A study on health problems among the elderly

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■**ABSTRACT :** The present study was conducted in the year 2017-2018 to study the problems among the elderly. The sample consists of 120 elderly population aged 60 years and above residing in Hubli and Dharwad cities. A self structured interview schedule was used to collect the data. The results revealed that nearly one third and equal percentage of elderly belonged to underweight and overweight followed by normal weight and obese categories. Diabetes was the major problem faced by the selected elderly followed by blood pressure arthritis, coronary heart diseases and asthma. General weakness, poor eyesight and loss of hearing were the other problems faced by the elderly. Pain in knees while using toilets and while sitting and getting up were ranked first by the elderly. Hence it can be concluded that advancing age is associated with increasing physical frailty, cognitive impairment and economic vulnerability and requires appropriately supportive environments.

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The old age is an integral part of human life. It is the precious time spent by an individual with and around the environment, where it gives the feeling that one has entered to the childhood again. Elderly or old age consists of ages nearing or surpassing the average life span of human beings. The boundary of old age cannot be defined exactly because it does not have the same meaning in all societies. The 'National Policy on Older Persons' (1999) adopted by Government of India defines 'senior citizen' or 'elderly' as a person who is of age 60 years or above. Although retirement from accustomed work is usually at the age of 60 years, general vitality and interest may continue at the moderate pace for some more years. The first five years may be considered young old, the second five years as old-old and the years thereafter as oldest-old.

The elderly constitutes a rapidly growing proportion of our population. During the last few decades, there has been a tremendous increase in the population of elderly persons in the world and it becomes very essential to gain familiarity in understanding of the ageing related needs of the elderly population (Bhandari, 1999). According to Population Census (2011) there are nearly 104 million elderly persons (aged 60 years or above) in India out of which 53 million are females and 51 million are males. The size of elderly population is increasing over time from 5.6 per cent in 1961 to 8.6 per cent in 2011.

■ RESEARCH METHODS

The present study was conducted during the year

2017-2018 in urban areas of Dharwad district, Karnataka. The exploratory research design was used under the study. This design was considered appropriate because it provides information about the existing situations. It calls the attention to the problems which need solutions. A total sample of 120 elderly population including both male and female aged 60 years and above residing in Hubli and Dharwad cities were selected using random sampling technique. The pre-structured schedule was formulated to collect and observe the required information from the sample under the study by reviewing the relevant review of literature and consulting the subject specialist. Suitable statistical tools were used to analyse the data.

■ RESEARCH FINDINGS AND DISCUSSION

The results obtained from the present investigation as well as relevant discussion have been summarized under following heads :

Demographic profile of selected respondents:

The data on Demographic profile of selected respondents is presented in Table 1. The sample size of the study was 120 elderly, covering 70 men and 50 women. Among the three categories of age groups, the 40 per cent of male respondents and 36 per cent of female respondents belonged to the age group of 60-68 years. This was followed by 37.14 per cent of male and 40 per cent of female in the age range of 69-77. Only 16

Table 1 : Demographic profile of selected respondents			(n=120)
Particulars	Respondents		Total
	Male (n=70)	Female (n=50)	
Age (years)			
60-68	28 (40.00)	18 (36.00)	46 (38.33)
69-77	26 (37.14)	20 (40.00)	46 (38.33)
78-86	16 (22.85)	12 (24.00)	28 (23.33)
Education			
Illiterate	-	-	-
Primary school	-	10 (20.00)	10 (8.33)
High school	12 (17.14)	17 (34.00)	23 (19.16)
PUC	9 (18.85)	06 (12.00)	15 (12.5)
Graduate	36 (51.42)	11 (22.00)	47 (39.16)
Post-graduate	19 (27.14)	6 (12.00)	25 (20.83)
Occupation			
Working/ business	12 (17.1)	07 (14)	19 (15.83)
Retired	58 (82.8)	14 (28)	72 (60.00)
House wife	-	29 (58)	29 (24.10)
Marital status			
Married	55 (78.50)	41 (82)	96 (80.00)
Widow /widower	15 (21.4)	09 (18)	24 (20.00)
Living arrangement			
Living with spouse	21 (30.00)	10 (20.00)	31 (25.83)
Living with children and spouse	27 (38.57)	16 (32.00)	43 (35.83)
Living with children	14 (20.00)	18 (36.00)	32 (26.66)
Living single	08 (11.40)	06 (12.00)	14 (11.66)
Family size (number)			
<2	06 (8.50)	03 (6.00)	09 (7.50)
2-4	43 (61.42)	37 (74.00)	80 (66.66)
>5	21 (30.00)	10 (20.00)	31 (25.83)
Personal income per month (Rs.)			
8000-15000/-	28 (40.00)	18 (36.00)	46 (38.33)
15001-22000	24 (34.28)	06 (12.00)	30 (25.00)
22001-30000	18 (25.7)	03 (6.00)	21 (17.50)

Figures in the parentheses indicate percentage

per cent of male and 24 per cent of female respondents belonged to the age group of 78-86 years.

