

7th International Conference on**GERIATRICS GERONTOLOGY & PALLIATIVE NURSING**

September 4-5, 2017 | Edinburgh, Scotland

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PRESCRIBING FOR THE OLDEST OLD

Given the global increase in people over the age of 85, there is a growing body of literature looking at treating the oldest old. However much of this work is confined to the literature, specialising in geriatrics and the more generic health care papers refer to 'older people' with little definition of what is meant by 'old'. Age is not a diagnosis, but humans do have a finite lifespan and as they age, they become increasingly more susceptible to disease and have decreased functional reserve. A major issue in prescribing for people over the age of 85 is that guidelines for diseases are based on trials with younger adults, outline the best practice for one disease in isolation of other diseases and take no account of the interaction of drugs used in managing several diseases. Iatrogenesis (ill health caused by doctors) is a major issue which points to the fact that nurse prescribers and general practitioners (GPs) need practical help in prescribing for the oldest old. Balancing evidenced based practice with clinical judgement means weighing up what will do good, what will cause harm and what is acceptable to the patient. This has to be carried out mostly in isolation from colleagues, within a time-limited consultation with few relevant guidelines on managing multi morbidities in the oldest old. A narrative literature review was undertaken and a literature search on iatrogenesis and the oldest old showed that all papers sourced referred to prescribing for the 'old' as those aged over 65, with only scant mention of the oldest old. This paper presents the findings of this review.

Biography

Angela Kydd has her expertise in frail older people and people with dementia. She worked as a nurse for ten years before working in academia. She is an associate professor at Edinburgh Napier University and works as a co-founder of a Pan-University Ageing Research Network. Over the years she has designed and delivered degree and masters programmes and modules in gerontology. She has undertaken research on attitudes to health care professionals working with older people, self-care beliefs of women with diabetes and her PhD thesis was on delayed discharge from a policy and patient perspective. She has also undertaken evaluations of clinical areas and projects. Her latest project was on developing the culture and care in a care home setting, which included on site work with three care homes. She is co-editor of a textbook on The Care and Well-being of Older People and has numerous publications in this field.

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