A Study on Elduly Patients Showing Symptoms of Maladjustment on Admission: Background of Maladjustment and Suitable Care

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Objective and Methods

In line with the general trend in Japanese hospitals, the number of elderly patients has increased in our hospital during the past several years, and their current mean age is 69 years. Our experience with elderly patients is that they tend to develop symptoms and behavior reflecting a maladjustment to the new environment on admission to the hospital, that is, they assume an attitude of rejection toward clinicians and become incompetent in performing daily activities. Consequently, we carried out a study to clarify exactly how elderly patients behave in terms of a maladjustment to a new environment and what symptoms are associated with this condition, and what can be done to minimize such maladjustment in the care of these patients.

The elderly patients admitted to our ward (Department of Internal Medicine) during the past six months showing behavior and symptoms of maladjustment were included in the present study, and their condition before admission, their psychological aspects and behavior after admission and the subsequent measures taken by nurses to cope with the situation were studied.

Results

1. Characteristics of Elderly

Because of the physical and psychological factors involved elderly patients generally require more time to accept or familiarize themselves with new surroundings.

2. Behavior and symptoms of maladjustment and background factors.

Behavior and symptoms of maladjustment are diverse, including insomnia, refusal to eat, struggling, pouting, loquacity, wandering and poor spatial and character perception. These seem to stem from a state of mind associated with anxiety and tension about not being able to accept the circumstances under which the patient had to be hospitalized. The factors that aggravate the anxiety and tension include the process of admission, relations with family members living with the patient and inadequate way of handling by nurses.
3. Points to be considered in minimizing maladjustment.
   ① Nurses must recognize maladjustment in a patient at the earliest possible moment.
   ② Orientation on the day of admission should be kept to a minimum.
   ③ Attempts should be made to prepare the ward to look as close to the pre-admission environment as possible.
   ④ Nurse(s) should be assigned to specific patients.
   ⑤ Nurses should consider following points to help elderly patients; not lose their self-confidence, that nurses should not make judgements about the behavior of patients, and that they should not use technical jargon but simple, plain words in explaining matters to the patients.
   ⑥ Family members should be encouraged to visit the patient as frequently as possible.

4. Effectiveness of home care in preventing maladjustment.

   Elderly patients received home care provided from the hospital never showed symptoms of maladjustment.

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