

노화의 임상적 의의 및 노인 질환의 특징

Clinical Implications of Aging and Characteristics of Illnesses of the Aged

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Abstract

Aging is a universal biologic process characterized by a progressive, predictable, inevitable evolution and maturation of an organism until death. The increasing biomedical and psychosocial uniqueness of the elderly requires an individualized approach to their care. The conventional disease - specific approach is not optimal for elderly patients for several reasons. First, people aged 75 years suffer from 3~4 chronic diseases on average. Second, many distressing symptoms or impairments among elderly patients, such as pain, dizziness, fatigue, sleep problems, sensory impairments, and gait disorders cannot be ascribed to a single disease: instead, they result from the accumulated effects of physical, psychological, social, environmental, and other factors. Third, elderly patients vary in the importance they place on potential health outcomes. Three factors at least affect the clinical presentation in elderly patients: underreporting symptoms and impairments, changes in the patterns of presentation of individual illnesses, and an altered spectrum of health conditions. Clinical decision - making is further complicated in these patients because other persons, including the spouse, grown - up children, other relatives, and significant others, are often actively involved, particularly when the patient has cognitive impairment. The physician should understand clinical perspectives of aging and clinically relevant differences between young and old patients, including how elderly individuals behave when they are ill and how to interpret a changing constellation of multiple disease possibilities and interrelationships.

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Keywords : Aging; Presentation of illness; Function; Comprehensive geriatric assessment

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가 (aging) (progressive), (predictable), (inevitable) 가 , 가 . , , (ubiquitous or universal) 가 가 . , , , (individual variability) 가 . 45 가 가 (2, 3). , 3 가 가 가 80 (4, 5). 가 가 , 가 . 25 75 가 14% 30% 가 () (presentation of illness) (diazepam)

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(underreporting of illness),
(changes in the pattern of illness),
(altered response to illness)

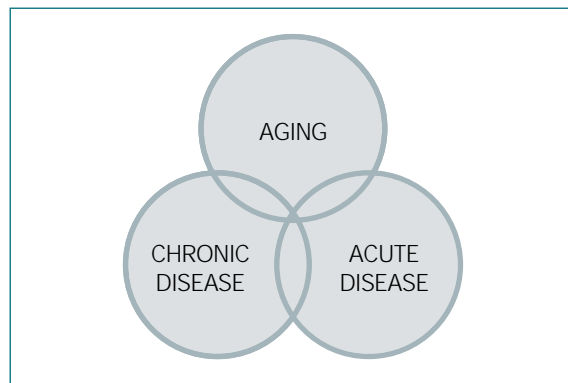
(6). 가

(ageism),

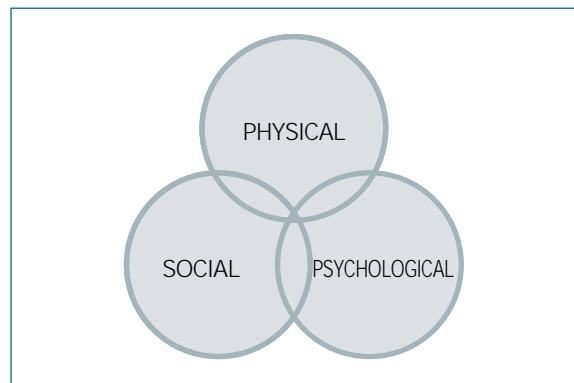
(multiple pa-
thology) 가 . 65 85%
“ ? ” 가 , 30% 3
가
(unresponsive system
of care)

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Relationship	Example
Masks expression	Disease X prevents expression of disease Y
Altered presentation	Disease X presents usually secondary to disease Y
Alters therapy	Treatment of disease X is modified by disease Y
Enhances pathologic condition	Disease X identifies disease Y
Stimulates disease	Disease X appears identical to disease Y
Cascades of disease	Disease X leads to disease Y, which leads to disease Z, and so on
Cycles of disease	Disease X contributes to disease Y, which contributes to disease X, and so on



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(1, 2).

