



# Healthy Ageing For CHO/SN





# LEARNING OBJECTIVES



At the end of the session the learner should be able to:

- Describe ageing and age related changes
- Assess risk in elderly persons



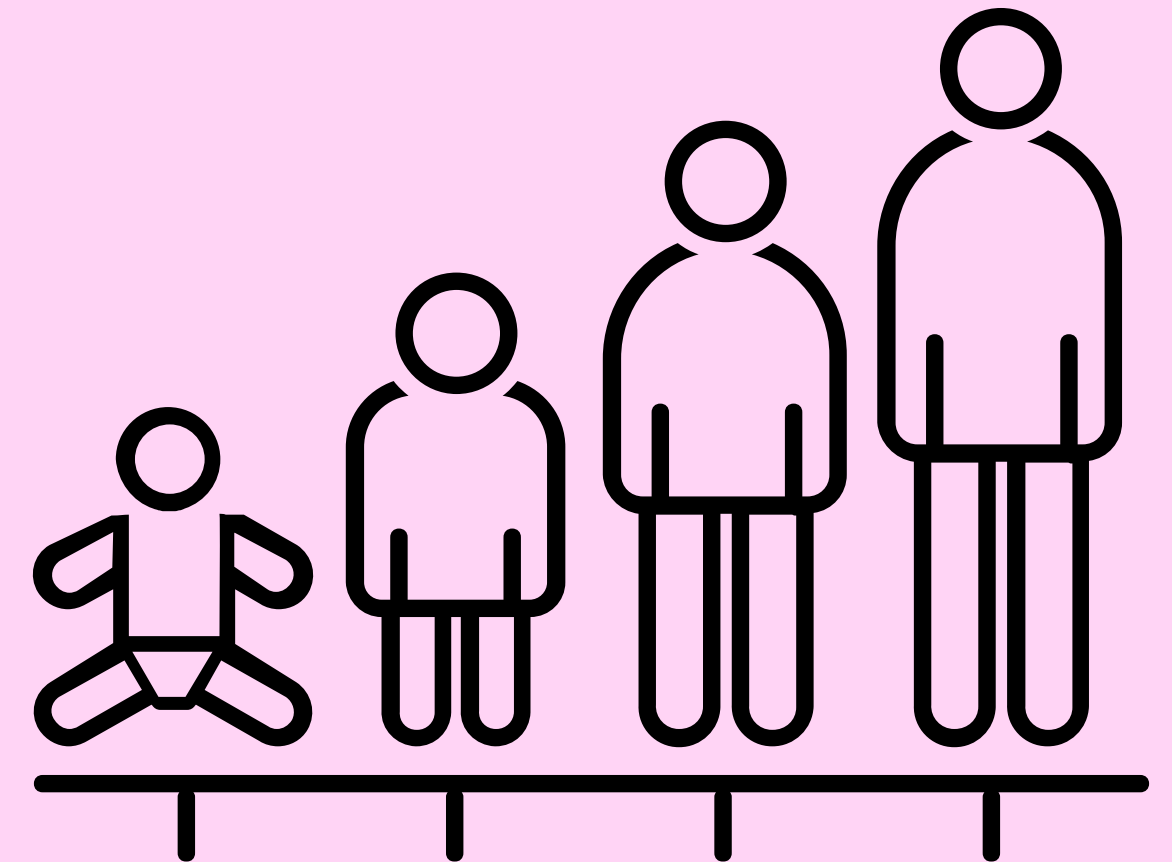
# WHO IS AN ELDERLY?





# WHAT IS AGEING?

- Ageing is a universal phenomenon comprising of gradual loss of cells leading to deterioration of organ functions in a human body.
- Age related alteration affects across the elderly population and their body function diminishes.







