

## **INTRODUCTION**

It can be viewed that aging is part of human existence. Curran, Daly, Davidson, Jackson, Kristjanson, Phillips, (2006) stated that 12 percent of the Australian population is above 65 years old with 6 percent of it is in the nursing homes (as cited in Jacobozone, 2000, Australia Institute of Health and Welfare, 2005). As some say, aging is the end stage of life wherein the physical, mental, as well as social aspect of life gradually decreases. Getting old is experienced by everybody regardless of gender, race, and sexual preference. In this stage, there are anticipated changes in their lives. Lach & Linton, (2007) stated Erik Erikson's psychosocial development that positive views of aging includes the acceptance of physical changes and being able to develop a positive outlook in life, whilst the negative views relates to elderly that finds life difficult and reckoned as useless and worthless person. It is worth noting that old people who have positive views perceived life as meaningful (Lach et al. 2007). There are many ways to change a negative view to positive one. They just need help, care and assistance to the people concern in their welfare. This paper will discuss the problems associated with an older person (See Appendix 1), as well as appropriate nursing interventions and a multidisciplinary approach that will help the individual develop a positive view in aging.

## **VERTIGO AND INTERMITTENT HEARING LOSS**

The client is suffering from an increasing vertigo and intermittent hearing loss that disturbs her, especially when she is using the phone. Vertigo and intermittent hearing loss are one of the many symptoms of an ear disorder called Meniere's disease (Wittner, 2006). Meniere's disease as defined by Wittner (2006) is "an

overabundance of endolymphatic fluid in the inner ear which causes hearing loss, aural fullness, and tinnitus” (p. 34). From the symptoms manifested, an immediate action must be done. She needs to seek help from a physician specializing in ear problems as the symptoms are indicative of Meniere’s disease. If this condition is not dealt accordingly, she is at risk of injuries that may worsen her condition. According to Viljanen, Kaprio, Pyykko, Sorri, Pajala, Kauppinen, Koskenvuo, Rantanen (2009), hearing serves as a person’s guide for information in the environment to prevent injuries and hazards. This is evident, because poor hearing may put the life of the client at risk such as falls if not addressed immediately. She might become anxious about her condition, because she does not know anything about it. According to Viljanen et al. (2009), poor hearing may also affect the social life of a person. This will result to decreased participation in any activities because the client is no longer capable of doing the things that she is used in doing, thus, will result to a poor quality of life.

## **HISTORY OF GASTROENTERITIS**

Elderly individuals experienced physiological changes wherein the normal function of the body gradually deteriorates (De Groot, Olde Rikkert, Schols, Van Der Carmmen, 2009). Thus, appropriate interventions must be done to maintain the body free from harm and possible dangers. It is mentioned that the client had a bout of gastroenteritis that caused dehydration and hospitalization. The client’s history of gastroenteritis may be a risk factor that dehydration may recur which will put more health risks to the life of the client. In addition, De Groot et al. (2009) stated that older people have poorer appetite, a decreased thirst sensation that leads them to drink less amount of water, and lastly, they have difficulty maintaining homeostasis.

In addition, according to De Groot et al. (2009), dehydration is one of the most common disorders among the elderly which is either associated with an illness, or due to the inevitable consequences of ageing. This problem needs to be addressed as well in order for the client to obtain an optimal level of health.

## **DEPRESSION**

The client lives alone for almost a year since the death of her husband. It is good to know that she is coping positively about the death of her husband but there are some reasons why she is at risk of developing depression. She is grieving, because her family is far from her and knowing the possibility of getting dementia might cause depression, especially to a person who is living one's life as actively as possible. Grief is defined by Pomeroy (2011) as a various scope of experiences that results from a significant loss of an individual or thing. It affects one's cognitive, physical, emotional, spiritual and social aspects of life which may lead to depression (Pomeroy, 2011). As Pomeroy (2011) stated, it is hard to determine if someone is suffering from grief that most of the time, it is perceived as a normal occurrence in humans. According to Neville and Byrne (2009) as cited by Nay and Garratt (2009), most of the older people who are depressed deny that they are lonely. The client, thus, diverted her grief and loneliness to her three cats in order to conceal her emotions and feelings from the life situations she is experiencing. Furthermore, as stated by Sorbye, Schroll, Finne-Soveri, Jonsson, Topinkova, Ljunggren, & Bernabei (2008), depression is one of the identified factors of weight loss for the elderly. Similarly, Morley (2007) pointed out that "weight loss is the central factor in the development of frailty" (p. 3641). This would give a worse condition to the client.

