

Seniors are not just wrinkly adults

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Emergency patients over the age of 74 have significantly different and more complex health and social needs than their younger counterparts, even after controlling for illness severity, which has important implications about aging populations and emergency departments of the future. The results of the most extensive international study of the characteristics and outcomes of older emergency patients to be reported to date were published online Tuesday in *Annals of Emergency Medicine*.

"These patients have complex profiles before they come to the ER, and even more complicated needs once they get there," said lead study author Leonard C. Gray, MD, PhD, of the Centre for Research in Geriatric Medicine at the University of Queensland in Brisbane, Australia. "Dependence on others and geriatric illnesses, such as cognitive impairment and mobility problems, affect the majority of older emergency patients across a wide range of nations with different health systems and cultural contexts. They require specialized care to avoid missed diagnoses, [pressure ulcers](#) and a range of other potential problems associated with this particular population."

Researchers examined medical records for 2,282 patients older than 74 in 13 different emergency departments in seven countries (Australia, Belgium, Canada, Germany, Iceland, India and Sweden). Functional and [cognitive problems](#) increased dramatically after patients arrived at the emergency department.

More than one-third (37 percent) of patients had a recent fall, prior to coming to the emergency department.

Prior to visiting the emergency department, nearly half (46 percent) were dependent on others in one or more activities of daily living; after coming to the emergency department, only 33 percent were completely independent in all activities. In the [emergency department](#), 26 percent displayed symptoms of [cognitive impairment](#), whereas before coming to the ER only 20 percent had [cognitive difficulties](#). Before coming to the ER, 26 percent of older patients could not walk without supervision; after coming to the ER, that number rose to 49 percent.

"Frailty, confusion and dependence on others make these our most fragile emergency patients," said Dr. Gray. "Specialized training in geriatric care and even specialized layout and procedures can help us provide the best assessment and care. The growing prevalence of older patients in ERs around the world suggests a need for careful scrutiny of current clinical practice and design of emergency departments worldwide."

More information: www.annemergmed.com/webfiles/ials/ymem/FA-5523.pdf

Provided by American College of Emergency Physicians

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