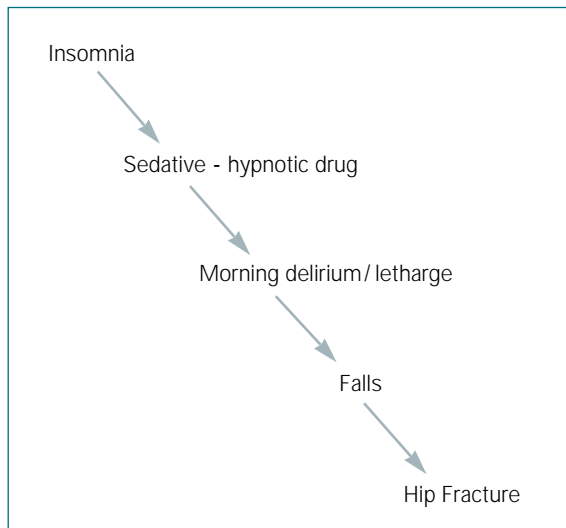
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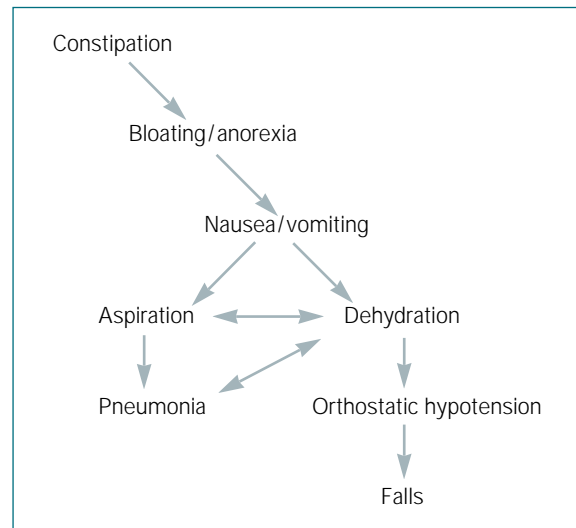
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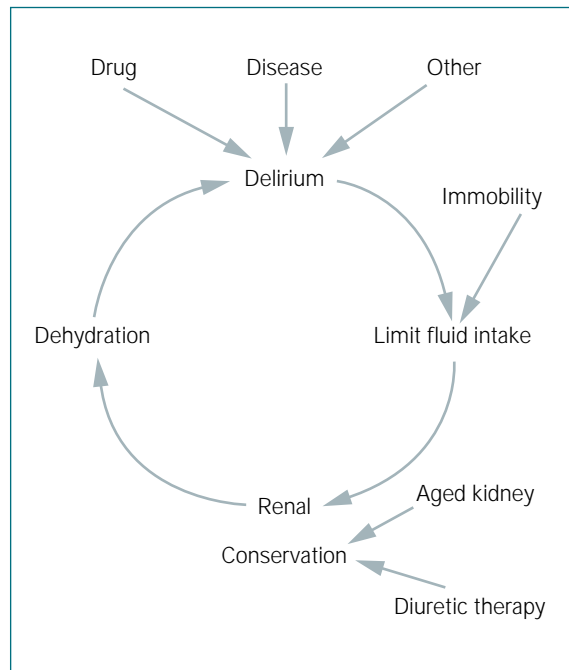
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2. (I)

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|---------------------------|------------------------------------|
| • Immobility | • Instability |
| • Incontinence | • Intellectual Impairment |
| • Infection | • Impairment of vision and hearing |
| • Irritable colon | • Isolation(depression) |
| • Inanition(malnutrition) | • Impecunity(poverty) |
| • Iatrogenesis | • Insomnia |
| • Immune deficiency | • Impotence |

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(etiology),
(anatomy),
(patho-physiology),
(functioning)

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가(comprehensive geriatric assess-ment)

(multidimensional),

(interdisciplinary) (9~ 11).

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