and broader, goal for geriatrics: interdependence.

Interdependence

Interdependence, as opposed to independence, is a concept that finds traction in sociology.³ It has relevance in economics, politics and coaching as well. It is in medicine, however, that interdependence flourishes. As members of the health care team, and as part of the health care ecosystem, we are interdependent on each other for survival and success. Interdependence not only

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sustains us, but helps us evolve as professionals, as well as human beings. As humans we can not be but interdependent on each other, right from womb to tomb.

Geriatric Goalposts

A similar thought process can be included in geriatric goalposts: achieving interdependence in an older person, and her/his social ecosystem, should be targeted as an accomplishment of geriatric care. How does this help us improve the quality of care we offer our patients? First of all, it reminds us that health is not just an individual construct, but is influenced by family and societal ties. Health of an individual not only depends on physical, mental aspects but also on spiritual and social aspects. Whatever actions we undertake, and interventions that we suggest, are influenced by the social milieu of the individual. This, in fact, is the crux of social gerontology.⁴

Secondly, interdependence helps achieve not only better psychosocial health, but improve biophysical outcomes as well. A 20-year prospective cohort study of 7626 participants⁵ showed that interdependence and self-acceptance decreased mortality risk by 17%, and added two years to life. Thus interdependence is not only an aim in itself, but a tool to achieve longevity as well.

Thirdly, health care professionals need to be aware of the concept of interdependence towards geriatric population and it's benefit in geriatric care. We need to make people understand that each of them has a uniqueness to contribute in others life and in case of geriatric population, it's their unique experiences in life that they can contribute for others to learn from.

Thirdly, interdependence may be viewed as an acceptable outcome in persons who feel that they are not fully independent. In geriatrics, patients complain of lack of satisfaction, as they are unable to reconcile with changing structure and function. The concept of independence helps bring acceptance, serenity and calmness, by highlighting the strengths of the concerned individual. A senior citizen who is able to contribute to family and society in any manner, by sharing blessings and wisdom, by spreading happiness and harmony, will accept her/his health status happily, even if she/he is dependent upon others for a few activities of daily living (ADL). This is the essence of interdependence.

We Too Are Interdependent

Interdependence manifests in many ways, including the conceptualization and crafting of this article. We acknowledge, with gratitude, the learnings and insights shared with us by our elders, both at home, and in the clinic. We continue to evolve, and to improve, while serving the elders of our nation. In the spirit of interdependence, we seek their blessings and beatitude.

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