Irrespective of gender, equal percentage (38.33 %) of them belonged to the age group ranging 60-68 years and 69-77 years followed by 23.33 per cent of them belonged to age group 78-86 years. Similar findings were reported by Bhakshi *et al.* (2001), where 50 per cent of the sample under study in Ludhiana belonged to the age of 60-65 years. Irrespective of gender, equal percentage (38.33 %) of them belonged to the age group ranging 60-68 years and 69-77 years followed by 23.33 per cent of them belonged to age group 78-86 years.

Regarding the educational level of the selected elderly, it was found that 51.42 per cent of male and

22.00 per cent of female were graduates, while 27.14 per cent of male and 12.00 per cent of female had finished their post graduation followed by PUC (male 18.85 %, female 12.00 %) and high school (male 17.14 %, female 34.00 %). Only 20 per cent of the female respondents had completed their primary education.

Irrespective of gender it was found that higher percentage of the elderly were graduates (39.16 %), while 20.83 per cent of them were post graduates followed by PUC (12.5 %), high school (19.16 %). Only 8.33 per cent of them studied up to primary school.

Regarding the occupation, majority of the respondents were retired (60 %) followed by 24.10 per cent of them were house wives and 15.83 per cent of

Table 2 : Nutritional status of the selected elderly			(n=120)
BMI classification	Respondents		
	Male (n=70)	Female (n=50)	Total
Under weight (<18.5)	26 (37.14)	14 (28.00)	40 (33.33)
Normal weight (18.5-24.9)	16 (22.85)	8 (16.00)	24 (20.00)
Over weight (25.0-29.9)	21 (30.00)	19 (38.00)	40 (33.33)
Obese class (≥30)	7 (10.00)	9 (18.00)	16 (13.33)

Figures in the parentheses indicate percentage
Source: BMI classification for Asian adults (2004)

Table 3 : General health problems among the selected elderly					(n=120)
Sr. No.	Health problems	Male (n=70)	Female (n=50)	Total	X^2 value
Physical problems					
1.	Fatigue	34 (48.5)	28 (56)	62.00 (51.60)	0.8 NS
2.	General weakness	45 (64.2)	33 (66)	78.00 (65.00)	
3.	Poor eyesight	41 (58.5)	32 (64)	73.00 (60.80)	
4.	Loss of hearing	35 (50)	27 (54)	62.00 (51.60)	
5.	Loss of appetite	24 (34.2)	20 (40)	44.00 (36.60)	
6.	Physical limitations (back/leg/hands)	11 (15.7)	8 (10)	19.00 (15.80)	
Body pain					2.8NS
1.	Pain in the knees	53 (75.7)	43 (86)	96.00 (80.00)	
2.	Pain in legs	40 (57.1)	40 (80)	80.00 (66.60)	
3.	Back pain	31 (44.2)	27 (54)	58.00 (48.30)	
4.	Shoulder pain	41 (58.5)	29 (58)	70.00 (58.30)	
5.	Headache	25 (35.7)	16 (32)	41.00 (34.10)	
Physiological disorders					2.92NS
1.	Blood pressure (Low/High)	47 (67.1)	31 (62)	78 (65)	
2.	Asthma	15 (21.4)	7 (14)	22.00 (18.30)	
3.	Diabetes	45 (64.2)	35 (70)	80.00 (66.60)	
4.	Arthritis	30 (42.8)	16 (32)	46.00 (38.30)	
5.	Coronary heart disease	30 (42.8)	11 (22)	41.00 (34.10)	

Figures in the parentheses indicate percentage
NS=Non-significant
*Multiple answer

them were working or doing business. Majority of both male (78.50 %) and female respondents (82 %) were married. Among the total sample 21.4 per cent and 18 per cent of them were widower and widow, respectively.

It was observed that one third of the sample were living with spouse (35.83 %), while 26.66 per cent of them were living with children followed by living with spouse (25.83 %) and living single (11.6 %).

Regarding the size of the family of selected respondents, majority of male (61.42 %) and female respondents (74 %) belonged to the family size of 2-4 members. Thirty per cent and 20 per cent of male and female household respondents' family size was found to be above five members. Meager percentage of male (8.50 %) and female (6.00 %) respondents belonged to the family size of less than two members. The monthly personal income, 38.33 per cent of respondents' monthly personal income ranged from Rs. 8,000/- to 15,000/- followed by Rs. 15,001/- to 22,000/- (25 %) and 22001-30000 (17.50 %) income ranges.

Nutritional status of selected elderly:

Nutritional status of the selected elderly was assessed by using Body Mass Index (BMI). Body Mass Index was computed by using height and weight and graded according to Asian adults (WHO), 2004.

