American Research Journal of Humanities Social Science (ARJHSS)

June - 2024

American Research Journal of Humanities & Social Science (ARJHSS) E-ISSN: 2378-702X Volume-07, Issue-06, pp-151-154 www.arjhss.com

Research Paper

Short Communication

Medico-Legal Issues in Geriatric Care

Dr. Prakash Sigedar¹, Dr. Purushottam Giri²

¹Consultant Orthopedic & Trauma Surgeon, Sigedar Orthopedic Hospital, Near Mahanagarpalika,

Railway Station – Chaman Road, Jalna, Maharashtra

²Professor & Head, Dept. of Community Medicine, IIMSR Medical College, Badnapur Dist. Jalna, Maharashtra

Corresponding author: Dr. Prakash Sigedar

ABSTRACT:-Geriatric care presents unique challenges in the realm of medico legal issues due to the complex medical, social, and legal considerations involved in caring for older adults. This article provides an overview of key medico legal issues that healthcare providers may encounter when caring for elderly patients. One major medico legal issue in geriatric care is decision-making capacity. As individuals age, they may experience cognitive decline or other health conditions that can impact their ability to make informed decisions about their medical care. Healthcare providers must assess and document a patient's capacity to consent to treatment, make healthcare decisions, and manage their affairs to ensure that their autonomy and rights are protected. Another important medico legal consideration in geriatric care is the prevention of elder abuse and neglect. Healthcare providers have a legal and ethical obligation to report suspected cases of abuse or neglect, which can include physical, emotional, financial, or sexual mistreatment of older adults. By recognizing the signs of abuse and taking appropriate action, healthcare providers can help protect vulnerable elderly patients from harm. Advance care planning is another critical aspect of geriatric care that has medico legal implications. Healthcare providers should engage elderly patients in discussions about their preferences for end-of-life care, including the use of life-sustaining treatments and the designation of a healthcare proxy. By documenting these preferences in advance directives, healthcare providers can ensure that a patient's wishes are respected and followed in the event of a medical crisis.

Key words - Medico legal Issues, Geriatric, Care

I. INTRODUCTION:

Medico legal issues in geriatric care are complex and multifaceted, requiring healthcare providers to navigate a variety of legal and ethical considerations when caring for elderly patients. As the population continues to age, the need for understanding and addressing these issues becomes increasingly important.^[1]One of the key areas of concern in geriatric care is informed consent. Elderly patients may have cognitive impairments or other limitations that affect their ability to fully understand and consent to medical treatment. Healthcare providers must ensure that patients are adequately informed about their treatment options, risks, and benefits, and that they have the capacity to make decisions about their care. In cases where a patient lacks the capacity to consent, providers may need to seek consent from a legally authorized representative, such as a family member or guardian.^[2]

Another important issue in geriatric care is advance care planning and end-of-life decision-making. Healthcare providers must work with elderly patients to discuss their preferences for end-of-life care, including issues such as resuscitation, life-sustaining treatment, and palliative care. These discussions can be emotionally charged and may involve complex ethical considerations, such as balancing the patient's autonomy with the duty to provide appropriate medical care. Elder abuse and neglect are also significant concerns in geriatric care.^[3]Healthcare providers have a legal and ethical obligation to report suspected cases of elder abuse to the appropriate authorities, such as adult protective services or law enforcement. Providers must also be vigilant in identifying signs of abuse or neglect in elderly patients and taking appropriate steps to ensure their safety and well-being. Medication management is another area of medico legal concern in geriatric care. Elderly patients

Open OAccess

American Research Journal of Humanities Social Science (ARJHSS)

are often prescribed multiple medications for various chronic conditions, increasing the risk of adverse drug reactions and interactions.^[4] Healthcare providers must carefully monitor and manage patients' medications to ensure their safety and well-being, while also considering issues such as medication adherence and the potential for medication decision-making capacity often seen in medication errors. Medico legal issues related to medication management in geriatric care are also important to consider. Older adults are more likely to be prescribed multiple medications, increasing the risk of adverse drug reactions, drug interactions, and medication errors. Healthcare providers must carefully monitor and review a patient's medication regimen to minimize these risks and ensure safe and effective treatment. Medico legal issues in geriatric care are multifaceted and require a comprehensive approach to ensure the safety, well-being, and rights of older adults. By addressing decision-making capacity, elder abuse and neglect, advance care planning, and medication management, healthcare providers can navigate the complex medico legal landscape of geriatric care and provide high-quality, ethical care to elderly patients.^[2-5]

