The world’s population is undergoing a dramatic change. The older population starts to increase at an alarming rate. In Australia it is expected that by 2051 around 30% of population will be above 65 years. (Dawbin& Rogers, 2010). Ageing is a continuous dynamic process begins with birth and ends with death. It is also a process of progressive functional decline. Ageing is inevitable, irreversible and associated with wide range of physiological and psychological changes. (Trans Generational Design Matters, 2009). The ageing process involves significant risks to health. The main health problems at this age are cardiovascular diseases, musculoskeletal problems, malignancies, diabetes mellitus, hypertension, visual and hearing impairment. Other than this they have to face with economical, psychological and other problems. To cope up with these all problems they need help and support from the side of community. (Dawbin& Rogers, 2010). In Australia, the government provides community based aged care services to the elderly. This essay deals with various health problems of Mr. Fred and management.

Mr. Fred is 75years old lives with his wife having agoraphobia in a small house in rural town. He keeps chickens for eggs and sells locally and her daughter. He is a big man with florid complexion. He has short of breath over few days. Recently he had incontinence and slipping. He has a laceration in his right shin which requires daily dressing. His mobility is also decreased. He had bypass surgery, nine years ago and cataract surgery recently on his left eye. He is taking antihypertensive drugs, aspirin and lipex for the past two years. He is dissatisfied with that surgery. He complaints that the surgery does not have any benefit and that he is unable to see anything from left eye. Even though the community services are available he performs most of the household chores. He uses his car to go shopping and for social settings. He is very much concerned about his ability to continue doing this and he think he may have to undergo more surgery and which would involve extra time and money. So he wants to go into long term care. This essay discusses the multidisciplinary and holistic approach to the client’s problem and various voluntary services assist or help to the older people.

To provide quality care to the client’s multidisciplinary approach is essential. Multidisciplinary team involves teams of people from different disciplines. They came together for common purpose. This team approach for providing care to the clients includes many health care professionals such as physicians, nurses, pharmacists, dieticians, health educators, social service providers, psychologists, physiotherapists, speech therapists and others. (Associated Content, 2007). The concept of multidisciplinary approach is to address an issue from all angles. This approach helps to provide better care to the client as a whole. In the past only doctor and patient is involved in treatment. But now team of members is involved in providing care. The most important member of the multidisciplinary team approach is the patient. This approach is holistic health care. Holistic care considers psychological, physical, environmental and social needs of the client and provides care according to that needs. (Associated Content, 2007).

Mr. Fred is a big man with florid complexion. Obesity is a major problem in elderly people. Changes in the body during aging increase amounts and distribution of muscle and fat. The shifting of tissues in and on the body can accelerate adverse health and functional problems in elderly. They seem to develop reduced breathing due to cardio vascular insufficiency. Obesity is the major risk factor of coronary artery disease. Obese people are more prone to high blood pressure and cholesterol. (Ygoy, 2007). For reducing obesity nurses should give health education about the importance of making lifestyle modifications. During home visits she should check the weight of the client. Community dietician should provide education about dietary patterns. Nurse should teach the client about importance of doing regular exercise such as walking. (Ygoy, 2007).

Another problem of Mr. Fred is decreased mobility which is quite common in old age. The risk factors of decreased mobility in general are advanced age, overweight, neurological diseases, musculoskeletal problems, peripheral vascular diseases and other medical conditions such as decreased vision, postural hypotension and sepsis. (Value Options, 2010). In this case the cause of impaired mobility are advanced age, overweight, cardiovascular disease and decreased vision. For providing quality care to Mr. Fred multidisciplinary approach is essential. Team work of various health professionals such as general practitioner, physiotherapist and community health nurse can helps the client in reducing these problems. General practitioners can assess the client and identify the amount of disability. They can refer the client to the physiotherapist. Physiotherapist can teach various exercises. Community nurse can educate the client about the importance regular exercise routine. Regular exercise will helps to strengthen bones and heart. It also helps in regulation of blood pressure, reduction of body weight and improvement of his ability to get around. (Value Options, 2010).

