
HEALTH AND SICKNESSES
OF OLDER PEOPLE

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HEALTH AND SICKNESSES OF OLDER PEOPLE

This chapter is about the prevention and treatment of problems seen mostly in older persons.

SUMMARY OF HEALTH PROBLEMS DISCUSSED IN OTHER CHAPTERS

Difficulties with Vision: (see p. 268)

After the age of 40, many people have problems seeing close objects clearly. They are becoming *farsighted*. Often glasses will help.



Everyone over age 40 should watch for signs of glaucoma, which can cause blindness if left untreated. Any person with signs of glaucoma (see p. 267) should seek medical help.

Cataracts (see p. 270) and 'flies before the eyes' (tiny moving spots—p. 272) are also common problems of old age. Cataracts can be corrected easily by a small operation.

Weakness, Tiredness, and Eating Habits:

Old people understandably have less energy and strength than when they were younger, but they will become even weaker if they do not eat well. Although older people often do not eat very much, they should eat some body-building and protective foods every day (see p. 128 to 131).



Swelling of the Feet: (see p. 214)

This can be caused by many diseases, but in older people it is often caused by poor circulation (see p. 254) or heart trouble (see p. 371). Whatever the cause, **keeping the feet up is the best treatment**. Walking helps too—but do not spend much time standing or sitting with the feet down. Keep the feet up whenever possible.

Chronic Sores of the Legs or Feet: (see p. 28)

These may result from poor circulation, often because of varicose veins (p. 213). Sometimes diabetes is part of the cause (p. 149). For other possibilities, see page 28.

Sores that result from poor circulation heal very slowly.

Keep the sore as clean as possible. Wash it with boiled water and mild soap and change the bandage often. If signs of infection develop treat as directed on p. 101.

When sitting or sleeping, keep the foot up.



Difficulty Urinating: (see p. 279)

Older men who have difficulty urinating or whose urine drips or dribbles are probably suffering from an enlarged prostate gland. Turn to page 279

Chronic Cough: (see p. 205)

Older people who cough a lot should not smoke and should seek medical advice. If they had symptoms of tuberculosis when they were younger, or have ever coughed up blood, they may have tuberculosis.

If an older person develops a cough with wheezing or trouble breathing (asthma) or if his feet also swell, he may have heart trouble (see the next page).



Rheumatoid Arthritis (painful joints): (see p. 210)

Many older people have arthritis.

To help arthritis:

- Rest the joints that hurt.
- Apply hot compresses (see p. 236).
- Take a medicine for pain; aspirin is best. For severe arthritis, take 2 to 3 aspirin tablets up to 6 times a day with bicarbonate of soda, milk, or a lot of water. (If the ears begin to ring, take less.)
- It is important to do exercises that help maintain as much movement as possible in the painful joints.




OTHER IMPORTANT ILLNESSES OF OLD AGE

Heart Trouble:

Heart disease is more frequent in older people, especially in those who are fat, who smoke, or who have high blood pressure.

Signs of heart problems:

- 
- Anxiety and difficulty in breathing after exercise; asthma-like attacks that get worse when the person lies down (cardiac asthma).
 - A rapid, weak, or irregular pulse.
 - Swelling of the feet - worse in the afternoons.
 - Sudden, painful attacks in the chest, left shoulder, or arm that occur when exercising and go away after resting for a few minutes (angina pectoris).
 - A sharp pain like a great weight crushing the chest; does not go away with rest (heart attack).

Treatment:

- Different heart diseases may require different specific medicines, which must be used with great care. If you think a person has heart trouble, seek medical help. It is important that he has the right medicine when he needs it.
- People with heart trouble should not work so hard that they get chest pain or have troubled breathing. However, regular exercise helps prevent a heart attack.
- Persons with heart problems should not eat greasy food and should lose weight if they are overweight.
- If an older person begins having attacks of difficult breathing or swelling of the feet, he should not use salt or eat food that contains salt. For the rest of his life he should eat little or no salt.
- If a person has angina pectoris or a heart attack, he should rest very quietly in a cool place until the pain goes away.

If the chest pain is very strong and does not go away with rest, or if the person shows signs of **shock** (see p.89), the heart has probably been severely damaged. The person should stay in bed for at least a week or as long as he is in pain or shock. Then he can begin to sit up or move slowly, but should stay very quiet for a month or more. Consider getting medical help.

Prevention: See the next page.



