Systems Issues in the Elderly

The Hospital as an Inhospitable Place for an Elderly Patient
Case Presentation

Mr. A is a 93 y/o male with a h/o dementia, HTN and metastatic prostate cancer. Prior to his hospitalization, he was living with his wife, doing his ADLs and IADLs. His medications include HCTZ, Toprol, Fosamax and Aricept. He fell at home and came to BAMC ER where he was found to have a pathologic hip fracture.

Labs notable for:

BUN:Crt 24:1, Hgb 12, Alb 3.8, TSH 4.0
Case Continued

Mr. A undergoes an ORIF and by POD #2, he becomes delirious.

Due to his delirium, he is found to be agitated and restless, he has pulled out his IV line and is getting ready to pull out his Foley catheter. He is placed in restraints. He then tries to get out of bed and falls.
Case Continued

By the time of discharge, Mr. A is able to walk with a walker independently, he can shave himself and dress, but needs help bathing. He can no longer self-administer medications or cook meals. He no longer feels comfortable driving.

He is sent to a SNF and after one month he returns home with 24 hour care.
Hospital Issues

- Delirium
- Falls
- Restraint use
- Functional decline
- Discharge to higher level of care
Life Issues

- Lack of independence
- Lack of dignity
- Diminished quality of life
- Decreased lifespan
How Can We Avoid This?

Healthy, Independent Older Man

Hospitalized Older Man

Dependent Older Man
Functional Decline
Discussion Questions

1. From the moment an older person enters the emergency room:
   a) What barriers are there for effective care?
   b) How can these barriers be overcome?
   c) Is the ER concept the correct one for an older adult? What other options of care might be better, if any?
Discussion Questions

1. How can delirium be prevented in the hospital on a systems level?
2. What can we do to minimize falls in the elderly hospitalized population?
3. Should restraints be allowed? Are there better ways to control patients? If yes, what are they? How can we implement these hospital-wide?
Discussion Questions

1. How can we ensure that elderly patients maintain their independence?
2. How can we discharge patients to the same level of care?
3. How can we avoid functional decline?
4. How can we maintain dignity and quality in our hospitalized elders?