

DISORDERS MORE COMMON IN OLDER

A number of disorders are more common in older adults

than in younger persons. They are not caused by aging

itself, and do not occur in all older adults.

There is insufficient space to list a few of the more com-

mon disorders here (more trans-system problems can be

found in the section on Geriatric Giants), and readers are advised to consult their favourite and trusted.

Anemia

Using WHO criteria (Hb <120 g per L in women and <130 g per L in men), the prevalence of anemia in the elderly ranges from 8 to 44 percent, with the highest prevalence in men 85 years and older.

A cause can be found in ~80 percent of elderly patients.

The most common causes of anemia are anemia of chronic disease and iron deficiency, but Vitamin B12 deficiency, folate deficiency,

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GI bleeding and myelodysplastic syndrome are also com-

mon causes

Atrial Fibrillation (Afib)

The prevalence of atrial fibrillation increases with age,

about 3% in those in their early 60s, and is up to 10% in those older than 80.

Afib is associated with a higher risk of cardiovascular death, congestive heart failure and peripheral embolic

stroke in older patients.

Cardiovascular Disease

Cardiovascular disease is the leading cause of death in older

Hypertension (HTN), the best predictor of coronary artery disease, increases dramatically in prevalence with aging; isolated systolic HTN occurs in 34% of men and 38% of women aged 65 to 74.

50% of Canadian seniors are on no treatment at all for HTN

Congestive Heart Failure (CHF) is the most common cause of hospitalization among those aged 65+ in the

US

Cancer

Lung cancer is the most common cause of cancer-related deaths in both men and women; 68% of cases occur in people over 65.

>50% of breast cancer patients are older than 65 at diagnosis

Prostate cancer is the most commonly diagnosed cancer among

Cerebrovascular Disease (Stroke)

One Canadian study estimated 4.1% of people aged 65+ in the community are living with the effects of stroke (CMAJ Sept. 22, 1998; 159).

Seniors who experienced stroke more often reported their health to be "poor" or "fair" than seniors who had not (69% v. 25%).

Chronic obstructive pulmonary disease (COPD)

. COPD is the fourth-leading killer disease of the elderly

in Canada.

Cigarette smoke is the underlying cause in -80% to 90% of cases.

. Prevalence of COPD for those aged 65-74 years is 5.0%; and for those over 75 years is 6.8%.

Dementia

Alzheimer Disease (AD) is the leading cause of dementia

Diabetes Mellitus

. Diabetes has a prevalence of -13% in persons over 65.

Type II diabetes mellitus is the most common form of diabetes in the elderly, accounting for about 92% of cases, and is the 6th leading cause of death in men over 65.

- The onset of Type II DM occurs 40% of the time after the age of 60, and there is often a long delay before diagnosis.
- Long-term studies have shown that 35% of seniors with diabetes suffer from retinopathy 18% from cardiovascular disease, 30% from peripheral vascular disease and 12% from nephropathy.

Hypothyroidism

- One US survey of community dwelling elders found 7% of women and 3% of men between 60 - 89 years of age with this hormone deficiency.
- The Canadian Study on Health and Aging (CSHA) found 9% of their study population had subclinical hypothyroidism.

Osteoarthritis

- 85% of people over the age of 70 suffer from osteoarthritis.

It is the number 1 cause of long-term disability in Canada.

Osteoporosis

Estimates from the Osteoporosis Society of Canada suggest that 1.4 million Canadians have osteoporosis, a leading risk factor for bone fractures and death or morbidity after a fall.

Parkinson's Disease (PD)

Roughly 1/100 persons in North America are affected. Average age of diagnosis is 60; the rates rise in persons >70.

Dementia, a feared complication, increases in prevalence with age; it occurs in approximately 30% of patients with advanced PD.

Pneumonia

Influenza/pneumonia is a major contributor to deaths and hospitalization in the elderly and is the leading cause

of death from infectious disease.

Prostate Disease

Symptomatic Benign Prostatic Hypertrophy (BPH) is very common, affecting 40 to 50% of men aged 51 to

60 years, and ~80% of men by age 80.

Skin Disease



US datum show that 20% of all GP visits for those 65+ are motivated by a skin problem (i.e. rash, pruritis,

photo aging, cancer).

Surveys show that 2/3 of those 65+ have at least one dermatological disorder. Physiological changes in aging skin when combined with immobility and incontinence predispose elderly persons to have pressure ulcers; prevalence rate in acute care range from 3.5% to 30% and in long term care facilities from 2.4% to 23%.

Sexual Dysfunction

- Erectile dysfunction (ED) is the most common form of sexual dysfunction in elderly men, affecting nearly 70% of men age 70.

The prevalence of sexual dysfunction in elderly women

is largely unknown, but reduced libido, inhibited orgasm and dyspareunia are the most common disorders, and are largely due to the decline of estrogen production.

Urinary Tract Infections

. Prevalence of asymptomatic bacteriuria in the elderly

range from 15-60% depending on the study, with twice

as many females as men affected.

The annual incidence of symptomatic bacterial UTIS is estimated to be as high as 10% in those over 65.

Vision Loss

Thirteen percent of Canadians over age 65 have some form of visual impairment.

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Almost 8% of seniors over 65 (and 11% if over 80) have impairment (blindness in both eyes) sufficient to meet the legal definition of blindness (visual acuity (VA) less than 20/200)

Glaucoma is present in less than 1.5% of those under 65, 2-3% in those aged 65-74, and between 2.5-7% for those over 75.

GERIATRIC PEOPLE PROBLEMS

HEALTH PROBLEMS

1. Joint problems
2. Impairment of special senses
3. Cardio vascular disease



11% of Canadians between 65 to 74 years of age & 30% of persons over the age of 75 have Age Related Macular Degeneration (ARMD), the most common cause of irreversible vision loss in seniors.

Diabetic retinopathy accounts for 35% of all cases of blindness; prevalence increases with age and the duration of the disease.

The prevalence of lens cataracts sufficient to impair vision (visual acuity less than 20/30) rises from 1% by age 50 to 100% by age 90.

4. Hypothermia
5. Cancer, Prostate enlargement, Diabetes & Accidental falls

Psychological problems

1. Emotional problems
2. Suicidal tendency
3. & Senile dementia, Alzheimer'disease

Social problems

Poverty, Loneliness, Dependency, Isolation, Elder
abuse, Generation Gap