Words to Younger Persons Who Want to Stay Healthy When They Are Older

Many of the health problems of middle and old age, including high blood pressure, hardening of the arteries, heart disease, and stroke, result from the way a person has lived and what he ate, drank, and smoked when younger. Your chances for living and staying healthy longer are greater if you:

1. **Eat well**—enough nutritious foods, but not too much rich or greasy food. Avoid getting overweight or fat.
2. **Do not drink a lot of alcoholic drinks.**
3. **Do not smoke.**
4. **Keep physically and mentally active.**
5. **Try to get enough rest and sleep.**
6. **Learn how to relax** and deal positively with things that worry or upset you.

High blood pressure (p. 147) and hardening of the arteries (arteriosclerosis), which are the main causes of heart disease and stroke, can usually be prevented—or reduced—by doing the things recommended above. The lowering of high blood pressure is important in the prevention of heart disease and stroke. Persons who have high blood pressure should have it checked from time to time and take measures to lower it. For those who are not successful in lowering their blood pressure by eating less (if they are overweight), giving up smoking, getting more exercise, and learning to relax, medicines to lower blood pressure (antihypertensives) may help.



WHICH OF THESE TWO MEN IS LIKELY TO LIVE LONGER AND BE HEALTHY IN HIS OLD AGE?
WHICH IS MORE LIKELY TO DIE OF A HEART ATTACK OR A STROKE? WHY? HOW MANY
REASONS CAN YOU COUNT?

Stroke, (Apoplexy, Cerebro-Vascular Accident, CVA)

In older people *stroke* or *cerebro-vascular accident* (CVA) commonly results from a blood clot or from bleeding inside the brain. The word *stroke* is used because this condition often strikes without warning. The person may suddenly fall down, unconscious. His face is often reddish, his breathing hoarse, his pulse strong and slow. He may remain in a coma (unconscious) for hours or days.

If he lives, he may have trouble speaking, seeing, or thinking, or one side of his face and body may be paralyzed. In minor strokes, some of these same problems may result without loss of consciousness. The difficulties caused by stroke sometimes get better with time.

Treatment:

Put the person in bed with his head a little higher than his feet. If he is unconscious, roll his head back and to one side so his saliva (or vomit) runs out of his mouth, rather than into his lungs. While he is unconscious, give no food, drink, or medicines by mouth (see the Unconscious Person, p. 90). If possible, seek medical help.

After the stroke, if the person remains partly paralyzed, help him to walk with a cane and to use his good hand to care for himself. He should avoid heavy exercise and anger.

Prevention: See the page before this one.

Note: If a younger or middle-aged person suddenly develops paralysis on one side of his face, with no other signs of stroke, this is probably a temporary paralysis of the face nerve (Bell's Palsy). It will usually go away by itself in a few weeks or months. The cause is usually not known. No treatment is needed but hot soaks may help. If one eye does not close all the way, bandage it shut at night to prevent damage from dryness.



Deafness with Ringing of the Ears and Dizziness

Deafness that comes on gradually without pain or other symptoms is usually incurable, though a hearing aid may help. Sometimes deafness results from ear infections (see p.355).

If an older person loses hearing in one or both ears—occasionally with severe dizziness—and hears a loud 'ringing' or buzzing, he probably has Ménière's disease. He should take an antihistamine, such as dimenhydrinate (*Dramamine*, p. 420) and go to bed until the symptoms go away. He should have no salt in his food. If he does not get better soon, or if the problem returns, he should immediately seek medical advice.



Loss of Sleep (Insomnia)

It is normal for older people to need less sleep than younger people. During long winter nights they may spend hours without being able to sleep.

Certain medicines may help bring sleep, but it is better not to use them if they are not absolutely necessary.

Here are some suggestions for sleeping:

- Get plenty of exercise during the day.
- Do not drink coffee or black tea, especially in the afternoon or evening.
- Drink a glass of warm milk or milk with honey before going to bed.
- Take a warm bath before going to bed.
- If you still cannot sleep, try taking an antihistamine like promethazine (*Phenergan*, p. 419) or dimenhydrinate (*Dramamine*, p. 420) half an hour before going to bed. These are less habit-forming than stronger drugs.

DISEASES FOUND MORE OFTEN IN PEOPLE OVER 40 YEARS OLD

Cirrhosis of the Liver:

Cirrhosis usually occurs in men over 40 who for years have been eating poorly and drinking a lot of liquor (alcohol).

