



Advancements in Geriatric Medicine: A Comprehensive Review

Leo Golstoy*

Department of Cell Biology, Morris Park Ave University, Bronx, NY, USA

ABSTRACT

The field of geriatric medicine has seen remarkable advancements in recent years, driven by the growing aging population and the increasing recognition of the unique healthcare needs of older adults. As life expectancy continues to rise, the importance of specialized care for seniors cannot be overstated. This comprehensive review explores the key advancements in geriatric medicine, encompassing medical, technological, and holistic approaches to improve the quality of life for older adults.

Keywords: Healthcare; Geriatric medicine; Older adults

INTRODUCTION

As the world's population continues to grow older, the study of ageing and its impact on health has gained increasing attention. Ageing is a natural and inevitable process that affects all individuals, and understanding its complexities is crucial for promoting healthy ageing and developing effective interventions. In this article, we will explore the latest research and insights on ageing and health, covering various aspects such as biological, psychological, and social factors. One of the key biological processes associated with ageing is cellular senescence. Senescent cells lose their ability to divide and function properly, contributing to tissue dysfunction and age-related diseases. Recent research has shown that senescent cells play a significant role in the development of chronic conditions like cancer.

LITERATURE REVIEW

Before delving into the advancements in geriatric medicine, it is crucial to understand the context in which these developments have taken place. The global population is aging rapidly, a phenomenon known as demographic aging. In many countries, including the United States, Europe, and Japan, the proportion of individuals aged 65 and older is steadily increasing. This demographic shift poses both challenges and opportunities for healthcare systems worldwide [1].

As individuals age, they are more susceptible to chronic diseases such as hypertension, diabetes, heart disease, and neurodegenerative disorders like Alzheimer's disease. Managing these conditions effectively is essential for maintaining seniors' quality of life. Older adults often require multiple medications to manage their health, leading to the risk of polypharmacy. Geriatric medicine aims to

optimize drug regimens to minimize adverse effects and drug interactions. Aging can result in a decline in physical and cognitive function. This can lead to frailty, falls, and a reduced ability to perform daily activities independently. Loneliness, depression, and cognitive decline are prevalent psychosocial issues among the elderly. Addressing these needs is critical for their overall well-being [2].

Advances in geriatric medicine emphasize preventive care to reduce the incidence of age-related diseases. This includes vaccinations, regular health check-ups, and lifestyle modifications. The shift towards personcentered care involves tailoring healthcare plans to individual preferences and needs. This approach respects the autonomy and dignity of older adults. Technology plays a pivotal role in improving the healthcare of older adults, from telemedicine and wearable devices to smart home technologies designed to enhance safety and independence. Geriatric medicine embraces an interdisciplinary approach, with healthcare professionals from various fields working together to provide comprehensive care [3].

DISCUSSION

Geriatric assessment is a comprehensive evaluation of an older adult's medical, functional, cognitive, and psychosocial status. This assessment helps identify potential issues and tailor care plans accordingly. Recent advancements in geriatric assessment include: Frailty Assessment Tools: Newer tools and scales have been developed to assess frailty more accurately. Identifying frailty early allows for targeted interventions. CGA is a multidimensional assessment that considers various aspects of an older adult's health. It has become a cornerstone of geriatric care.

The recognition of the importance of palliative care and hospice services has grown significantly in geriatric medicine. These

Correspondence to: Leo Golstoy, Department of Cell Biology, Morris Park Ave University, Bronx, NY, USA; E-mail: leogolstoy443@surgery.edu

Received: 02-October-2023, Manuscript No. jggr-23-23496; **Editor assigned:** 04-October-2023, Pre QC No. P-23496; **Reviewed:** 17-October-2023, QC No. Q-23496; **Revised:** 23-October-2023, Manuscript No. R-23496; **Published:** 30-October-2023, DOI: 10.35248/2167-7182.2023.12.692

Citation: Golstoy L (2023). Advancements in Geriatric Medicine: A Comprehensive Review. J Gerontol Geriatr Res. 12: 692.

Copyright: © 2023 Golstoy L. 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.

services focus on providing comfort and improving the quality of life for individuals with serious illnesses, especially those nearing the end of life. Early Integration: Palliative care is now integrated into standard care earlier in the disease trajectory, not just in the terminal stage. Telehealth services have expanded access to palliative care for seniors, enabling consultations and support from the comfort of their homes. Telemedicine has gained tremendous popularity in recent years, driven by the COVID-19 pandemic and the need to provide healthcare remotely. This technology has several benefits for older adults. Wearable devices like smartwatches and fitness trackers offer various health-related functionalities, such as monitoring heart rate, tracking physical activity, and detecting falls. These devices enable older adults to take an active role in their health management. Assistive technologies designed for seniors include smart home devices that enhance safety and independence. These technologies can include. Robotic technology is being employed in geriatric medicine to assist with various tasks, such as mobility support, rehabilitation, and even companionship. Robots can help seniors maintain their independence and improve their overall well-being [4-6].

CONCLUSION

AI can analyse large datasets to predict health outcomes and identify individuals at risk of specific diseases. Natural Language Processing: This technology can assist with medical record documentation and communication with older patients. Advancements in geriatric medicine are not limited to medical and technological innovations. Holistic approaches that address the psychosocial and emotional needs of older adults are gaining prominence. Recognizing the negative impact of social isolation and loneliness on seniors' health, healthcare providers are taking steps to combat these issues. This includes promoting social engagement through community programs, support groups, and technology-enabled social connections. Geriatric mental health

services have expanded to provide specialized care for conditions such as depression, anxiety, and dementia-related behavioral symptoms. This includes psychotherapy.

ACKNOWLEDGEMENT

None.

CONFLICT OF INTEREST

None.

REFERENCES

1. Becattini C, Agnelli G, Lankeit M, Masotti L, Pruszczyk P, Casazza F, et al. Acute pulmonary embolism: Mortality prediction by the 2014 European Society of Cardiology risk stratification model. *Eur Respir J*. 2016; 48:780-786.
2. Engbers MJ, Vlieg AV, Rosendaal FR. Venous thrombosis in the elderly: Incidence, risk factors and risk groups. *J Thromb Haemost*. 2010; 8:2105-2112.
3. Spencer FA, Emery C, Lessard D, Anderson F, Emani S, Aragam J, et al. The Worcester Venous Thromboembolism study: A population-based study of the clinical epidemiology of venous thromboembolism. *J Gen Intern Med* 2006;21:722-727.
4. Spencer FA, Emery C, Joffe SW, Pacifico L, Lessard D, Reed G, et al. Incidence rates, clinical profile, and outcomes of patients with venous thromboembolism. The Worcester VTE study *J Thromb Thrombolysis* 2009; 28:401-409.
5. Spencer FA, Gore JM, Lessard D, Emery C, Pacifico L, Reed G, et al. Venous thromboembolism in the elderly. *Thromb Haemost*. 2008;100:780-788.
6. Spencer FA, Gurwitz JH, Schulman S, Linkins LA, Crowther MA, Ginsberg JS, et al. Venous thromboembolism in older adults: A community-based study. *Am J Med* 2014; 127:530-537.