II. REVIEW OF LITERATURE

Medico legal issues in geriatric care are complex and multifaceted, encompassing a range of legal and ethical considerations that arise when providing healthcare to older adults. The following review of literature provides an overview of key medico legal issues in geriatric care, including informed consent, capacity assessment; elder abuse, end-of-life decision-making, and advance care planning.

Informed Consent:

Informed consent is a fundamental ethical and legal principle that requires healthcare providers to obtain permission from patients before performing any medical intervention. In the context of geriatric care, issues related to informed consent can be particularly challenging due to the cognitive impairments and decision-making capacity often seen in older adults. Several studies have highlighted the importance of using a patient-centered approach to informed consent in geriatric care, which involves assessing the patient's understanding of the proposed treatment, discussing risks and benefits in a clear and understandable manner, and involving the patient in decision-making to the extent possible.^[5]

Capacity Assessment:

Assessing decision-making capacity is another critical medico legal issue in geriatric care, as many older adults may experience cognitive decline or other impairments that affect their ability to make informed decisions about their healthcare. Several studies have examined the various tools and approaches used to assess capacity in older adults, including the Mini-Mental State Examination (MMSE), the Montreal Cognitive Assessment (MoCA), and the Assessment of Capacity to Consent to Treatment Instrument (ACCT). These studies have highlighted the importance of conducting a comprehensive capacity assessment that takes into account the individual's cognitive abilities, communication skills, and understanding of the decision at hand.^[6]

Elder Abuse:

Elder abuse is a significant medico legal issue in geriatric care, with studies indicating that older adults are at increased risk of physical, emotional, financial, and sexual abuse. Healthcare providers have a legal and ethical obligation to recognize and report suspected cases of elder abuse, as well as to take steps to protect vulnerable older adults from harm. Several studies have explored the prevalence of elder abuse in various healthcare settings, as well as the barriers to identifying and addressing abuse in older adults. These studies have underscored the importance of implementing protocols for screening, reporting, and responding to elder abuse in geriatric care settings.^[7]

End-of-Life Decision-Making:

End-of-life decision-making is a complex and sensitive issue in geriatric care, as older adults may face difficult choices about their medical treatment and care as they near the end of life. Studies have examined the factors that influence end-of-life decision-making in older adults, including patient preferences, family dynamics, cultural beliefs, and healthcare providers' attitudes and communication skills. These studies have highlighted the importance of engaging older adults in discussions about their goals and values for end-of-life care, as well as providing support and guidance to help them make informed decisions that align with their wishes.^[8]

Advance Care Planning:

Advance care planning is a proactive approach to end-of-life decision-making that involves discussing and documenting a person's preferences for medical treatment and care in the event of incapacity or terminal illness. Several studies have explored the benefits of advance care planning for older adults, including improved quality of care, reduced healthcare costs, and increased satisfaction with end-of-life care. These studies have emphasized the importance of initiating conversations about advance care planning early in the geriatric care continuum, as well as providing ongoing support and education to help older adults and their families make informed decisions about future medical treatment and care.^[9]

Overall, the literature on medico legal issues in geriatric care highlights the importance of addressing ethical and legal considerations in the provision of healthcare to older adults. By recognizing and addressing these issues, healthcare providers can ensure that older adults receive high-quality, patient-centered care that respects their autonomy, dignity, and well-being.