Mr. Fred recently had a fall. Falls are quite common at this age. These are the leading cause of injury in old age. This is a major public health issue that results in hospitalization and impaired mobility. Risk factors of falls are postural hypotension, use of medications, impaired mobility and visual impairment. (Larson & Bergman, 2008). The fall which does not result in injury can cause psychological trauma. Psychological distress and fear of falling may leads to self imposed activity reduction. In this situation social workers and psychologists can help the client in various ways. Social workers can identify the needy people in the community and arrange counseling sections. Through counseling psychologists will be able to give positive reinforcement to the client. Nurses can also support the client by giving reassurance. For prevention of falls identification of risk factors is very important. Nurses can motivate the client to do simple exercises because it helps in improving muscle strength and reducing risks of falls. ( Larson & Bergman, 2008).

Nurse should teach the client about the importance of maintaining safety in the home to prevent fall due to decreased mobility. This can be achieved by rearrangement of furniture’s to allow a clear passage from room to room, adequate lightening in the room, installation of hand rails wherever extra support is needed. Decreased mobility can affect all aspects of life such as bathing, dressing and house hold activities. When mobility is impaired it results in depression, and decreased function of multiple organs. This can leads to risk of heart disease. (Value Options, 2010).

Shortness of breath is another problem of this client. It is a feeling of rapid and uncomfortable breathing. It is often described as tightness in the chest or feeling of smothering. Respiration rate will increase and chest retracts as the client uses muscles to help them breathe. If the oxygen levels become severely compromised discoloration occurs. (About.Com, 2011). The main causes of this are allergies, heart, lung or blood diseases, air pollution, being unfit and smoking. (The AGS Foundation for Health and Aging, 2009). In this case the main cause of breathing difficulty is heart disease. Nurses should assess the condition of the client and appropriate care should be given. They can educate the client about importance of taking adequate rest, comfortable position to reduce dysponea and intermittent medical checkup. General practitioners can prescribe medications to reduce dysponea. Physiotherapists can teach breathing and coughing exercises. Non medical interventions are very essential in treating shortness of breath. (About.Com, 2011). Nurse should teach the client about home management measures it includes provision of comfortable position to the client. Make the client to sit upright with the help of pillows. Nurse should encourage the client to take deep breath. Relaxation techniques such as play music, massage and touch will help the client in reducing anxiety and thus by dysponea. Reassurance of the client also helps in reducing tension. (About.Com, 2011).

Another problem of Mr. Fred is incontinence. It is a distressing problem for many old people because it makes them feel that they are losing their control. This can have serious effects on elderly people’s dignity and self esteem especially when they are mentally active. The main causes of incontinence are weakness of muscles due to aging and enlargement of pelvic gland. (Elderly Care Tips, 2008). General Practioners can detect the causes of incontinence with the help of lab technicians. Nurse should collect the history of presenting complaints. Nurse can teach the clients about bladder training techniques. Nurse should teach them the practical tips to avoid other complications such as falls and sudden flow out of control. It includes arrangement of room for easy access to toilet by removing any furniture in the way of toilet and provision of hand rails in the toilet. (Elderly Care Tips, 2008).

Mr. Fred had laceration in his right shin and which requires daily dressing. These types of pre tibia injuries are very common among elderly people. These types of wounds bring greater risks of infection and secondary health complications. (Associated Content, 2011). Medical management involves administration of antibiotics and injection of tetanus toxoid to prevent complications. Nursing management includes assessment of the condition of wound and dressing. More than this they should teach the clients about proper dressing technique. If the wound is not healing client must be referred to the general practitioners side. (Associated Content, 2011).

Recently Mr. Fred had undergone a cataract surgery. Cataract is the most common cause of visual impairment in elderly people. Nurse should educate the client about points to be remembered after surgery. (Bupa, 2010). Instruct the client to do not touch or rub the eye, keep soap out of eye, instill eye drops daily as per doctors order and wear eye glasses. More than this instructs the client to avoid activities which increase intraocular pressure such as straining with coughing and bowel movements. Nurse should instruct the client to avoid driving. Complications of cataract surgery includes redness of eye, pain and blurred vision and excessive discharges. If any of these appears instruct the client to see ophthalmologist. (Bupa, 2010).