It is clear from the Table 2 that about one third of both male and female sample (30 % and 38 %, respectively) belonged to overweight category of BMI classification. Similarly, 37.14 per cent and 28 per cent of male and female, respectively were found to be in underweight category of BMI classification followed by normal weight (male 22.85 %, female 16 %). Only 10

per cent of male and 18 per cent of female were found to be in obese category of BMI classification.

Irrespective of gender, nearly one third and equal percentage (33.33 %) of elderly belonged to underweight and overweight followed by normal weight (20 %) and obese class (13.33 %). The nutritional status of the selected elderly on the BMI classification scale for Asian adults (2004) revealed that one third and equal percentage of the sample (33.33 %) were lying in the under overweight categories and least percentage of them were lying in normal weight category. This could be because of aging factor and fluctuating health conditions.

The general health problems among the selected elderly is shown in Table 3. Regarding the physical health problems of elderly, general weakness was found to be a major health problem among both male (64.20 %) and female respondents (66 %) followed by poor eyesight (male 58.5 %, female 64 %), loss of hearing (male 50 %, female 54 %), fatigue (male 48.5 %, female 56 %), loss of appetite (male 34.2 %, female 40 %), while physical limitations was the least found problem among both male (15.7 %) and female respondents (10 %). These findings are on par with the results of Sandhu *et al.* (2002) and Aujla *et al.* (2001) who found that irrespective of gender, weak eye sight, blood pressure, joint pain, problem with teeth and weakness were common health problems among elderly.

The association between the different physical problems faced by the elderly and the gender was found to be statically non-significant (x^2 value:0.8). Irrespective of gender, general weakness was found to be the major health problem among elderly (65 %) followed by poor

Table 4 : Major health problems faced by the selected elderly					(n=120)	
Health problems	Garret Score (GS)					
	Male (n=70)	Rank	Female (n=50)	Rank	Total	Rank
Pain in knees while using toilets	50554	I	3601	I	8664	I
Pain in legs while sitting and getting up	4928	II	3520	II	8448	II
Diabetes (frequent urination)	4207	III	3005	III	7212	III
Physical limitations	3955	IV	2525	V	6780	IV
Poor eye sight	3556	V	2540	IV	6096	V
General weakness	3290	VI	2350	VI	5640	VI
Shoulder pain (no supports in bathroom)	3108	VII	2220	VII	5328	VII
Heart disease (to be taken care not to lift heavy materials)	2485	VIII	1775	VIII	4260	VIII
Arthritis	2359	IX	1685	X	4044	IX
Fatigue	2331	X	1665	IX	3996	X

Figures in the parentheses indicate percentage

eye sight (60.8 %), fatigue (51.6 %), loss of hearing (51.6 %), loss of appetite (36.6 %) and physical limitations (15.8 %).

Regarding the body pain, majority of both male (75.70 %) and female elderly respondents (86 %) experienced pain in knees followed by pain in legs (male 57.1 %, female 80 %), shoulder pain (male 58.5 %, female 58 %), back pain (male 44.2, female 54 %) and headache (male 45.7 %, female 34 %). The association between the different body pains suffered by the elderly and the gender was found to be statically non-significant (x^2 value: 2.8). Irrespective of gender, 'pain in knees' was the major problem faced by the selected elderly (80 %) followed by pain in legs (66 %), shoulder pain (58.3 %), back pain (48.3 %) and headache (34.1 %).

The findings of physiological disorders of selected elderly revealed that majority of the male respondents (67.10 %) suffered from blood pressure and on contrary majority of the female respondents (70 %) suffered from diabetes. About 62 per cent of female respondents were suffering from blood pressure, while 64.2 per cent of male were suffering from diabetes followed by arthritis (male 42.8 %, female 32 %), coronary heart diseases (male 42.8 %, female 22 %). Asthma was the least observed health problem among both male (21.4 %) and female (14 %) respondents. The association between the different physiological disorders faced by the elderly and the gender was found to be statically non-significant (x^2 value: 2.92). Irrespective of gender, 'diabetes' was the major problem faced by the selected elderly (66.6 %) followed by blood pressure (65 %), arthritis (38.3 %), coronary heart diseases (34.1 %) and asthma (18.3 %).

Major health problems faced by the selected elderly in relation to bathroom and water closet is depicted in Table 4. It is studied from the table that majority of the respondents ranked pain in knees while using toilet as first (GS:8664) and pain in legs while sitting and getting up as second (GS:8448). The problems like diabetes (GS:7212), physical limitations (GS:6780), poor eye sight (GS:6096), general weakness (GS:5640), shoulder pain (GS:5328), heart diseases (GS:4260), arthritis (GS:4044) and fatigue (GS:3996) were ranked from third to tenth, respectively.

Conclusion:

Elderly or old age consists of ages nearing or surpassing the average lifespan of human beings. The findings of the present study revealed that as the age progressed the health status decreased. Hence it can be concluded that advancing age is associated with increasing physical frailty, cognitive impairment and economic vulnerability, and requires proper care and appropriately supportive environments.

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