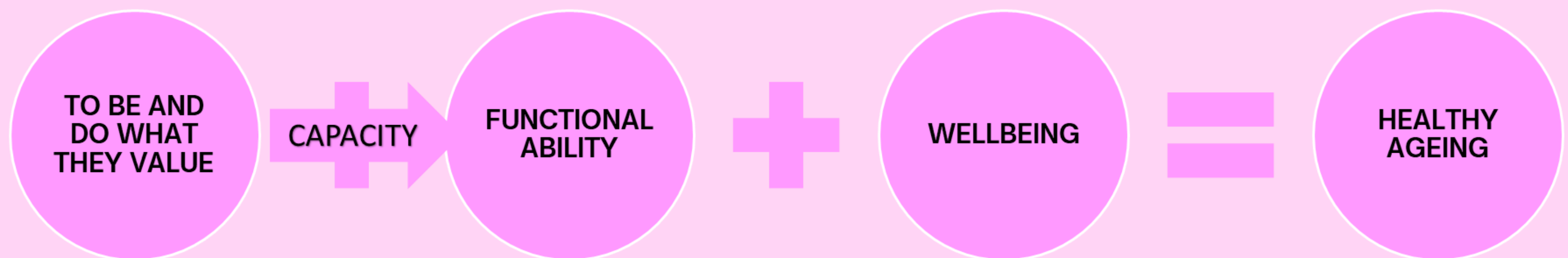
# AGE RELATED CHANGES IN HUMAN BODY

- Ageing is NOT A 'DISEASE' but the elderly population is more susceptible to various diseases due to diminished immune responses and poor regenerating capacities.
- It is important for a caregiver to understand the age-related changes in the human body which will further help in meeting their needs.



# WHAT IS HEALTHY AGEING?

Healthy Ageing is “the process of developing and maintaining the functional ability that enables wellbeing in older age”. Functional ability is about having the capabilities that enable all people to be and do what they have reason to value.





## FUNCTIONAL ABILITY ALSO MEANS A PERSON'S ABILITY TO:

MEET THEIR BASIC NEEDS

TO CONTRIBUTE TO SOCIETY

TO BUILD AND MAINTAIN RELATIONSHIPS

TO BE ABLE TO ROAM AROUND/BE MOBILE

TO LEARN, GROW AND MAKE DECISIONS





**Functional ability** of an individual is made up of the interaction between his/her intrinsic capacity and the environment in which he/she inhabits.

**Intrinsic capacity** means all the mental and physical capacities that a person can draw on. It is as simple as their ability to walk, think, see, hear and remember. This capacity changes with the presence of diseases, injuries and age-related changes. In the elderly, the intrinsic capacity is often reduced.

