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# Challenges of Diabetes Management in the Elderly **Patients**

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# **Description**

Elderly patients with diabetes represent a growing and complex population with unique challenges in the management of their disease. As individuals age, their bodies may become less sensitive to insulin, which can make it more difficult to regulate blood glucose levels. This can lead to an increased risk of complications, such as cardiovascular disease, neuropathy, and retinopathy. Additionally, elderly patients may have comorbid conditions that can impact diabetes management, such as cognitive impairment, functional limitations, polypharmacy [1].

The key to successful diabetes management in the elders is a comprehensive, patient-centered approach that addresses their specific needs and circumstances. This may involve tailoring treatment plans to accommodate cognitive or physical limitations, focusing on lifestyle interventions, and promoting medication adherence. Additionally, a multidisciplinary care team that includes healthcare professionals from various specialties can help address the unique challenges facing elderly patients with diabetes [2].

## Effects on diabetes in elderly patients

Increased risk of cardiovascular disease: Individuals with diabetes are at a higher risk of developing cardiovascular disease, which can lead to heart attack or stroke. Aging individuals with diabetes are particularly susceptible to this risk, as their blood vessels may already be weakened due to the natural aging process [3].

Nerve damage: Diabetes can cause nerve damage, which can lead to problems with sensation, particularly in the feet and hands. Aging individuals with diabetes may be more likely to experience this type of nerve damage, as their nerves may be more susceptible to damage over time.

Vision problems: Diabetes can cause damage to the blood vessels in the eyes, which can lead to vision problems, including blindness. Aging individuals with diabetes may be more likely to experience this type of damage, as the natural aging process can also lead to changes in the eyes [4].

Increased risk of infections: Aging individuals with diabetes may

be more susceptible to infections, as diabetes can weaken the immune system. Infections can be particularly problematic for aging individuals, as their immune system may already be weakened due to the natural aging process.

Slower healing: Diabetes can also slow down the healing process, particularly for wounds. Aging individuals with diabetes may be more susceptible to slower healing, as the natural aging process can also slow down the healing process.

### Factors for managing diabetes in elderly patients

Medication management: Elderly patients with diabetes may be taking multiple medications for other health conditions, which can increase the risk of drug interactions and side effects. It's important to work with the patient's healthcare provider to ensure that their medications are appropriately managed and adjusted as needed.

Blood sugar control: Blood sugar levels can be more difficult to control in elderly patients, as their bodies may be less responsive to insulin. Regular monitoring of blood sugar levels and adjustment of medication dosages can help to prevent complications.

Nutritional needs: As people age, their nutritional needs may change, and they may need to modify their diet to manage their diabetes. This may include reducing their intake of certain foods, such as carbohydrates and sugar, and increasing their consumption of fruits, vegetables, and lean proteins.

Exercise: Regular physical activity is important for managing diabetes in elderly patients. However, it's important to consider the patient's physical limitations and mobility issues, and work with them to develop an exercise plan that is safe and effective.

Complications: Elderly patients with diabetes are at increased risk of developing complications such as neuropathy, retinopathy, and kidney disease. Regular screening and monitoring can help to detect these complications early, and appropriate management can help to prevent further progression.

Social support: Diabetes can be a challenging condition to manage, and elderly patients may benefit from social support and community resources. Caregivers, support groups, and healthcare professionals can all provide valuable support to help elderly patients with diabetes to manage their condition effectively [5,6].

#### Conclusion

In conclusion, diabetes management in the elderly population requires a comprehensive and individualized approach. The management should focus on achieving optimal glycemic control while considering the potential risks associated with hypoglycemia and other comorbidities that are commonly seen in the elderly population. Lifestyle modifications, such as a healthy diet and regular physical activity, are essential components of diabetes management in the elderly. Medications should be chosen based on individual characteristics and comorbidities, and the potential risks and benefits of treatment should be carefully considered.

### References

Dhindsa S, Ghanim H, Batra M, Dandona P (2018) Hypogonadotropic hypogonadism in men with diabesity. Diabetes Care 41:1516-1525.



- Chia CW, Egan JM, Ferrucci L (2018) Age-related changes in glucose metabolism, hyperglycemia, and cardiovascular risk. Circ Res 123:886–904.
- 3. Kotsani M, Chatziadamidou T, Economides D, Benetos A (2018) Higher prevalence and earlier appearance of geriatric phenotypes in old adults with type 2 diabetes mellitus. Diabetes Res Clin Pract. 135:206–17.
- 4. Wolf, P. A. (2003) The influence of gender and age on disability following ischemic stroke: the Framingham study. J Stroke Cerebrovasc Dis 12:119–126.
- C. E (2005) Oxford Vascular Study. Population-based study of event- rate, incidence, case fatality, and mortality for all acute vascular events in all arterial territories (Oxford Vascular Study). Lancet 366:1773–1783.
- 6. Zhang, Y., Reilly, K. H., Tong, W., Xu, T, et al (2008) Blood pressure and clinical outcome among patients with acute stroke in Inner Mongolia, China. J. Hypertens. 26, 1446–1452.

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