

SUMMARY

Health maintenance of geriatric patients is an integral part of General Practice.

Population ageing is a global phenomenon and Sri Lanka will also feel the impact.

Maintenance of health in the growing elderly population is possible through strengthening of preventive care. The goal of prevention in elderly should be, to maintain optimal function for as long as possible and postpone the development of disability, to enhance the quality of life. "To add life to the years added on to life" should be the universal motto. Functional assessment screening by the General Practitioner is necessary to evaluate the health status of the elderly patients. The recognition of functional impairment can result in the discovery of previously undiagnosed and often highly treatable conditions. Vision, hearing and mobility are three such problems found to be common in studies done in Sri Lanka. Unlike in the west, there is no systematic geriatric screening method developed to suit the health needs and resources of Sri Lanka. Development of a feasible screening procedure would aid general practitioners in Sri Lanka to meet the challenge of maintaining the health of the increasing number of elders in their practice.

This study attempts to assess the functional disability and screen for impairment, among all elders attending a suburban University Family Practice, during a period of two months.

A descriptive cross sectional study was carried out in a suburban University Family Practice. All elders 65 years and above, consulting during the study period of two months and meeting the eligibility criteria (n=108) were included in the study. 'Infrequent attendees' (defined for the purpose of this study as those who had not consulted even once for the past one year) among the elders aged 75 years and above were identified. A comparable sample (n=26) to those consulting at the practice was obtained for home visits. Data was collected by the principal investigator using an interviewer administered questionnaire. The functional ability in terms of activities of daily living (ADL) and instrumental activities of daily living (IADL) was assessed.

A geriatric screening method to detect impairment in vision, hearing and mobility was developed for the study. This assessment procedure was carried out in 10 other general practices in Sri Lanka to study its feasibility. Data was analyzed using SPSS version 10 and manual calculations. Z test was used to determine the statistical significance at 90% and 95% confidence intervals.

The results showed that 76% of elders who consulted were between 65 to 74 years of age and 60% were females. They were independent in all ADL related to toilet use and self care. However, dependence was seen in ADL related to mobility. A statistically significant increase in disability with increase in age was not seen in ADL related to toilet use and self care, but was seen in ADL related to mobility ($P < 0.05$). There was more dependence in IADL when compared with ADL in the sample. A statistically significant increase in disability was seen in most IADL with increase in age ($P < 0.05$).

Impairment in vision was detected in 82.4% of all elders, hearing impairment was identified in 7.4% and mobility was impaired in 10.1%. There was no significant increase in impairment of vision, hearing and mobility detected with advancing age in those visiting the practice ($P > 0.05$). Comparison of the elders 75 years of age and above visiting the practice ($n=26$) and those visited by the doctor at home ($n=22$) showed that those at home were significantly more dependent in all ADL except feeding and grooming ($P < 0.05$). There was total dependence in all IADL among those at home. In the over 75 age group ($n=48$), 89.6% had a visual problem, 22% had a hearing problem and 39.6% a mobility problem. There was no statistically significant difference between the two groups with regard to vision and hearing ($P > 0.05$). However there was a highly significant increase in impairment of mobility among those at home ($P < 0.1$).

In conclusion, this study showed that ADL except those related to mobility were not significantly affected with increasing age. In contrast all IADL showed a significant increase in disability with advancing age. Elders visited at home were significantly more dependent than those visiting the practice in most ADL and all IADL. Visual problems were very common and hearing impairment less common in this study. Mobility problems increased with age and this was highly significant among those visited at home. Impairment in mobility could contribute to infrequent attendance by elders visited at home.

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This study highlights the need for geriatric screening in general practice. It also draws attention to the increased disability in elders who do not consult the general practitioner. It is therefore strongly recommended that the general practitioner should provide a periodic geriatric health assessment in his practice. Home visits to those elders who are unable to visit the practice will be beneficial and would help to prevent further disability.