

Geriatric Care Worldwide: Challenges and Opportunities

Robert Durkey*

Department of Advanced Nursing Science, School of Health Sciences, Sweden

Abstract

The world's population is aging rapidly, and the number of older adults is expected to double by 2050, according to the World Health Organization. This demographic shift has significant implications for healthcare systems around the world, particularly in the area of geriatric care. This article will examine the challenges and opportunities associated with geriatric care worldwide.

Keywords: Geriatric care; Patient; Nursing

Introduction

One of the main challenges of geriatric care is the increasing demand for services. Older adults have a higher prevalence of chronic health conditions, such as diabetes, heart disease, and dementia, which require ongoing care and management. This demand for services is further exacerbated by the fact that many older adults live with multiple chronic conditions [1, 2].

Methods

Another challenge is the shortage of healthcare professionals trained in geriatric care. Many healthcare providers lack the specialized knowledge and skills necessary to provide effective care to older adults. This shortage is particularly acute in low- and middle-income countries; where there are fewer resources and limited training opportunities. A third challenge is the high cost of geriatric care. Older adults often require more expensive medical treatments and medications, which can be financially burdensome for individuals and healthcare systems. In addition, long-term care for older adults can be costly, particularly in countries where there is a lack of insurance coverage or government support for such services [3, 4].

Opportunities

Despite these challenges, there are also opportunities for improving geriatric care worldwide. One opportunity is the use of technology to deliver care remotely. Telemedicine and mobile health applications can enable healthcare providers to monitor and manage chronic conditions in older adults, even if they live in remote or underserved areas. This can improve access to care and reduce the need for in-person visits, which can be particularly beneficial during a pandemic.

Another opportunity is the integration of geriatric care into primary care. Many older adults receive care from multiple providers, which can result in fragmented and uncoordinated care. By integrating geriatric care into primary care, healthcare providers can better coordinate care and address the complex needs of older adults.

A third opportunity is the development of age-friendly communities. An age-friendly community is one that is designed to meet the needs of older adults, with features such as accessible housing, transportation, and healthcare services. Age-friendly communities can help older adults remain independent and engaged in their communities, which can have positive effects on their health and well-being [5, 6].

Specialized care for older adults

Older adults have unique healthcare needs, and specialized geriatric care is essential for ensuring that these needs are met. This includes

providing comprehensive assessments of physical, cognitive, and social functioning, as well as developing personalized care plans that take into account the individual's health status, preferences, and goals.

However, access to specialized geriatric care remains limited in many parts of the world. This is due in part to a shortage of geriatric specialists and a lack of funding for geriatric programs. To address this gap, healthcare systems must invest in training programs for geriatric specialists and expand the availability of geriatric care in community settings [7, 8].

Conclusion

The aging of the global population presents significant challenges for healthcare systems around the world. However, there are also opportunities to improve geriatric care and support older adults to age with dignity and independence. To achieve this, healthcare systems must invest in the training of healthcare professionals in geriatric care, as well as the development of innovative models of care delivery. In addition, governments and communities must work together to create age-friendly environments that support the health and well-being of older adults [9,10].

Acknowledgement

None.

Conflict of Interest

None.

References

1. Taylor G (2003) The phase problem Acta Cryst D 59:1881-1890.
2. Bedouelle H (February 2016) Principles and equations for measuring and interpreting protein stability: From monomer to tetramer. Biochimie 121:29-37.
3. Monsellier E, Bedouelle H (September 2005) Quantitative measurement of protein stability from unfolding equilibria monitored with the fluorescence maximum wavelength. Protein Eng Des Sel 18:445-456.

*Corresponding author: Robert Durkey, Department of Advanced Nursing Science, School of Health Sciences, Sweden, E-mail: robert33@gmail.com

Received: 03-Mar-2023, Manuscript No: JCPHN-23-91784; **Editor assigned:** 06-Mar-2023, Pre-QC No: JCPHN-23-91784 (PQ); **Reviewed:** 20-Mar-2023, QC No: JCPHN-23-91784; **Revised:** 22-Mar-2023, Manuscript No: JCPHN-23-91784 (R); **Published:** 29-Mar-2023, DOI: 10.4172/2471-9846.1000396

Citation: Durkey R (2023) Geriatric Care Worldwide: Challenges and Opportunities. J Comm Pub Health Nursing, 9: 396.

Copyright: © 2023 Durkey R. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

4. Park YC, Bedouelle H (July 1998). Dimeric tyrosyl-tRNA synthetase from *Bacillus stearothermophilus* unfolds through a monomeric intermediate. A quantitative analysis under equilibrium conditions. *The J Biol Chem* 273:18052-18059.
5. Ould-Abeih MB, Petit-Topin I, Zidane N, Baron B, Bedouelle H (June 2012) Multiple folding states and disorder of ribosomal protein SA, a membrane receptor for laminin, anticarcinogens, and pathogens. *Biochemistry*. 51:4807-4821.
6. Bustreo C, Giuliani U, Maggio D, Zollino G (2019) How fusion power can contribute to a fully decarbonized European power mix after 2050. *Fusion Eng Des* 146: 2189-2193.
7. Goglio P, Williams AG, Balta-Ozkan N, Harris NR, Williamson P, et al. (2020) Advances and challenges of life cycle assessment (LCA) of greenhouse gas removal technologies to fight climate changes. *J Clean Prod* 244: 118896.
8. Khalidy R, Santos RM (2021) The fate of atmospheric carbon sequestered through weathering in mine tailings. *Miner Eng* 163: 106767.
9. Lezaun J (2021) Hugging the shore: tackling marine carbon dioxide removal as a local governance problem. *Front Climate* 3: 684063.
10. Lockley A, Mi Z, Coffman DM (2019) Geoengineering and the blockchain: coordinating carbon dioxide removal and solar radiation management to tackle future emissions. *Front Eng Manag* 6: 38-51.
11. Obbard RW, Sadri S, Wong YQ, Khitun AA, Baker I (2014) Global warming releases microplastic legacy frozen in Arctic Sea ice. *Earth's Future* 2:315-320.