



An Overview on Geriatric Diseases

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Description

Geriatric diseases are medical conditions that affect elderly individuals above 65 years of age. As individuals age, their body undergoes several changes, and these changes can increase the probability of developing certain health conditions. Geriatric diseases are frequently chronic, progressive, and have a significant impact on an individual's quality of life [1,2].

Alzheimer's disease

Alzheimer's disease is a neurological condition that impaired cognitive memory, intellectual functioning, and social behaviour. It is the most common cause of dementia in the older adults. Alzheimer's disease has no genetic component, but it is believed to be a combination of genetic and environmental factors [3,4]. Some of the common symptoms of Alzheimer's disease include memory loss, confusion, and difficulty with language, mood swings, and personality changes. Alzheimer's disease currently has no cure, but medications and lifestyle changes can help to manage symptoms and slow down the progression of the disease.

Arthritis

Arthritis is a condition that causes joint inflammation, resulting in muscle pain and swelling. It is more common in the older adults, and it can be caused by a number of factors such as genetics, injury, and infection [5,6]. Rheumatoid and osteoarthritis arthritis are the most common types of arthritis in the elder people. Symptoms of arthritis include joint pain, swelling, stiffness, and reduced range of motion. Medication, physical therapy, and behavior modification are some of the treatment options.

Osteoporosis

Osteoporosis is a disease that causes the bones to deteriorate and become brittle, increasing the risk of hip fracture. It is more common in women than men, and it is caused by a wide range of factors such as genetics, hormone levels, and lifestyle choices [7,8]. Symptoms of osteoporosis include back pain, loss of height, and fractures. Treatment options include medication, exercise, and dietary changes.

Diabetes

Diabetes is a disease that impairs the body's ability to control the level of sugar in the blood. It is more common in the older adults, and it can be caused by a variety of factors such as genetics, obesity, and

lifestyle choices. Diabetes symptoms include increased anxiety, frequent urination, lack of energy, and nausea. Medication, behavior modification, and blood glucose monitoring all are treatment options [9-11].

Cardiovascular disease

A group of conditions that can affect the heart and blood vessels is referred to as cardiovascular disease. It is more common in the older adults, and it can be caused by a number of factors such as high blood pressure, high cholesterol, and lifestyle choices. Symptoms of cardiovascular disease include chest pain, shortness of breath, and fatigue. Medication, dietary changes, and surgical procedures all are treatment options.

Depression

Depression is a common mental health condition that affects many elderly individuals. It can be caused by a variety of factors such as genetics, medical conditions, and life events. Depression symptoms include sadness, loss of hope, and a loss of interest in activities. Medication, treatments, and behavior modification all are treatment options.

Incontinence

Incontinence is characterized by the impairment of stomach or bowel control. It is more common in the older adults, and it can be caused by a variety of factors such as medical conditions, medications, and lifestyle choices. Symptoms of incontinence include frequent urination, sudden urges to urinate or defecate, and leakage. Medication, physical and occupational therapy, and behavior modification are the treatment options.

Geriatric illnesses are a common chronic condition for the elder people. People can have a significant impact on a person's quality of life and it can be difficult to manage. To assist individuals with leading their best lives in their older life, it is critical to understand the causes, symptoms, and medical interventions for all these conditions.

References

1. Akushevich I, Kravchenko J, Ukraintseva S, Arbeev K, Yashin AI (2012) Age patterns of incidence of geriatric disease in the US Elderly population: Medicare-based analysis. *J Am Geriatr Soc* 60(2):323-327.
2. Preston SD, Southall AR, Nel M, Das SK (2008) Geriatric surgery is about disease, not age. *J R Soc Med* 101(8):409-415.
3. Kaufman SR (1994) Old age, disease, and the discourse on risk: Geriatric assessment in US health care. *Med Anthropol Q* 8(4): 430-447.
4. Afilalo J, Therrien J, Pilote L, Ionescu-Ittu R, Martucci G, et al (2011) Geriatric congenital heart disease: Burden of disease and predictors of mortality. *J Am Coll Cardiol* 58(14):1509-1515.
5. Cesari M, Marzetti E, Thiem U, Perez-Zepeda MU, Van Kan GA et al (2016) The geriatric management of frailty as paradigm of "The end of the disease era". *Eur J Intern Med* 31:11-14.
6. Frocht A, Fillit H (1984) Renal disease in the geriatric patient. *J Am Geriatr Soc* 32(1):28-43.

7. Ireland JL, Clegg PD, McGowan CM, McKane SA, Chandler KJ (2012) Disease prevalence in geriatric horses in the United Kingdom: Veterinary clinical assessment of 200 cases. *Equine Vet J* 44(1):101-106.
8. Mohamadi M, Goodarzi A, Aryannejad A, Fattahi N, Alizadeh-Khoei M, et al (2020) Geriatric challenges in the new coronavirus disease-19 (COVID-19) pandemic: A systematic review. *Med J Islam Repub Iran* 34:123.
9. Hardie EM, Roe SC, Martin FR (2002) Radiographic evidence of degenerative joint disease in geriatric cats: 100 cases (1994–1997). *J Am Vet Med Assoc* 220(5):628-632.
10. Norman RA (2003) Geriatric dermatology. *Dermatol Ther* 16(3): 260-268.
11. Lyketsos CG, Colenda CC, Beck C, Blank K, Doraiswamy MP, et al (2006) Position statement of the american association for geriatric psychiatry regarding principles of care for patients with dementia resulting from Alzheimer disease. *Am J Geriatr Psychiatry* 14(7):561-173.