

Question: My parents are still healthy, but are getting frailer and can't do all the things around the house that they used to do. They refuse to move and say they want to die in their own home. What do we do?

Answer: Most people want to stay in their own home. So your objective should be to make it safer for them to do so. At the same time this allows them to maintain control of their daily life's activities and their likes and dislikes. Happier people are healthier people.

Things to do:

- Establish a crisis alert system
- Safety proof the house or apartment
- Identify things they can't do and bring in help.

Alert system:

- Exchange telephone numbers with your parents' neighbors and close friends and have them call you, collect if they want, if they see something unusual. My parent's next to door used to call me every time an ambulance arrived at the house as my father periodically had strokes. Even if you live around the corner, such an alert system is helpful.
- Be sure and have the names and telephone numbers of your parent's doctors, accountant and lawyer. Establish a relationship with them before a crisis occurs.
- If there is a regular mailman, have him alert you if mail starts to pile up.
- Provide the town tax collector's office and utility companies with your name and address so they can alert you if bills are not paid on time.

Safety proof house:

- Make sure electrical wiring is not old and frayed; that plumbing is in working order.
- Rearrange lamp locations if wires trail where a parent can trip on them. Do the same thing with furniture and telephone wires. A cordless phone near a favorite chair and/or bed can be a life saver.
- Throw out scatter rugs and replace worn or buckling carpeting. These are always prime 'fall' items.
- Install grab bars in the tub and make sure there are rubber mats to prevent slipping. A chair in a tub or shower can make it easier for a frail person to bathe him/herself
- Increase the size of bulbs used because vision often deteriorates with age.

- Redecorate the house so that walls and floors are contrasting colors. This is especially important for steps or stairways. If walls and the floor are the same or similar tones, older people cannot see the difference and can easily fall or bump themselves.
- Have tablecloths or mats in contrasting colors with dishes and glasses. This avoids spillage and breakage.
- Help them rearrange kitchen and bedroom closets so they can easily reach the things they use most often. Lower clothes bars and raise where shoes are placed.

Question: My mother, 74, has been having mini-strokes, which have affected her balance and ability to walk. My father's health is ok, but he is getting frailer as he's been taking care of my mother. I work full-time, so I can't help out as much as they seem to need. What should we do to make sure my father doesn't get sick? He wants to do it all.

Answer: Your question is a double-edged sword because there are two caregivers -- your father and yourself.

Your objectives should be to:

- encourage your mother to do as much as possible for herself.
- help your father so he doesn't overburden himself and become stressed out.
- At the same time, he should be encouraged to do what he can comfortably handle.
- balance their needs with your own other responsibilities so that you don't become over stressed and tired.
- encourage your parents to continue social contact with friends and the activities they enjoy and to develop new friends and interests.
- nurture their now fragile emotions as they lose the ability to take care of themselves and need your help.

So, you need to:

- step back and evaluate both parents needs and capabilities - the ADLs and the IADLs. ADLs are activities of daily living, dressing, eating, toileting, bathing and transferring. IADLs (incidental ADLs) include driving, shopping cooking, cleaning, doing laundry, handling finances, taking medicine properly.
- identify those areas where help is really needed. Eliminate the areas you only think they can use help at this time. But periodically reevaluate.

- identify options (e.g. community or private resources) as to providing the “needs” help. Your local Area Agency on Aging, hospital discharge planners, churches and temples, volunteer organizations, senior centers and home care agencies are all good sources of information and help.
- get help for chores your father may be uncomfortable doing (such as bathing your mother) or you cannot do because of time and other factors. If he has difficulty driving, hire someone else to chauffeur them to doctors, supermarkets, the mall, if you or another family member is unavailable.
- get other family members to help with specific identified chores or to regularly visit, take them out to lunch, dinner or just for a ride.
- identify the little things they’ve always enjoyed/liked and bring more of those things/events into their life -- flowers, a new tape, family pictures, telephone calls.

All caregivers, regardless of age, need to take care of themselves and not over burden themselves with trying to do too many chores. All those ‘little’ things add up.

The philosopher Plato gives perhaps the best advice to us all when he said: “More will be accomplished, and better, and with more ease, if every man does what he is best fitted to do, and nothing else.”

Question: My aunt, 85, recently fell, broke her hip and had to have hip replacement surgery. She is now in a nursing home, and we don’t know if she’ll ever be able to come home. I’m afraid my mother, 83, will fall, and then we’ll have double trouble.

Answer: The majority of elders aren’t seriously injured when they fall. Only 5% to 15% result in fractures or broken bones that lead to loss of independence.

My mother had total hip replacement surgery at age 86, and my father had partial replacement at 93. Two months after surgery, my mother resumed driving. My father was walking up and down the hospital hall the next day.

But the seriousness of falls, especially this time of year, and their impact on lifestyle should not be overlooked. Evaluate your mother’s health and overall ability to do things for herself. Does she have difficulty walking or with her balance? Are there obstacles in the house (furniture blocking easy movement, telephone or electric wires across a floor) that are problematic? Is she on medication that can impact balance? Have her bones become less dense and fragile to the point where they can just break. This happened with my father. Bone density tests are now covered by Medicare.

During icy months, there are a number of things that you can do to help protect her and head off falls.

Have the drugstore deliver medications, rather than her picking them up. Make sure there are extra staples in the freezer -- juice, bread, pre-cooked foods. Make arrangements with a local grocery store or restaurant or a neighbor if you live far away, to deliver food in really bad weather. Get someone else to shovel snow.

Encourage regular exercise -- walking is the best. My father did 2 to 3 miles a day on a stationary bike until he was 92. Have her use a cane or walker, if she is unsteady on her feet. Good eating habits help retain bone and muscle strength.

Increase the number of night lights in the house -- bedroom bathroom, hall and kitchen. It is very common for elders to walk around at night.

And make sure medications do not interact to make her mentally fuzzy or dizzy.

In your aunt's case, make sure she gets appropriate physical therapy in the nursing home and continue it when she returns home. Medicare will pay for home visits.

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