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Older persons with mental disorders

-health, care and health care situations

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ABSTRACT

Older persons with mental disorders other than dementia disorders represent a vulnerable group in the health care system. Old age brings inevitable changes and the additional impact of newly developed mental disorders may strikingly alter the life situation. The prevalence of mental disorders is likely to increase with the increase in the older population, and as a result of deinstitutionalization the number of older persons remaining in their own homes with extensive and complex needs is increasing. This entails new challenges for their caregivers in Swedish municipal home help services, mainly nursing aides, and the care they provide may greatly benefit from symptomatic stability. However, treatment of older persons with mental disorders entails complex challenges, with drugs constituting the major therapeutic intervention and adequate treatment calls for knowledge in geriatric psychiatry among the prescribers.

This thesis aimed to develop a deeper understanding and enhanced knowledge about the life situation of older persons with mental disorders. Four studies have been included in this thesis (I-IV). Study I aimed to illuminate the meaning of the life situation as experienced by seven dependent older persons with mental disorders and the findings suggest that their life situation involved a struggle for existence. This was understood as a loss of respect and dignity; they longed for a sense of belonging and to be seen as equals with own abilities and knowledge. Study II facilitated an approximation of the prevalence of mental disorders within the older population in Sweden during 2006 to 2008 by estimating their drug use for mental disorders; drug use was thus a proxy for diagnosis. The Swedish Prescribed Drug Register (SPDR) was used for gathering data on anxiety, psychotic and affective disorders, resulting in an estimated prevalence of mental disorders of 6.6% among the older population, lowest among 65 to 69 year olds and increasing with age. Study III illuminated the meaning of caring for older persons with mental disorders as experienced by nine nursing aides. The findings suggest that nursing aides struggle to find the balance between altruistic and egoistic actions, and distancing was used as recourse to prioritize oneself and diminish the value of caring. Study IV also used the SPDR as a data source to evaluate the prescription of drugs for mental disorders to the older population, focusing on the medical specialties held by the prescribing physicians. The findings show primarily that the proportions of prescriptions made by geriatricians and psychiatrists were remarkably low in comparison to other specialties.

In conclusion, the life situation of older persons with mental disorders is complex and the older persons are neglected, struggle with existential issues, and yearn for respect. The extent of persons seeking health care and receiving treatment for plausible mental disorders suggest that mental health issues are common among the old. The older persons exist in a context encompassing several organizations and care providers. Although nursing aides fill an important human function in the care of the old, they are in need of support and guidance to balance their altruistic and egoistic actions. Their sources of support and guidance may be limited by the lack of specialists in geriatrics and psychiatry in health care. The findings contribute with a deeper and extended knowledge about older persons with mental disorders and conclude that all dimensions of the older persons are in need of acknowledgment to increase health and well-being. In addition, the status of working with geriatric psychiatry should be increased all through the health care system as it may promote work satisfaction and retention, which ultimately would improve the situation for older persons with mental disorders.

Key words: Aged, Epidemiology, Mental disorders, Municipal care of the old, Nursing aides, Old age psychiatry, Phenomenological hermeneutics, Physicians, Register-based, Specialist competence