This chapter is about the prevention and treatment of problems seen mostly in older persons.

SUMMARY OF HEALTH PROBLEMS DISCUSSED IN OTHER CHAPTERS

Difficulties with Vision (see p. 217)

After the age of 40, many people have problems seeing close objects clearly. They are becoming farsighted. Often glasses will help.

Everyone over age 40 should watch for signs of glaucoma, which can cause blindness if left untreated. Any person with signs of glaucoma (see p. 222) should seek medical help.

Cataracts (see p. 225) and ‘floaters’ before the eyes (tiny moving spots—p. 227) are also common problems of old age.

Weakness, Tiredness, and Eating Habits

Old people understandably have less energy and strength than when they were younger, but they will become even weaker if they do not eat well. Although older people often do not eat very much, they should eat some body building and protective foods every day (see pages 110 to 111).

Swelling of the Feet (see p. 176)

This can be caused by many diseases, but in older people it is often caused by poor circulation or heart trouble (see p. 325). Whatever the cause, keeping the feet up is the best treatment. Walking helps too—but do not spend much time standing or sitting with the feet down. Keep the feet up whenever possible.
Chronic Sores of the Legs or Feet (see p. 213)

These may result from poor circulation, often because of varicose veins (p. 175). Sometimes diabetes is part of the cause (p. 127). For other possibilities, see page 20.

Sores that result from poor circulation heal very slowly.

Keep the sore as clean as possible. Wash it with boiled water and mild soap and change the bandage often. If signs of infection develop, treat as directed on p. 88.

When sitting or sleeping, keep the foot up.

Difficulty Urinating (see p. 235)

Older men who have difficulty urinating or whose urine drips or dribbles are probably suffering from an enlarged prostate gland. Turn to page 235.

Chronic Cough (see p. 168)

Older people who cough a lot should not smoke and should seek medical advice. If they had symptoms of tuberculosis when they were younger, or have ever coughed up blood, they may have tuberculosis.

If an older person develops a cough with wheezing or trouble breathing (asthma) or if his feet also swell, he may have heart trouble (see the next page).

Rheumatoid Arthritis (painful joints) (see p. 173)

Many older people have arthritis.

To help arthritis:
♦ Rest the joints that hurt.
♦ Apply hot compresses (see p. 195).
♦ Take a medicine for pain; aspirin is best.
   For severe arthritis, take 2 to 3 aspirin tablets up to 6 times a day with bicarbonate of soda, an antacid (see p. 382), milk, or a lot of water. (If the ears begin to ring, take less.)
♦ It is important to do exercises that help maintain as much movement as possible in the painful joints.
OTHER IMPORTANT ILLNESSES OF OLD AGE

Heart Trouble

Heart disease is more frequent in older people, especially in those who are fat, who smoke, or who have high blood pressure. Men and women share many of the same signs below, but women more often have unexplained tiredness, sleeping problems, and shortness of breath. Women also feel an ache or tightness in the chest more than the sharper pains felt by men.

**Signs of heart problems:**

- Anxiety and difficulty in breathing after exercise; asthma-like attacks that get worse when the person lies down (cardiac asthma).
- A rapid, weak, or irregular pulse.
- Swelling of the feet—worse in the afternoons.
- Shortness of breath without exercise, unexplained tiredness, weakness, dizziness.
- Sudden, painful attacks in the chest, left shoulder, or arm that occur when exercising and go away after resting for a few minutes (angina pectoris).
- A sharp pain like a great weight crushing the chest; does not go away with rest (heart attack).
- In women, a feeling like indigestion, nausea, clamminess, spasms, jaw pain (heart attack).

**Treatment:**

- Different heart diseases may require different specific medicines, which must be used with great care. If you think a person has heart trouble, seek medical help. It is important that he have the right medicine when he needs it.
- People with heart trouble should not work so hard they get chest pain or have trouble breathing. However, regular exercise helps prevent heart attacks.
- Persons with heart problems should not eat greasy food and should lose weight if they are overweight. Also, they should not smoke or drink alcohol.
- If an older person begins having attacks of difficult breathing or swelling of the feet, he should eat food that contains little or no salt for the rest of his life.
- Take a low-dose aspirin tablet (81 mg) daily to prevent heart attack or stroke.
- If a person has angina pectoris or heart attack, she should rest very quietly in a cool place until the pain goes away.

If the chest pain is very strong and does not go away with rest, or if the person shows signs of shock (see p. 77), the heart has probably been severely damaged. The person should stay in bed as long as she is in pain or shock. Then she can begin to sit up or move slowly, but should stay very quiet for a month or more. Consider getting medical help.