## **SUSPECTED PROGRESSION OF DEMENTIA**

The client complained of having dementia because she forgets things easily. The physician said that she needs more tests to prove it. Looking at the situation, she has the potential of developing dementia, because of the risk factors involved. As part of the physiological changes that occur with the ageing individuals, their cognitive function decreases (Begeny, Bennett, Boyle, Schneider, Wilson, 2011), thus, may lead to dementia. Begeny et al. (2011) stated that a higher level of personality trait of neuroticism is correlated to a decreased level of cognition leading to cognitive impairment. Neuroticism as defined by Begeny et al. (2011) is a broadly defined trait of anxiety, depression, self-consciousness and impulsiveness. Begeny et al. (2011) also pointed out that suffering from anxiety and excessive stress may result to cognitive decline that eventually will develop to dementia. It is worth noting that she suffered from depression due to the death of her husband, a family that lives far away from her, and the fact that she lives alone. As Grossman, Guerrero-Berroa, Haroutunian, Heinz, Rapp, Schnaider-Beeri, Wysocki (2011) said there is evidence saying that depression increases the risk of progressing to dementia. The client has been identified that she might suffer from depression. Hence, she has a potential of getting dementia.

## **SAFETY AND SECURITY**

It was also identified that the client has a problem on her safety and security. It is hard to live alone at the client's age in an outer suburb and far from her family. Her family seldom visits her as they lived in other areas of Melbourne. There is a huge concern in her safety and security. At her age, she cannot live alone in an area that has no immediate access to emergency facilities such as hospitals that will help

her at times of health situations. She also needs someone to look after her needs and assist her on activities that she cannot do on her own.

## **HOLISTIC APPROACH**

A holistic approach can be use in giving interventions to the client's condition. Holistic care is understanding the elders as well as involving the family in the therapeutic relationship (Chang, Easterbrook, Hancock, Harrison, Johnson, Luhr, 2008). Thus, healing is met. Chang et. al. (2008) defined holistic nursing as giving total care in the physical, emotional, mental and spiritual aspects of a person's life. Through this, the needs of the client are met by rendering a total care. Chang et al. (2008) stated that it also deals with the care given by the significant others that surrounds the older people. This would be helpful for the fast recovery of the client. Truly, adopting the holistic approach in caring for the elderly can lead to a positive outcome of the patient.

Many problems have been recognized in the current condition of the client and these problems should be dealt accordingly in a holistic way to provide her an optimal care. There are concerns that correlate with each other; hence, it must be intervened. First, she and her family must recognize the problems especially her medical conditions. The family must be involved in the current situation of the client since they will also be part of the holistic care that will be given to her. Though she is still capable of doing her self-care activities as well as making decisions, her family has a big role in helping her and able to cope up with the identified problems she has right now. It is very important for the client that someone is there for her most especially the presence of her family so that immediate response will be achieved.

## **PHYSICAL**

The client has been identified to have two medical conditions that need immediate action. First, the client and her family must seek help from a physician to address her medical problems. The increasing vertigo, intermittent hearing loss and suspected dementia of the client might bring her harm and danger such as risk for injury specifically falls which pointed out by Rao (2005) as “one of the common geriatric syndromes threatening the independence of the older persons” (p. 81).

Her history of gastroenteritis may put her at risk of the recurrence of dehydration. The family must know the client’s current condition. The client and her family must be involved in making decision and the planning of care. She and her family must re-evaluate safety concerns such as changing the activities/environment to reduce risk of injury. Discuss with them if the client’s needs to be supervised because of her vertigo and intermittent hearing loss which she might get herself at risk. Though, she has been attending to gym each day with personal trainer, it is better to suggest to her the recommended exercises for preventing her from falls such as balance retraining and endurance training. (Doenges et al. 2002)

Most often dehydration usually occurs in older person because of the physical changes they undergo (De Groot et al., 2009). It is very important to stress the importance of a well-balanced, nutritious intake such as eating fruits and vegetables regularly (De Groot et al., 2009). Encourage the client to drink adequate amount of fluid everyday to prevent her from dehydration and ask her to avoid from caffeine products and alcohol (De Groot et al., 2009). Encourage her to do personal hygiene everyday and teach her the importance of rest and relaxation (De Groot et al., 2009). If possible, the nurse should assess her vital signs if there is any indication of dehydration (Doenges, Moorhouse, Geissler-Murr, 2002). Since she

manifested signs of having dementia as she verbalized, appropriate preventions must be done for her. The nurse must advise the client and her family to explore compensatory strategies to improve lifestyle even if dementia exists (Doenges et. al. 2002).