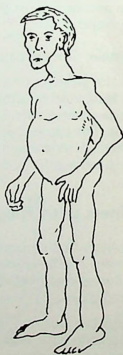
Signs:

- Cirrhosis starts like hepatitis, with weakness, loss of appetite, upset stomach, and pain on the person's right side near his liver.
- As the illness gets worse, the person gets thinner and thinner. He may vomit blood. In serious cases the feet swell, and the stomach swells with liquid until it looks like a drum. The eyes and skin may turn yellowish (jaundice).

Treatment:

When cirrhosis is severe, it is hard to cure. There are no medicines that help much. Most people with severe cirrhosis die from it. If you want to stay alive, **at the first sign of cirrhosis** do the following:

- Never drink alcohol again! Alcohol poisons the liver.
- Eat as well as possible: foods high in protein and vitamins.
- If a person with cirrhosis has swelling, he should not use any salt in his food.



Prevention of this disease is easy: **DO NOT DRINK SO MUCH.**

Gallbladder Problems:

The gallbladder is a small sac attached to the liver. It collects a bitter, green juice called bile, which helps digest fatty foods. Gallbladder disease occurs most commonly in persons who are 'fat, female and 40'.

Signs:

- Sharp pain in the stomach at the edge of the right rib cage. This pain sometimes reaches up to the right side of the upper back.
- The pain may come an hour or more after eating rich or fatty foods. Severe pain may cause vomiting.
- Sometimes there is fever.
- Occasionally the eyes may become yellow (jaundice).



Treatment:

- Take belladonna or another antispasmodic drug to calm the pain (p. 415). Strong painkillers are often needed. (Aspirin will probably not help.)
- If the person has a fever, she should take tetracycline (p. 400) or ampicillin (p. 399).
- Do not eat greasy food. Overweight (fat) people should eat small meals and lose weight.
- In severe or chronic cases, seek medical help. Sometimes surgery is needed.

Prevention:

Women who are overweight should lose weight (see p. 148). Avoid rich, sweet, and greasy food—and do not eat too much.

Biliousness:

In many countries and in different languages, bad-tempered persons are said to be 'bilious'. Some people believe that fits of anger come when a person has too much bile.

In truth, most bad-tempered persons have nothing wrong with their gallbladders or bile. However, persons who do suffer from gallbladder disease often live in fear of a return of this severe pain and perhaps for this reason are sometimes short-tempered or continually worried about their health. (In fact, the term 'hypochondria', which means to worry continually about one's own health, comes from 'hypo', meaning under, and 'chondrium', meaning rib—referring to the position of the gallbladder!)

ACCEPTING DEATH

Old people are often more ready to accept their own approaching death than are those who love them. Persons who have lived fully are not usually afraid to die. Death is, after all, the natural end of life.

We often make the mistake of trying to keep a dying person alive as long as possible, no matter what the cost. Sometimes this adds to the suffering and strain for both the person and his family. There are many occasions when the kindest thing to do is not to hunt for 'better medicine' or a 'better doctor' but to be close to and supporting of the person who is dying. Let him know that you are glad for all the time, the joy and sorrow you have shared, and that you, too, are able to accept his death. In the last hours, love and acceptance will do far more good than medicines.

Old or chronically ill persons would often prefer to be at home, in familiar surroundings with those they love, than to be in a hospital. At times this may mean that the person will die earlier. But this is not necessarily bad. We must be sensitive to the person's feelings and needs, and to our own. Sometimes a person who is dying suffers more knowing that the cost of keeping him barely alive causes his family to go into debt or children to hunger. He may ask simply to be allowed to die—and there are times when this may be the wise decision.

Yet some people fear death. Even if they are suffering, the known world may be hard to leave behind. Every culture has a system of beliefs about death and ideas about forms of life after death. These ideas, beliefs, and traditions may offer some comfort in facing death.

Death may come upon a person suddenly and unexpectedly or may be long-awaited. How to help someone we love accept and prepare for his approaching death is not an easy matter. Often the most we can do is offer support, kindness, and understanding.

The death of a younger person or child is never easy. Both kindness and honesty are important. A child—or anyone—who is dying often knows it, partly by what his own body tells him and partly by the fear or despair he sees in those who love him. Whether young or old, if a person who is dying asks for the truth, tell him, but tell him gently, and leave some room for hope. Weep if you must, but let him know that even as you love him, and because you love him, you have the strength to let him leave you. This will give him the strength and courage to accept leaving you. To let him know these things you need not say them. You need to feel and show them.

We must all die. Perhaps the most important job of the healer is to help people accept death when it can or should no longer be avoided, and to help ease the suffering of those who still live.



The book *Where There Is No Doctor* is available at Rs 29/- plus postage. Multiple copies of reprints of various chapters are also available.

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