

One Reason Not To Trust Your Aging Parent's Doctor

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I write about healthy aging, and dealing with aging loved ones.

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We have a generally traditional respect for doctors in this country. Most people take them at their word, expect that they will properly care for our aging loved ones and we don't question them. But is that a safe way to go as our parents live longer than anyone thought they would? Maybe not. Aging expert Ken Dychwald, Ph.D at Age Wave urges us to wake up and see how pressing the issues are that affect our older population. Among them, he says " We have more than 50,000 pediatricians, but fewer than 5,000 geriatricians. Only eight of the country's 145 academic medical centers have full geriatrics departments, and 97% of U.S. medical students don't take a single course in geriatrics."

If the doctors treating our aging loved ones in their offices, clinics and hospitals have little to no specific awareness of age-related issues, they will not have expertise in how to best address them. With a 94 year old mother in law, I have seen this firsthand. No matter what the doctor sees, the remedy is most often more medication. The last time around, the multiple medication additions and subtractions in response to my mother in law's high blood pressure episode nearly killed her. She made it through that crisis partly because she's in rather good shape to start with, but also because her family was deeply involved in all the decisions being made about the treatment she received. I'd better be involved. I advise people about doing so for a living at AgingParents.com!

If you leave an aging person alone to just do what the doctor says, you can't always get the result you want. The senior may not be aware enough to tell the doctor what isn't working. Passive acceptance is more likely and that can be dangerous for your aging parent. The older generation of aging

parents is not likely to question things doctors do as their Boomer aged offspring might question them. Boomers, for example can quickly look up a medication or treatment on the internet and get a basic understanding. That understanding can give the adult child the basis for asking good questions, pointing out a parent's allergies or past results with what has already been tried and help give the medical team information it needs to make reasoned decisions.

The message here is that you have to get involved when there is any significant change in the medical care your aging parent is receiving. If you want it to go right, you have to take your time to help ensure that it will in every way you can. The way things work these days is that your parent's regular doctor is no longer in charge when he is admitted to the hospital. Instead a hospitalist there is directing what happens. That physician makes many decisions without ever having known your loved one before. Communication among doctors and other staff in hospitals is characteristically fragmented and unsatisfactory. Different specialists have different viewpoints and prescribe things they think are best without consulting one another. Your loved one's past history, past bad reactions to anything given and individual preferences can be easily overlooked or lost in the bureaucratic shuffle of a medical institution. You as the adult child need to assert your right on your parent's behalf to find out the reason for any decisions and to question any you don't understand. And it may be up to you alone to point out what doesn't look right.

Dr. Dychwald is right about one thing for certain and that is that more education about geriatric medicine is needed in all medical and nursing schools. In the meantime, families need to be the sentinels, watching out for medical care, asking questions and frankly, helping to avert medical mistakes with our aging loved ones. You don't have to be an expert yourself to do this. You do have to take the time, observe, be present and speak up.

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