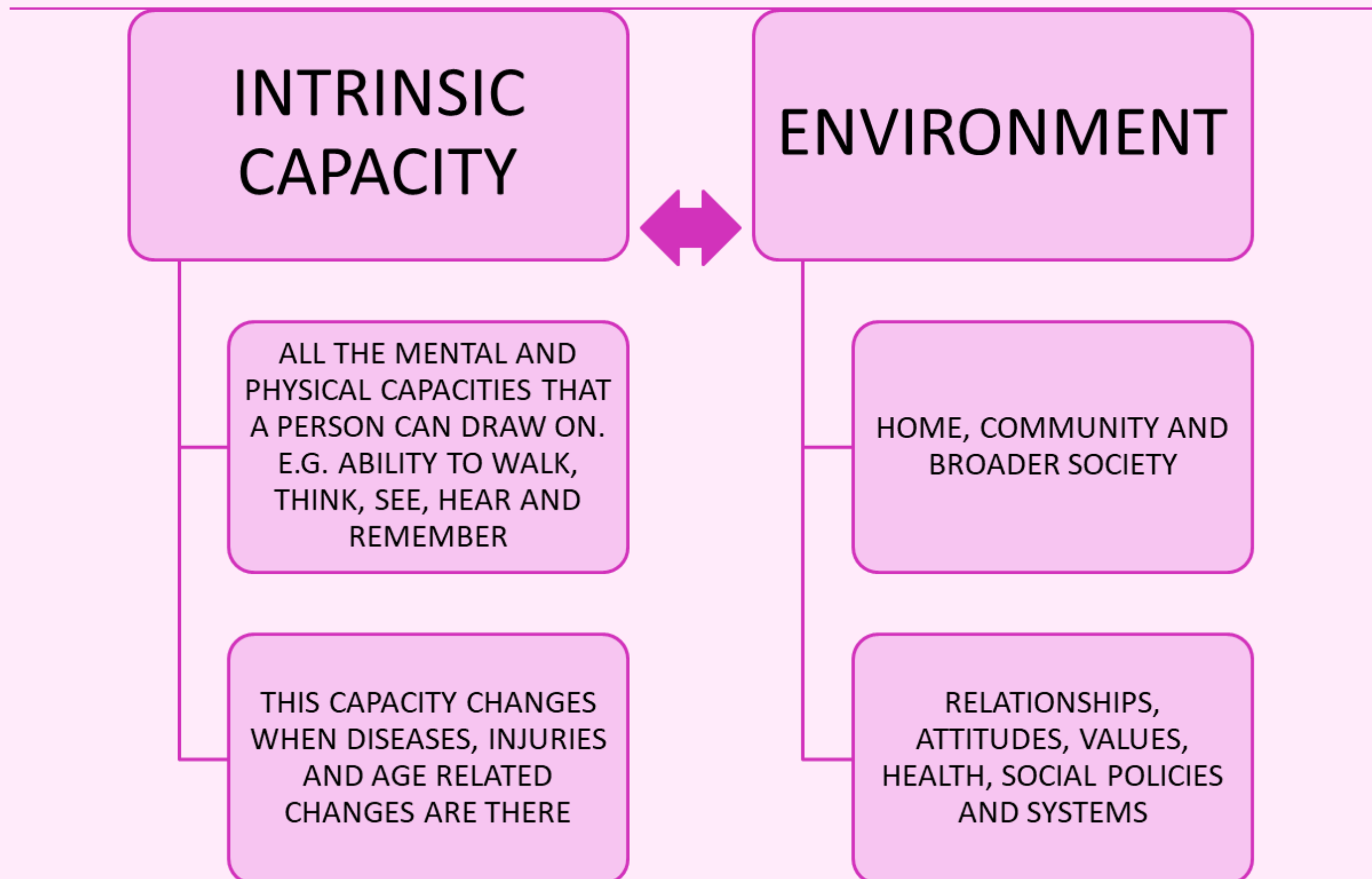
**Environment** includes the home, community and broader society, and all the factors within them. The factors are the environment, people and their relationships, attitudes and values, health and social policies, the systems that support them and the services that they implement.

For elderly, it is important to have an environment where in they can feel comfortable and accepted.