Mr. Fred is on antihypertensive therapy since 2years. Aspirin helps in prevention of blood clots and thus it reduces the risks of stroke and heart attack. Lipex helps in reduction of blood cholesterol level and reduces incidence of cardiovascular events. (Cleve Land Clinic, 2011).Hypertension in old people is common and should be managed effectively. Hypertension is a modifiable risk factor cardiac disease and stroke. The risk for this disease increases with age. Interventions for management of hypertension begin with history collection and assessment. Blood pressure should be monitored at regular intervals. Investigation of urine for protein and blood investigations such as serum electrolytes and serum creatinin helps in identification of complications. (Luckson. M, 2009). Non pharmacological management plays major role in reducing blood pressure. This includes salt reduction and regular exercise. Nurse should instruct the client to avoid sugar and salty foods and increase intake of vegetables. General practitioners can teach the client about importance of daily intake of medications.(Luckson. M, 2009).

 Mr. Fred had undergone a bypass surgery nine years ago. Coronary Artery Disease (CAD) is a major cause of mortality and morbidity in Australia. The main causes of CAD are high cholesterol, high blood pressure, age, diabetes mellitus, and smoking. The symptoms associated with this are shortness of breath and chest pain, which may cause negative impacts on activities of daily living. (Ballan & Lee, 2007). There is no cure for CAD. Surgical management such as Coronary Artery Bypass Graft is the effective management of coronary artery disease. After surgery with in six weeks significant improvements occur. Nurse should teach the client about importance of taking medications and dietary management. Instruct the patient to carry heart pain medication such as nitroglycerin always with him. Nurse should also give advice about the importance of regular health checkups. (Ballan &Lee, 2007).

 Mr.Fred is receiving some community service. The main aim of community services are the enhancement of personal independence and quality of life of older people. (Dawbin & Rogers, 2010). Support and services for elderly in Australia are provided by wide range of government programmes as well as community and voluntary sector programmes. (Parliament of Australia, 2009). Various community services are the following. Home and community care (HACC) programmes provides coordinated and integrated range of activities for basic maintenance and support of older people. They are mainly focusing on formal home and community based services. HACC programme includes domestic assistance, nursing, personal care, assessment, care planning and allied health care. In addition to this home maintenance, provision of goods and equipment, transport, counseling and carrier support services are provided. Another programme is community aged care package (CACP). It is for helping older person who has complex needs to continue living at home. They provide services such as shopping, bathing, meals, home help and laundry. Extended aged care at home (EACH) packages are designed for elderly with high care needs to stay in home. It provides more intensive level of care and support for older people. (Dawbin & Rogers, 2010).

Mr. Fred wants to go into long term care facility because he is very concerned about his abilities. Nurse should give support to the client and give information about long term care facilities available in the society. Long term care facility provides restorative, rehabilitative and skilled nursing care to residents. It is for people who require round the clock nursing care. As a whole it offers high degree of personal care and support to the clients. (Ministery of Health And Long Term Care, 2011). Nurse should give proper information about long term care facilities available in the community. There are nursing homes operated by private corporations, municipal councils, and charitable trusts. Various accommodation options are available. Government provides subsidies for residents if their income is insufficient to pay for their basic accommodation. Different levels of care are provided in long term facility. Two basic level of care provided are high care and low care. High care provides advanced care such as support with activities of daily living, mobility assistance and other nursing services. Low care provides accommodation and assistance in recreational activities, personal care, and cleaning. (Dawbin & Rogers, 2010). In Australia the residential aged care is regulated by aged care act.

 In short Mr. Fred 75 years has various health problems. Multi disciplinary approach in care helps the client in overcoming health problems. Risk of fall can be prevented by provision of assistive devices such as wall hangers. Routine exercises patterns helps in improvement of mobility. Dietary modifications and regular intake of antihypertensive helps in maintenance of blood pressure. Behavioral modification therapy and bladder training techniques helps the client to get relief from incontinence. Health education about importance of wound care helps in reduction of complications. Proper care of eyes after cataract surgery and appropriate referral service to ophthalmologist helps in preventing complications. As a whole support and educational activities from general practitioner, nurses, physiotherapist, social workers and other health professionals helps the client in achieving quality care.

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