

CHEMICAL DEPENDENCY AND THE ELDERLY

Alcohol and other drug abuse by the elderly is a largely hidden problem. While the rate of misuse and abuse of prescription and other drugs is much higher for this age group than for younger adults, these problems are less likely to be detected or treated. Prescription medication misuse is the most common form of drug abuse among the elderly. They make up 11 percent of the U.S. population, yet they account for 25 to 33 percent of the prescription drugs used each year.

Prevalence: Estimates of chemical dependency problems among U.S. elderly range from 2 to 10 percent, or between 500,000 and 2.5 million people over the age of 55. In nursing homes, 20 to 50 percent of elderly residents have alcohol-related problems.

Risk Factors: Many life-changing events place the elderly at risk for chemical dependency problems. They retire and begin to outlive spouses, friends and family members, and lose accustomed life roles. Often they also have to cope with limited financial resources and physical ailments that limit their activities. These problems and the lower self-esteem they may cause increase the likelihood of alcohol and other drug abuse.

Alcohol and Other Drug Abuse: Alcohol problems among the elderly are typically categorized into early- and late-onset alcoholism. Early-onset alcoholism is used to describe individuals who experienced chemical dependency problems in early and middle adulthood that carried over into late adulthood. Late-onset alcoholism refers to those who develop chemical dependency problems later in life, in reaction to the stresses of aging.

There is some evidence of elderly illicit drug use involving marijuana, LSD, and some opiates. Some polydrug abuse is evident among this population and they may often use alcohol in combination with psychoactive drugs, amphetamines, or barbiturates.

Medication Misuse: Elderly people are more likely than younger people to suffer from ailments such as heart disease, hypertension, arthritis, rheumatism and mental difficulties. Cardiovascular medication, tranquilizers, diuretics and sedatives are most frequently prescribed to treat these problems. Additionally, older people often use and misuse over-the-counter (OTC) drugs to treat a variety of health problems. Since metabolism rates slow down considerably as we age, many prescription and OTC medications stay in the body longer and increase the likelihood of harmful drug interactions.

There are several underlying causes for medication misuse among the elderly. Most need two or more prescription medications to handle one or more ailments or chronic illnesses. One drug may counteract or strengthen the effects of another, thus increasing the potential for harm. Older people often get prescription medications from several different doctors who may be unaware of drugs already being used or the possibility of frequent alcohol use. The resulting drug toxicity from multiple drug use can lead to confusion, sedation, cardiac difficulties and other problems.

Many elderly people do not understand proper drug use. They often inappropriately use medications intended for therapeutic purposes or attempt to medicate themselves. Instructions for prescription drug use must be easily understood. If the patient cannot read or has trouble seeing, medications can be color-coded or categorized to help prevent harmful drug combinations.