

## Hospital Holds Risks for Elderly

Daniel Haimowitz, MD, CMD, a multifacility medical director in Pennsylvania, talks about the downside of hospital stays for elders.

Going to the hospital may do a frail elder more harm than good. Many treatments can be safely and effectively provided in the nursing home, including intravenous antibiotics and fluids, without sending you or your family member to an unfamiliar, hectic setting where the nurses and staff don't know you.

One common hospital-related problem is delirium, marked by sudden confusion and inability to think or talk clearly. It can happen when a person has surgery, anesthesia, a fever and/or infection. Many medications—including painkillers, sedatives, sleeping pills, and incontinence drugs—can cause delirium. "Sundowning," a confused state that usually happens in early evening and into the night, also affects elderly people in the hospital—especially when they have some memory loss.

Elderly hospital patients also are at risk for falls. These may be caused by factors including sleeping pills, bed rails (that people try to climb over), and confusion due to unfamiliar surroundings. Hospitals also can harbor microbes, including multi antibiotic-resistant bacteria like methicillinresistant *Staphylococcus aureus* and *Clostridium difficile* that can cause serious infections.

Older people have thinner skin, so they can get a pressure ulcer, or bedsore, in the hospital. This can be caused by lying in bed or when heels or other bony body parts rub or bump on surfaces like sheets or mattresses. A pressure ulcer can develop quickly, even on a stretcher in the emergency room for a few hours. When not addressed promptly, a sore can become a painful blister or open wound.

If you go to the hospital, family members or friends can be advocates and help you communicate with hospital physicians, nurses, and other staff. Make sure you and/or your family member know everything that is being done and why. Your

physician also can be an important advocate and help you decide if you want to go to the hospital when you get ill, and the benefits and risks involved.

## ▶ Questions to Ask the Physician:

- Do I really need to go to the hospital? Can I get similar treatments in the nursing facility?
- How can I make sure the hospital staff knows my wishes/preferences?
- How can I reduce the risk of falls in the hospital and help prevent infections and delirium?

## ► What You Can Do:

- Talk with your physician and family about when you want/don't want to be hospitalized.
- Make sure your physician, family, and hospital have copies of your advance directive.
- Know what medications you are taking and discuss any new drugs you get at the hospital with your physician.
- Don't try to get out of bed without help. Use appropriate assistive devices as needed to get in and out of bed/chairs and to walk.
- Drink plenty of liquids and limit caffeine intake to mornings to help prevent sundowning.

## **For More Information:**

- Taking the Confusion Out of Delirium: www.caringfortheages.com/index. php?id=495&cHash=071010&tx\_ttnews[tt\_news]=2447
- Pressure Ulcers: www.amda.com/consumers/ pressureulcers.cfm
- Sundowning: Late-Day Confusion: www. mayoclinic.com/health/sundowning/HQ01463
- Preventing Hospital Delirium: http:// newoldage.blogs.nytimes.com/2011/11/11/ preventing-hospital-delirium/
- Preventing Hospital Infections: http://health. howstuffworks.com/wellness/preventive-care/ how-to-prevent-viral-infections8.htm



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