## **EMOTIONAL**

In the stage of aging, emotional stability is a concern (Pomeroy, 2011). It is more of a problem if an elderly individual is going through health conditions and life circumstances. It is difficult for her to accept the things that she experience most especially when it comes to her health. The nurse must listen to the client and communicate to the family in meeting her needs. Establish rapport through effective communication to the family and the client so that they will verbalize their feelings and sentiments. Encourage them to talk about their perceptions about her current condition. (Doenges et. al. 2002)

## **INTELLECTUAL**

There are a lot of problems that should be dealt individually. The nurse must assess the level of cognition of the client to determine her capacity to understand her condition. The nurse must determine the knowledge of the client in terms of safety and nutritional needs as a response to her condition. The nurse must also provide information regarding her current situation that may endanger her life. The nurse must assess how to involve the family and how the client and her family view the problem that is occurring and its effects in their lives. (Doenges et. al. 2002)

## **SPIRITUAL**

For a nurse to intervene, the nurse must also deal the patient and family spiritually. The family and the client must be enlightened and understand the current situation. Establish therapeutic relationship to recognize and convey their feelings. Talk with them about their feelings and accept the difficult situation they have. The nurse must also listen to the client and family about their concerns and feelings about the identified problems. The nurse must support as well as encourage the patient and family in making health-related decisions. (Doenges et. al. 2002)

## **SOCIAL**

The client's response socially must also be addressed. Even though she has been struggling in her current situation, it does not indicate that she could not be able to do the usual things she does every day. Since the family just visits her monthly and rings her weekly, the nurse must suggest and make the family realise that she needs them. The nurse should try to ask the family if they can modify this schedule by giving lots of their time in taking care of the client such as give a ring two to three times a week just to check if she is in good condition and if they could spare more time to visit her. The nurse must also encourage community education programs which the family and the client must be involve, that aims to educate the society especially the old in giving them awareness on some safety measures and resources available for them in the community. (Doenges et. al. 2002)

Further, the nurse must encourage the client to get involved in a specific support group that would help them in their living such as COTA which means Council on the Ageing. It is an independent organisation managed by Australian



senior citizens. The organisation aims to safeguard and encourage the welfare of the elderly individuals ([www.cota.org.au](http://www.cota.org.au)).

She needs assistance in doing her activities of daily living as based on the identified problems in her situation. There are also support groups that assist elderly individuals living independently in their activities of daily living. The nurse should give the client and her family the list of support groups available in her condition. There are organisations that will provide support care for the elders to make their lives easier.

Aged Care Assessment Teams is an organisation that deals about helping the older people and the carers in identifying the best optimal care that must be given to them. ACAT assesses and refers the old people on the appropriate support groups that will give utmost help to them (TAFE NSW, 2007). The ACAT will help her in finding the right community organisation which will attend to her needs.

The Australian government has also identified The Home and Community Care (HACC) Program. The organisation aims to decrease the patients being admitted to a residential care. Thus, they give services to assist the elder individuals, people with disability in their homes in doing their activities of daily living (TAFE NSW, 2007).

Extended Aged Care at Home (EACH) is also an organisation by the Australian government that gives services to meet the demands of care by assisting them in their living at home (TAFE NSW, 2007).

The client will choose between the HACC and EACH that would help her in daily living and be able to come up with an optimal care. She may inquire about the home care program to help in her independent living. If proven that she has dementia, the family must decide if she will put into the residential care. Hence, she cannot attend to her daily activities.

## **CONCLUSION**

In this case study, multidisciplinary approach is needed. In this approach, appropriate interventions was identified and determined that will give an optimal care to the client. In order for an individual to be healthy, it should be addressed holistically. Through holistic care, one can achieve optimal care and brings a positive outlook in life which older people sought. Holistic nursing brings hope to the individuals who need it. In this way holistic care is achieved and a lot of people will benefit to it. Multidisciplinary approach of caring may change the lives of the society of old people.

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