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The mental health scene in India has changed following independence and changes in last few decades are remarkable.

Due to advancement of treatment facilities and prevention of common infectious diseases, life expectancy has been increased in our country.. The existing care of geriatric patients can be projected as CARE.

Community based long term care, consumer directed care, counselling service.

Advanced geriatric management of physical and mental disorders.

Rehabilitation – Psychosocial – Industrial based, Family based and Community based.

Educating family members and care givers.

The common psychiatric disorders which are seen during old age are –

- Obsessive Compulsive Disorder
- Loss of memory ( Dementia )
- Delusional Disorder
- Affective Disorder
- Generalized Anxiety Disorder
- Effects of Drugs and Alcoholism ( Substance Abuse Disorder)

Common Psycho – Social problems which are seen in old age are –

- Obsession
- Loneliness
- Dementia ( Difficulty in remembering )
- Aloofness
- Grandiosity
- Emotional Problem, 'Empty nest' syndrome, Economic insecurity.

Some other problems also create adverse effect during old age like –

Adversity – Functional limitation. Life getting worse in the domains of health, stress and general living circumstances and experiencing a negative life event.

Reluctant family member

Prejudice and taboos

Unfriendly neighbour

Absence of Resilience

Unhealthy community spirit

Limitation and scarcity of resource and standard guideline

Lack of trained caregiver, multidisciplinary approach

In India, some socio cultural advantages are there for caring aged persons. These are –

Positive family structure

Love, Care and interaction with distant relatives

The grandmother effect on ageing and cognition

Family history and adaption by 90+

Social resource