

The Bias of Medical Care Providers towards Aging

Bias Towards Aging Affects the Medical Treatment Seniors Receive

In many cultures in the world, elderly people are revered and their advice is sought and respected. In our culture, the wisdom, the knowledge and the social skills of the elderly are often overlooked and instead we focus on the mental and physical deficits of our older generation.

Because of this prevailing attitude, older people in our society are generally regarded as less valuable than younger people. The younger person has responsibilities of raising a family, maintaining a career and supporting the economy. The older person generally has no responsibilities and in addition is a drag on the economy since a great part of the tax base must go towards the support of older Americans.

It is inevitable that many medical care providers will unconsciously have this same attitude towards their older patients. As a result, if an older person has a medical complaint and the cause is not readily apparent, a medical practitioner is more likely to accept the condition as a consequence of old age. This attitude causes practitioners to focus treatment on making the elderly more comfortable in their old age as opposed to finding a cure. In younger people, if the medical complaint is interfering with normal daily function, typically a more concerted effort will be made to identify and correct the problem.

A 90 year old man meets with his doctor and complains about pain in his right knee. The doctor tells him,

"Well Henry, what do you expect? You're 90 years old."

Henry replies,

"But doctor my left knee is the same age as my right knee, there's no pain and it feels just fine!"

Many in the health-care profession consider old age to be a disease itself. Any medical problems are inappropriately attributed to old age as if it were a medical condition. And since there is no cure for old age, appropriate tests and treatment are never performed. Thus, medical problems that may not be related to age and may just as frequently occur in younger people are often not treated. As an example, a recent survey of physicians involved in the health-care of the elderly reported that 35% of the doctors considered hypertension a result of the aging process and that 25% of them felt that treating an 85-year-old for symptoms of hypertension would cause more harm than the benefits it would produce.

Consider This Real-Life Example

(courtesy of the National Care Planning Council, www.longtermcarelink.net)

A 71 year old woman has surgery on her shoulder for a bone spur that is causing her

considerable pain. The surgery is successful and she goes through several months of physical therapy to help her recover. But she is not recovering as expected. She continues to experience pain that radiates through her entire back. Her physical therapist does not know how to help her and attributes her failure to recover to old age.

She visits her family care doctor at least twice over the next six months, complaining of extreme tiredness and lack of energy. He tells her to exercise patience. He tells her that older people generally don't recover as quickly from major surgery as younger people do. She should expect to be tired as surgery can have a major effect on the elderly.

Her skin color is gray and she does not look healthy. Finally she visits her doctor once again and insists he check her for some problem since she is not recovering from the surgery and she feels awful.

Based on her insistence, he does blood labs and discovers she is severely anemic. He puts her in outpatient care and gives her four units of red blood cells and puts her on iron supplementation. Within two weeks the pain has disappeared and within a month she has recovered fully from the surgery. Numerous tests are done but there is no explanation for the anemia.

Six months later she is healthy and active and her cheeks are ruddy. When she asks her doctor why he did not suspect anemia, he tells her that she has never had anemia and based on her history he would never expect her to develop it. He then tells her, in an obvious contradiction of his previous position, that older people sometimes fail to absorb iron.

If this had been a young person, the doctor would have likely suspected that something else was wrong and conducted the tests. Because this was an older person, the doctor assumed failure to recover was due to old age.

A Holistic Treatment Approach

Most practitioners who specialize in medical care for the elderly are aware of the above-mentioned problems with older patients and they take a holistic approach with the medical treatment of their patients. An attempt is made, not only to treat the specific condition or conditions, but to make sure there is sufficient physical activity, proper nutrition and family support at home. Practitioners work closely with family members to make sure their loved ones are taking medications properly and are reporting their symptoms.

Geriatric-oriented practitioners require caregivers to closely monitor health conditions in their loved ones and report any changes before things get worse. These providers also meet with their patients regularly enough to monitor, on their own, their patient's current health.

This broad-based approach results in better health, more functionality and fewer visits to the emergency room because intervention for a worsening condition is achieved at an earlier stage.