



The Medical **Bulletin**

In Geriatrics

- Cognitive behavioral therapy for insomnia (CBT-I) is the recommended treatment for insomnia, particularly for older adults.
- Older adults are particularly susceptible to the anticholinergic effects of multiple medications, including over-the-counter antihistamines.
- Anemia is not a normal part of aging, and hemoglobin abnormalities should be investigated.
- Decisions regarding screening for malignancies in the elderly should be based not on the age alone but on the patient's life expectancy, functional status, and personal goals.
- Systolic murmurs in the elderly may be due to aortic stenosis or aortic sclerosis.
- Delirium in hospitalized patients is associated with an increased mortality risk.
- When delirium occurs, the underlying cause should be thoroughly evaluated and treated.
- Pneumonia is the most common infectious cause of death in the elderly.
- Patients with life-limiting or serious illness can be referred for palliative care at any point in their illness process, regardless of prognosis.
- A stimulant laxative should always be prescribed whenever opiates are prescribed for chronic pain management to manage opiate-induced constipation.
- Patients can discontinue hospice care if their symptoms improve or their end-of-life goals change.
- Opiates are the first line treatment for severe dyspnea at the end of life.
- Opioid analgesics are available in many forms including tablets to swallow or for buccal application, oral solutions, lozenges for transmucosal absorption, transdermal patches, rectal suppositories, and subcutaneous, intravenous, or intramuscular injection administration.

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