**Prevention:** See the next page.
Words to Younger Persons
Who Want to Stay Healthy When They Are Older

Many of the health problems of middle and old age, including high blood pressure, hardening of the arteries, heart disease, and stroke, result from the way a person has lived and what he ate, drank, and smoked when younger. Your chances for living and staying healthy longer are greater if you:

1. **Eat well**—enough nutritious foods, but not much rich, greasy, salty, or highly processed foods. Avoid getting overweight. Cook with vegetable oil rather than animal fat.

2. **Do not drink a lot of alcoholic drinks.**

3. **Do not smoke.**

4. **Keep physically and mentally active.**

5. **Try to get enough rest and sleep.**

6. **Learn how to relax** and deal positively with things that worry or upset you.

High blood pressure (p. 125) and hardening of the arteries (arteriosclerosis), which are the main causes of heart disease and stroke, can usually be prevented—or reduced—by doing the things recommended above. The lowering of high blood pressure is important in the prevention of heart disease and stroke. Persons who have high blood pressure should have it checked from time to time and take measures to lower it. For those who are not successful in lowering their blood pressure by eating less (if they are overweight), giving up smoking, getting more exercise, and learning to relax, taking medicines to lower blood pressure (antihypertensives) may help.

Which of these two men is likely to live longer and be healthy in his old age? Which is more likely to die of a heart attack or a stroke? Why? How many reasons can you count?
Stroke (Apoplexy, Cerebro-Vascular Accident, CVA)

In older people stroke or cerebro-vascular accident (CVA) commonly results from a blood clot or from bleeding inside the brain. The word stroke is used because this condition often strikes without warning. The person may suddenly fall down, unconscious. Her face is often reddish, her breathing hoarse and noisy, her pulse strong and slow. She may remain in a coma (unconscious) for hours or days.

If she lives, she may have trouble speaking, seeing, or thinking, or one side of her face and body may be paralyzed. In minor strokes, some of these same problems may result without loss of consciousness. The difficulties caused by stroke sometimes get better with time.

Treatment:

Put the person in bed with her head a little higher than her feet. If she is unconscious, roll her head back and to one side so her saliva (or vomit) runs out of her mouth, rather than into her lungs. While she is unconscious, give no food, drink, or medicines by mouth (see the Unconscious Person, p. 78). If possible, seek medical help.

After the stroke, if the person remains partly paralyzed, help her to walk with a cane and to use her good hand to care for herself. She should avoid heavy exercise and anger.

Prevention: See the page before this one.

Note: If a younger or middle aged person suddenly develops paralysis on one side of his face, with no other signs of stroke, this is probably a temporary paralysis of the face nerve (Bell’s Palsy). It will usually go away by itself in a few weeks or months. The cause is usually not known. No treatment is needed but hot soaks may help. If one eye does not close all the way, bandage it shut at night to prevent damage from dryness.

Deafness

Deafness that comes on gradually without pain or other symptoms occurs most often in men over 40. It is usually incurable, though a hearing aid may help. Sometimes deafness results from ear infections (see p. 309), a head injury, or a plug of dry wax. For information on how to remove ear wax, see p. 407.

DEAFNESS WITH RINGING OF THE EARS AND DIZZINESS

If an older person loses hearing in one or both ears—occasionally with severe dizziness—and hears a loud ‘ringing’ or buzzing, he probably has Ménière’s disease. He may also feel nauseous, or vomit, and may sweat a lot. He should take an antihistamine, such as dimenhydrinate (Dramamine, p. 388) and go to bed until the signs go away. He should have no salt in his food and should avoid caffeine (coffee, cola, chocolate). If he does not get better soon, or if the problem returns, he should seek medical advice.
Loss of Sleep (Insomnia)

It is normal for older people to need less sleep than younger people. And they wake up more often at night. During long winter nights, older people may spend hours without being able to sleep.

Certain medicines may help bring sleep, but it is better not to use them if they are not absolutely necessary.

Here are some suggestions for sleeping:

♦ Get plenty of exercise during the day.
♦ Do not drink coffee or black tea, especially in the afternoon or evening.
♦ Drink a glass of warm milk or milk with honey before going to bed.
♦ Take a warm bath before going to bed.
♦ In bed, try to relax each part of your body—then your whole body and mind. Remember good times.
♦ If you still cannot sleep, try taking an antihistamine like promethazine (*Phenergan*, p. 388) or dimenhydrinate (*Dramamine*, p. 388) half an hour before going to bed. These are less habit-forming than stronger drugs.

DISEASES FOUND MORE OFTEN IN PEOPLE OVER 40 YEARS OLD

Cirrhosis of the Liver

Cirrhosis usually occurs in men over 40 who for years have been drinking a lot of liquor (alcohol) and eating poorly.