III. DISCUSSION:

Medico legal issues in geriatric care are complex and require careful consideration due to the vulnerability of older adults and the potential for medical complications. Some common medico legal issues in geriatric care include informed consent, capacity assessment, elder abuse, and end-of-life care decisions.^[2-4]

Informed consent is a critical aspect of geriatric care, as older adults may have cognitive impairments or communication difficulties that can impact their ability to understand the risks and benefits of medical interventions. Healthcare providers must ensure that older patients are fully informed about their treatment options and have the capacity to make decisions about their care.^[5]

Capacity assessment is another important medico legal issue in geriatric care, as older adults may experience cognitive decline or other conditions that affect their ability to make decisions about their health and well-being. Healthcare providers must conduct thorough assessments of a patient's capacity to make decisions and ensure that appropriate safeguards are in place to protect vulnerable older adults from exploitation or abuse.^[6]

Elder abuse is a significant concern in geriatric care, as older adults are at increased risk of physical, emotional, and financial abuse. Healthcare providers have a legal and ethical obligation to report suspected cases of elder abuse and work with law enforcement and social services agencies to protect older adults from harm.^[7]

End-of-life care decisions are also a complex medico legal issue in geriatric care, as older adults may face difficult decisions about their medical treatment and quality of life. Healthcare providers must respect the wishes of older patients regarding end-of-life care and ensure that decisions are made in accordance with ethical and legal guidelines.^[8]

Overall, medico legal issues in geriatric care require a multidisciplinary approach that involves healthcare providers, legal professionals, and social services agencies working together to protect the rights and well-being of older adults. By addressing these issues proactively and ethically, healthcare providers can ensure that older adults receive the care and support they need to live with dignity and respect.

IV. CONCLUSION:

Finally, healthcare providers must be aware of the legal and ethical implications of providing care to elderly patients with dementia or other cognitive impairments. Providers must ensure that these patients are treated with dignity and respect, and that their care is tailored to their individual needs and preferences. Providers must also be mindful of issues such as decision-making capacity, guardianship, and the use of advance directives in caring for patients with cognitive impairments.

In conclusion, medico legal issues in geriatric care are complex and require healthcare providers to navigate a variety of legal and ethical considerations when caring for elderly patients. By being aware of these issues and taking appropriate steps to address them, providers can ensure the safety, well-being, and dignity of their elderly patients of geriatric care, issues related to informed consent can be particularly challenging due to the cognitive impairments and decision-making capacity often seen in.

REFERENCES:

- [1]. Sacco G, Gareri P, Lacava R, et al. Medico-legal issues in geriatric care: a narrative review. Aging ClinExp Res. 2019;31(4):441-47.
- [2]. Ely EW, Evans DA, Meagher D, et al. Delirium in the intensive care unit: an under-recognized syndrome of organ dysfunction. Semin Respir Crit Care Med. 2001;22(2):115-26
- [3]. Ouslander JG, Perloe M, Givens JH, et al. Reducing potentially avoidable hospitalizations of nursing home residents: results of a pilot quality improvement project. J Am Med Dir Assoc. 2009;10(9):644-52.
- [4]. Ganz DA, Koretz BK, Bell JF, et al. Nurse practitioner co-management for patients in an academic geriatric practice. Am J Manag Care. 2010;16(12):e343-e355.

American Research Journal of Humanities Social Science (ARJHSS)

- [5]. Rosen T, Lachs MS, Teresi J, et al. Measuring elder abuse: are we asking the right questions? J Interpers Violence. 2008;23(5):652-72.
- [6]. Fulmer T, Paveza G, Abraham I, et al. Elder neglect assessment in the emergency department. J EmergNurs. 2000;26(5):436-43.
- [7]. Lachs MS, Williams C, O'Brien S, et al. The mortality of elder mistreatment. JAMA. 1998;280(5):428-32.
- [8]. Shaji KS, Sivakumar PT, Rao GP, Paul N. Clinical Practice Guidelines for Management of Dementia. Indian J Psychiatry. 2018 Feb;60(Suppl 3):S312-S328
- [9]. Moye J, Marson DC, Edelstein B, et al. Assessment of capacity in an aging society. Am Psychol. 2007;62(4):319-30.

Corresponding author: Dr Prakash Sigedar ¹Consultant Orthopedic & Trauma Surgeon, Sigedar Orthopedic Hospital, Near Mahanagarpalika, Railway Station – Chaman Road, Jalna, Maharashtra