

# Editorial

## PROVIDING FOR THE ELDERLY; A REWARD AND AN INVESTMENT

...Last scene of all,  
That ends this strange eventful history,  
Is second childishness and mere oblivion;  
Sans teeth, sans eyes, sans taste, sans everything.

*W. Shakespeare, As You Like It, Act II Scene VII*

One concept on which anthropologists will be in general agreement is that a common thread running through the history of all human races, communities and tribes, no matter how primitive and unsophisticated the culture, is the respect, adulation and even reverence shown to their elders. A position of trust and high esteem is reserved for them in recompense for their years of service to their families and the community in the expectation that the sagacity and wisdom collected over the many decades of their lives will counsel and direct the up-and-coming leaders and the next generation. They are lavished with care and honour by those much younger, and their experience and advice is sought in crucial decisions, whether personal or collective.

In stark contrast, a feature that percolates through twentieth-century society and contemporary western cultures, and which appears to be directly proportional to the level of modernisation achieved in the particular society, is a tendency to marginalise the elderly. There is an attempt to shift the responsibility of their care from a direct and personal level, and even from a community-based level, to a more collective and somewhat distant plane of impersonal responsibility. Caring for the elderly is often considered as a socio-economic matter that should be handled and provided for by the 'state'. Caring for older men and women – parents, relations and friends – may often be seen as too onerous a burden to be added on to the many others that already reap their heavy modicum of trouble and stress. The exigencies of the immediate family, the ever-grinding and demanding impositions of many present-day jobs, the requirement for more than one breadwinner in each family and the need for 'quality time' for the individual to further leisurely pursuits, when taken together leaves little spare capacity for looking after the elderly. These factors have also surfaced at a time when families tend to move away from their roots, with the younger members living far away from where they were born and brought up.

This trend, once perhaps considered as an infelicitous monopoly of the more affluent countries, has surfaced on a worldwide basis.<sup>1</sup> ASEAN, the Association of South East Asian Nations, is in the throes of tackling a population-ageing problem which is looming faster in these countries than elsewhere. Robert N. Butler of the International Longevity Center in the Mount Sinai Medical Centre in New York summarises these trends by stating that since the beginning of this century, life expectancy has increased by more than 25 years.<sup>2</sup> Such statistical data have led the 71-year-old Ambassador of the Republic of Dominica to the United Nations Authority, Julia Tavares de Alvadez, to describe this demographic age-shift as an 'age quake' – an explosive, eruptive increase in the aged!

Some politicians have suggested that this somewhat emotive image may conjure up

inappropriate responses geared to a catastrophe awaiting to occur. However, whatever thoughts this phrase may provoke, the concept demands that the situation be carefully planned for and addressed appropriately. Furthermore, it has to be undertaken in accordance with the specific needs of each particular society. Requirements for the older members of the community may vary from the need to provide basic food and shelter and the prevention of death from exposure and starvation in the Indian subcontinent and parts of Latin America, to the provision of a co-ordinated, wide-ranging, re-educational campaign for the 'senior citizens' in the WASP (White Anglo-Saxon Protestant) belt of North America.

The 'Mark I' human body has always been considered as bearing from the moment of conception a genetically-programmed, intrinsically ingrained, self-destructing mechanism, which comes into operation after a finite number of years;<sup>3</sup> the currently all-embracing concept of apoptosis is the elegant, scientifically-defined interpretation of this concept on a cellular level. Indeed, the classical concept that *Senectus ipse morbus est* - old age itself being a disease - held sway for many decades. The quest for the key to the 'wear and tear' process, and the possibility that its discovery and elucidation would enable manipulation, and possibly even a reversal of ageing-related disabilities or at least a prolongation of 'eternal youth' in true Goethe or Gounoud mode is attractive to some. In the same context, this year's shared award of the Nobel prize for chemistry to Dr John Walker at the molecular biology laboratories of the Medical Research Council's laboratory in Cambridge for unravelling further ATP synthesis and disruption, and the role of the until recently ignored, maternally-inherited DNA located in the powerhouses of the cell, the mitochondria, may be an important milestone in this odyssey.<sup>4</sup> The message that appears to ring out clearly is that, although there may be an increase in longevity, the final maximum number of years that can be reached is likely to be an immutable and unshiftable goal-post! As the stoic Marcus Aurelius Antonius put it in his *Meditations*:

How small a part of the boundless and unfathomable time is assigned to every man  
for it is very soon swallowed up in the eternal

While we wait for developments in the genetic line, the reality of the ten million - and rising - pensioners in the United Kingdom confronts us, contemporaneously with the alleged 38 per cent fall since 1983 in the number of NHS hospital beds, specifically designated for the elderly. In terms of acute admissions among the elderly, cerebrovascular disease,<sup>5</sup> mental impairment<sup>6</sup> and falls with bony injuries<sup>7,8</sup> carry the brunt of the demands for in-patient care.

Considering one aspect of these, the mean length of hospital stay of stroke victims has been calculated to vary between 11.0 and 38.9 days throughout European hospitals.<sup>9</sup> To give some notion of the financial outlays that such care provision involve, the cost to the NHS in Scotland of acute stroke care was recently estimated to be around £4626 per discharge.<sup>10</sup> Although it may be argued that there could be a more careful selection of stroke patients for hospital referral,<sup>11</sup> there is unlikely to be any dissension from the premise that the trend in such admissions is generally rising and is likely to continue to do so. Improved co-ordination of community health services,<sup>12</sup> primary medical care and rehabilitation services ensure a reduction in patients' dependency on others, not to mention health-unrelated social welfare provisions. Despite this there will always be a sizeable proportion of stroke patients that will have to be managed in a hospital setting, at least initially.

Even if such hospital admissions are put to one side, there remains a need to address the chronic disability trends that occur in the elderly, including those in the community. Whatever the cost to the nation, it is morally and socially imperative that the elderly are well cared for. The pioneering work initiated by Marjory Warren in 1935 at the West Middlesex County Hospital in England<sup>13,14</sup> is now, perhaps more than ever, in need of consolidation, co-ordination and expansion. Fresh thinking is required by the medical, nursing and social welfare professions alike with the full backing of colleagues in other relevant specialities. Finally, and not least, there must be the political will to invest public money in the provision of the elderly welfare, care and services. Throughout Britain the private sector is quickly increasing its share of provision of accommodation and other services for the elderly. It has to be ensured by central government that this is at a financially affordable level and at a standard which is shown to be consistently of a high enough level in terms of comfort, involvement of specially-trained personnel and amenities, and in an ambient free of exploitation. Every nation will always continue to owe a debt of gratitude to their elders.

I heard the old, old men say  
 'Everything alters. And one by one we drop away.'  
 They had hands like claws, and their knees  
 were twisted like old thorn-trees.

*W.B. Yeats, The Old Men Admiring Themselves in the Water*

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