**Signs:**

- Cirrhosis starts like hepatitis, with weakness, loss of appetite, upset stomach, and pain on the person's right side below the ribs.
- As the illness gets worse, the person gets thinner and thinner. He may vomit blood. In serious cases the feet swell, and the belly swells with liquid until it looks like a drum. The eyes and skin may turn yellowish (jaundice).

**Treatment:**

When cirrhosis is severe, it is hard to cure. There are no medicines that help much. Most people with severe cirrhosis die from it. If you want to stay alive, at the first sign of cirrhosis do the following:

♦ Never drink alcohol again! Alcohol poisons the liver.
♦ Eat as well as possible: vegetables, fruit, and some protein (p. 110 and 111). But do not eat a lot of protein (meat, eggs, fish, etc.) because this makes the damaged liver work too hard.
♦ If a person with cirrhosis has swelling, he should not use any salt in his food.

*Prevention* of this disease is easy: **DO NOT DRINK SO MUCH ALCOHOL.**
Gallbladder Problems

The gallbladder is a small sac attached to the liver. It collects a bitter, green juice called bile, which helps digest fatty foods. Gallbladder disease occurs most commonly in women over 40, people who are overweight, and people with diabetes.

**Signs:**
- Sharp pain in the stomach at the edge of the right rib cage: This pain sometimes reaches up to the right side of the upper back.
- The pain may come an hour or more after eating rich or fatty foods. Severe pain may cause vomiting.
- Belching or burping with a bad taste.
- In severe cases, there may be fever.
- Occasionally the eyes may become yellow (jaundice).

**Treatment:**
- Do not eat greasy food. Overweight (fat) people should eat small meals and lose weight.
- Take ibuprofen to calm the pain (see p. 381). Stronger painkillers are often needed. (Aspirin will probably not help.)
- If the person has a fever, she should take ampicillin (p. 352).
- In severe or chronic cases, seek medical help. Sometimes surgery is needed.

**Prevention:**
Women (and men) who are overweight should try to lose weight (see p. 126). Avoid rich, sweet, and greasy food, do not eat too much, and get some exercise.

**BILIOUSNESS**

In many countries and in different languages, bad-tempered persons are said to be 'bilious'. Some people believe that fits of anger come when a person has too much bile.

In truth, most bad-tempered persons have nothing wrong with their gallbladders or bile. However, persons who do suffer from gallbladder disease often live in fear of a return of this severe pain and perhaps for this reason are sometimes short-tempered or continually worried about their health. (In fact, the term ‘hypochondria’, which means to worry continually about one’s own health, comes from ‘hypo’, meaning under, and ‘chondrium’, meaning rib—referring to the position of the gallbladder!)
ACCEPTING DEATH

Old people are often more ready to accept their own approaching death than are those who love them. Persons who have lived fully are not usually afraid to die. Death is, after all, the natural end of life.

We often make the mistake of trying to keep a dying person alive as long as possible, no matter what the cost. Sometimes this adds to the suffering and strain for both the person and his family. There are many occasions when the kindest thing to do is not to hunt for ‘better medicine’ or a ‘better doctor’ but to be close to and supporting of the person who is dying. Let him know that you are glad for all the time, the joy and the sorrow you have shared, and that you, too, are able to accept his death. In the last hours, love and acceptance will do far more good than medicines.

Old or chronically ill persons would often prefer to be at home, in familiar surroundings with those they love, than to be in a hospital. At times this may mean that the person will die earlier. But this is not necessarily bad. We must be sensitive to the person’s feelings and needs, and to our own. Sometimes a person who is dying suffers more knowing that the cost of keeping him barely alive causes his family to go into debt or children to go hungry. He may ask simply to be allowed to die—and there are times when this may be the wise decision.

Yet some people fear death. Even if they are suffering, the known world may be hard to leave behind. Every culture has a system of beliefs about death and ideas about life after death. These ideas, beliefs, and traditions may offer some comfort in facing death.

Death may come upon a person suddenly and unexpectedly or may be long-awaited. How to help someone we love accept and prepare for his approaching death is not an easy matter. Often the most we can do is offer support, kindness, and understanding.

The death of a younger person or child is never easy. Both kindness and honesty are important. A child—or anyone—who is dying often knows it, partly by what her own body tells her and partly by the fear or despair she sees in those who love her. Whether young or old, if a person who is dying asks for the truth, tell her, but tell her gently, and leave some room for hope. Weep if you must, but let her know that even as you love her, and because you love her, you have the strength to let her leave you. This will give her the strength and courage to accept leaving you. To let her know these things you need not say them. You need to feel and show them.

We must all die. Perhaps the most important job of the healer is to help people accept death when it can or should no longer be avoided, and to help ease the suffering of those who still live.