

HEALTHCARE
OF THE
ELDERLY.

SSC 5C – ELECTIVE
QUEENS HOSPITAL (UK)
HEALTHCARE OF THE ELDERLY



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SSC 5c Elective – Health Care in the UK

Health care of the Elderly at Queens Hospital

Objectives

- 1) *Describe the pattern of disease/illness of interest in the population with which you will be working and discuss this in the context of global health.*
- 2) *Describe the pattern of health provision in relation to the country in which you will be working e.g. the NHS in the UK compared to the systems in other countries*
- 3) *Health related objective: What impacts the health of people in the UK, and what is done to reduce these health problems.*
- 4) *Personal/professional development goals. Reflective assessment of your experience.*

The pattern of disease in the elderly population in the United Kingdom and especially in East London has changed over the last hundred years, resulting in an increase in life expectancy. This increase in life expectancy has particularly increased over the last 29 years, with females living longer than males. Statistics showed the average life expectancy for a female born in England in 2010 is 82 and for a male 77. The overall life expectancy in the UK is 79. This is a big increase compared to 1980 when 26% of the elderly died before the age 65. The change in mortality and morbidity in the elderly population over the last years correlates with the improvements in the healthcare system such as the introduction of new vaccinations e.g. the flu vaccine, and the introduction of more screening tests e.g. cervical smears.

Despite the decrease in mortality and the increase in life expectancy in the United Kingdom elderly patients are still vulnerable to many diseases. A noticeable pattern can be seen in the diseases which elderly patients suffer from in the UK, with many elderly patients fighting terminal illnesses such as cancer, dementia and chronic obstructive pulmonary disease (COPD). Many of the conditions which elderly patients are admitted into hospital for are conditions which in the past lead to immediate death, however they are now managed better. Many interventions have been introduced to prolong the life of patients for example long term oxygen therapy in patients with COPD, and to make diseases tolerable e.g. palliative care in terminal cancer. There are also common conditions seen in elderly which are not terminal. These include cardiovascular disease especially myocardial infarctions, cerebrovascular disease e.g. stroke, diabetes, respiratory tract infections and urinary tract infections. Most of these conditions are progressive if not managed adequately by appropriate treatment and routine follow ups to ensure good patient control.

In 2010 the United Nations (UN) ranked the United Kingdom as the 20th top country regarding life expectancy. This shows that despite the UK being a leading developed country with its population having a high life expectancy, it still falls back when compared to other countries globally. Countries of the Far East including Japan and Hong Kong have the highest life expectancies an average of 82. It is noted that in these countries patients suffer less from conditions such as myocardial infarction which is relatively common in the UK. In comparison the UK has a higher life expectancy than countries such as Nigeria which falls 30% below the world average (average life expectancy of 46.9). In Nigeria the commonest diseases are malaria, AIDS and diarrhoea which are less prevalent in the UK.

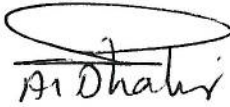
The National Health Service (NHS) is the healthcare system provided to the public in the United Kingdom. It is divided into primary healthcare and secondary healthcare, both of which are funded by tax paid to the government. Primary healthcare is based in the community with a multidisciplinary team lead by a General Practitioner (GP), whilst secondary healthcare is based in hospitals, with a multidisciplinary team (MDT) often lead by a specialist consultant providing care for patients. The NHS is structured so that it provides care to all of those registered under it even if they are not British citizens. As well providing treatment to patients the NHS also provides screening for many conditions to help detect diseases at an early stage and hence acting to prevent their progression. 11% of the British people have private health insurance, and choose to seek medical healthcare privately, however they are still entitled to services by the NHS.

Singapore has a similar healthcare system to the United Kingdom, where there is a public sector funded by taxes and this is primarily in hospitals. There is also a private sector which is funded by health insurances or personal savings. In comparison to the UK, people in Singapore are still expected to pay a portion of the public sector especially for healthcare in the community. In contrast other countries around the world have different healthcare systems. In America the healthcare system is funded by the private sector, with most people being registered with a health insurance company. This means many of the poor population in America do not receive appropriate healthcare.

The health of the people in the UK is impacted by several factors all of which contribute greatly to the morbidity and mortality. These factors can be divided into social factors, past medical history, family history and most importantly education. Social factors which impact the health of British people include; smoking, alcohol, use of illicit drugs, diet and exercise. With a rise in the number of people smoking since World War Two, a clear rise has been seen in many disease especially lung cancer and chronic respiratory conditions. The healthcare system has tried to reduce the number of smokers in the UK by providing educational advertisement leaflets and free smoking cessation advice/support. Similarly to smoking the use of alcohol and drugs has risen, which again has contributed to an increase in diseases such as liver cirrhosis and hepatitis. To reduce health problems of these substances the government has made the use of many drugs illegal and put strict restrictions on the amount of alcohol that can be consumed e.g. when driving.

Over the last years more fast food restaurants have opened, and the diet of the British population has become very unhealthy, this is evident by the rise in obesity even in children. With the busy lifestyles most people in the UK have, there is little time for exercise. A large number of the population spend most of their day sitting behind their desk at work or doing jobs with minimal exertion. These factors have also contributed to high levels of obesity in the UK. A recent change which the government has implemented is the distribution of public bicycles all around the city of London; this is to encourage more people to cycle to work, which also is a good way of exercising. The NHS tries to educate the British population; it has created many adverts and leaflets advising people to eat health, such as 5 fruit and vegetable a day advice. Past medical problems and diseases which run in families also impact the health of people in the UK. As mentioned before many screening programs are run, and patients are closely monitored to help control and prevent the progression of disease. Healthcare professionals aim to educate patients as much as possible about their conditions and the treatments they need, this is to increase patient awareness and compliance.

During my elective at Queens Hospital I tried to utilise my time by improving the skills I have gained from medical school over the past five years. I did this by spending time with patients, not only clerking them and examining them, but also following their care and management. Attending ward rounds with Dr Al Dhahir added to my experience as I received a lot of direct teaching and advice, all of which have increased my confidence, and I feel have helped prepared me for my FY1 post in August. Talking to different members of the multidisciplinary team and following them in the care of patients has allowed me to further appreciate their roles. Overall my elective experience has been very valuable and interesting; especially as Queens Hospital has a diverse population of patients.


Al Dhahir
24/05/11