# FUNCTIONAL ABILITY

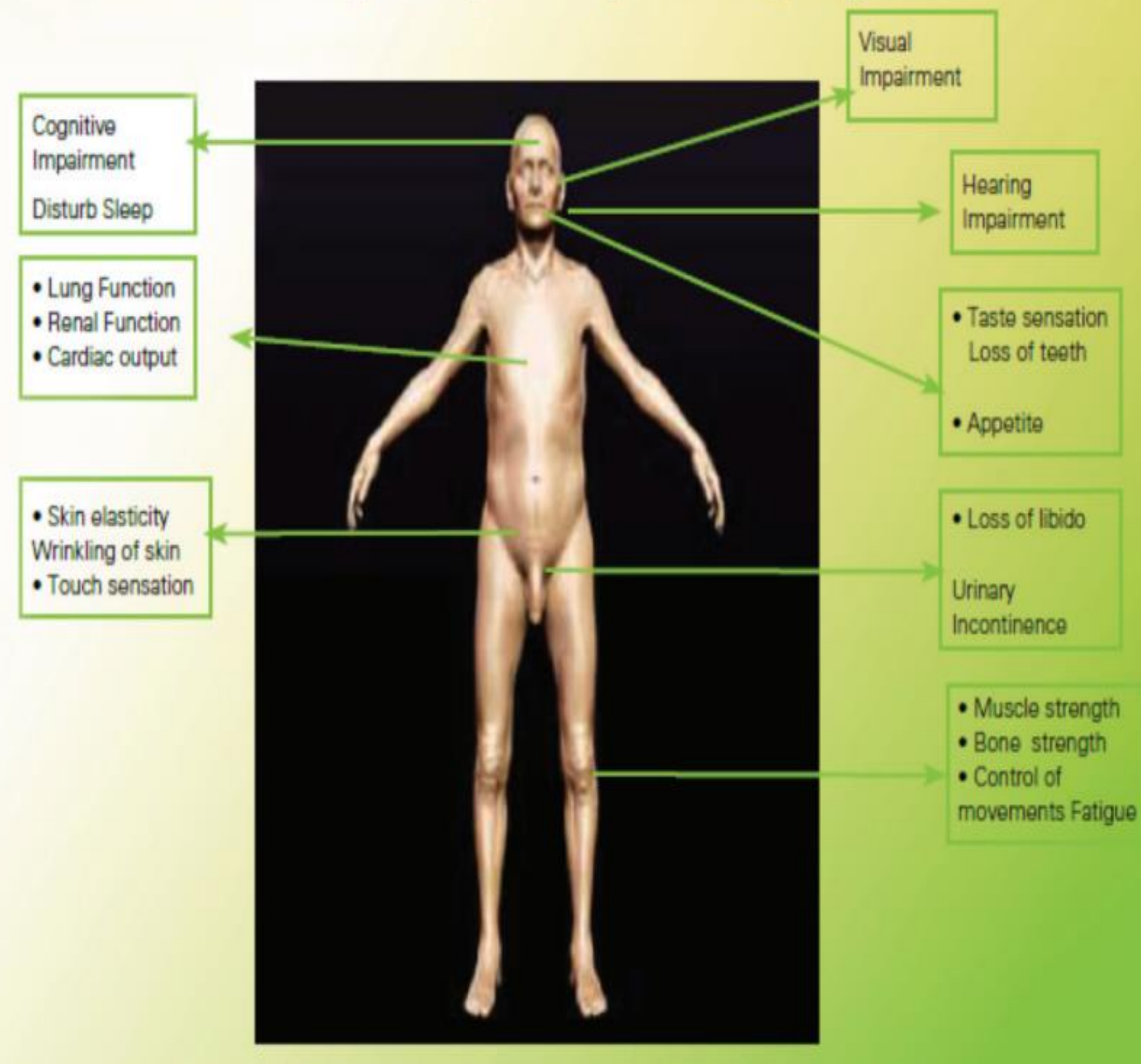




## What are the Signs of Ageing?

- Vision impairment
- Hearing impairment
- Disturbed sleep
- Loss of teeth
- Change in taste
- Decline in functions of lungs
- Decline in functions of heart
- Decline in functions of kidney

