

## **Diabetes and the Elderly**

Both average life expectancy and the **prevalence of diabetes** are continuing to rise.

Amongst the elderly population, type 2 diabetes is a growing problem, and a larger proportion of newly diagnosed diabetics are older.

Treating and diagnosing diabetes amongst the elderly requires a flexible and unique approach.

### **What are the differences in diagnosing diabetes amongst the elderly when compared to diabetes amongst the young?**

There are numerous physiological changes underway as our bodies grow and adapt to their age.

Elderly people who are at risk of developing diabetes, or who have already developed the disease, may not exhibit the **classic symptoms** expected.

Age-related changes can mean that some symptoms will be masked, or harder to spot.

### **What are the differences in treatment of diabetes amongst the elderly when compared to diabetes amongst the young?**

Treating diabetes amongst the elderly can present unique challenges. Other disabilities associated with aging can contribute to the complexity of strictly self-managing diabetes.

Impaired physical functioning amongst some elderly patients can mean that adjusting to a diabetes care routine is more difficult.

Cognitive impairment can also provide an obstacle.

### **Are there increased risks when an elderly person develops diabetes?**

Elderly people are often more frail and susceptible to illness.

This can mean diabetes-related complications are more common and harder to manage.

Furthermore, exercise and adapting a diet can be more difficult for elderly people, and problems can arise in these areas.

All **diabetes complications** can occur amongst older patients. Cognitive complications are more common amongst the elderly.

Further problems may include undiagnosed depression, social issues, limited daily means and coexisting health problems.

Many elderly diabetic patients are pre-disposed to **hypoglycemia**.

Source: <http://www.diabetes.co.uk/diabetes-and-the-elderly.html>