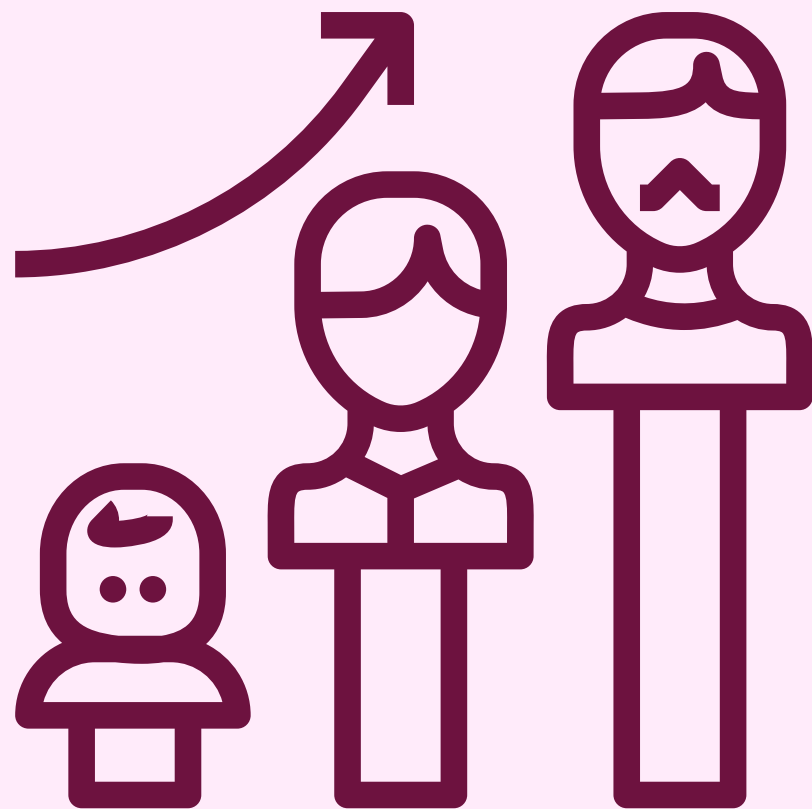
## Physiological Signs of Ageing







# SIGNS OF AGEING (CONTD.)



- Wrinkling of skin
- Decrease in muscle strength
- Decrease in bone strength
- Loss of bladder control
- Loss of appetite
- Decrease in sexual function
- Decrease in memory
- Increase in tiredness



# ASSESSMENT- HEALTH RISKS IN OLDER PATIENTS: MATCH THE FOLLOWING

S NO	HEALTH RISKS	ILL EFFECTS
1	Nutritional deficiencies (Over or under nutrition)	A. Diabetes, cancer, cardiovascular diseases, and lung diseases
2	Inadequate consumption of fibers and fruits	B. Infections, nosocomial complications (pneumonia, UTI, Catheter related) , Decreased physical functioning
3	Physical inactivity and sedentary lifestyle	C. Decreased physical functioning, falls, orthostatic hypotension, delirium, renal failure, gastrointestinal and intracranial bleeding
4	Smoking	D. Decreased bone mass, immune dysfunction
5	Excessive alcohol consumption	E. Constipation
6	Unpropitious drug reaction and polypharmacy	F. Functional decline, loss of appetite
7	Accidents and injuries	G. Decreased rate of metabolism, liver diseases, Cancer





# ASSESSMENT KEY- HEALTH RISKS IN OLDER PATIENTS

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6	Unpropitious drug reaction and polypharmacy	C. Decreased physical functioning, falls, orthostatic hypotension, delirium, renal failure, gastrointestinal and intracranial bleeding
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# ASSESSING RISK IN ELDERLY PERSONS

The ASHA uses Section B3 of CBAC Form

B3: Elderly Specific (60 years and above)	Y/N	B3: Elderly Specific (60 years and above)	Y/N
Do you feel unsteady while standing or walking?		Do you need help from others to perform everyday activities such as eating, getting dressed, grooming, bathing, walking, or using the toilet?	
Are you suffering from any physical disability that restricts your movement?		Do you forget names of your near ones or your own home address?	
Note: A “YES” in any of the questions mean the ASHA must refer person to MPW			



# MOBILITY-BASED CLASSIFICATION

1. Mobile elderly

2. Restricted mobile elderly (mobility only with personal assistance or device) and

3. Bed-bound (assistance required in some form)/home bound elderly for any reason and those requiring palliative care or end of life care)





# EVALUATION QUESTIONS

1. Ageing is a universal phenomenon comprising of \_\_\_\_\_ leading to \_\_\_\_\_ in a human body.

2. Ageing is an illness True/False

3. The three mobility-related states for the elderly are ....., ..... And .....







# ANSWERS

1. Ageing is a universal phenomenon comprising of gradual loss of cells leading to the deterioration of organ functions in the human body.
2. Ageing is an illness True/**False**
3. The three mobility-related states for an elderly are mobile elderly, restricted mobile elderly, and bed-bound elderly.





# Thank You

