

MULTIDISCIPLINARY CARE FOR ELDERLY PATIENTS WITH FRACTURES

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Abstract: The present work sought to evaluate the benefits of implementing multidisciplinary treatment in elderly people with a previous diagnosis of osteoporosis and fractures, mainly of the femur. In this context, certain aspects were analyzed, such as length of stay, prognosis, number of deaths and recovery time. In the end, it becomes possible to observe that the implementation of interdisciplinary measures is beneficial to all involved, be they patients, professionals or health units.

INTRODUCTION

Osteoporosis is a disease classified as musculoskeletal, orthopedically, as a chronic degenerative disease. Commonly, it is seen affecting the elderly, due to its high incidence, it represents a serious public health problem, both in Brazil and worldwide. The high severity of the condition is due to the increased risk of fractures, especially of the femur. In the case of a femur fracture, when it is affected, it is necessary to carry out an immediate intervention due to its urgent nature, requiring early hospitalization in case of aggravation, representing a high social cost.

The oldest aged is configured as a risk factor, mainly due to the prevalence of comorbidities. Surgical treatment, associated with postoperative rehabilitation and hospital discharge must be postponed if pre-existing health conditions linked to the patient and his condition are not properly resolved or, at least, controlled. Therefore, there may be a functional weakness, causing long-term care, and it may even be fatal.

The conditionsPre-existing health conditions that hinder the treatment process can (and must) be identified and treated by a multidisciplinary team, not overloading the medical professional. Likewise, fractures stimulated by osteoporosis must follow the same pattern. Furthermore, the promotion of adequate treatment associated with broad

care by different professionals must be linked to the lowest cost, since the system must be centered on the patient, structured around their needs. Thus, health providers have the role of organizing interdisciplinary teams suited to the specific conditions of each patient, thus adding value to care.

The ideal units for this interdisciplinary care must approach the patient as a whole, working the diseasedisease and conditions linked to the patient's reality. This multidisciplinary care must encompass and implement measures such as rehabilitation care, hospital and outpatient care and support services. The implementation of these units generates faster treatment, better results and lower costs

Hip fracture, especially when favored by a condition of osteoporosis, is the stimulus to research in this area can promote a better prognosis of the disease. Therefore, specific research in this area reduces the level of complications and increases the quality of life of patients.

GOAL

To explain about the importance of multidisciplinary care in the treatment of fractures in the elderly, explaining its prognosis and other benefits.

METHODOLOGY

The present work consists of a reviewQualitative review of the literature that sought to address results found in research on the orthopedic and geriatric theme, whether in a comprehensive, orderly or systematic manner. To carry out the work, the following steps were followed:

1. Selection of the corresponding themes;
2. Selection of samples found and used;
3. Analysis of the characteristics of the original research;
4. Analysis of the obtained results;
5. To carry out the review.

The scientific literature databases and the techniques used in carrying out the review were Google Scholar, Scientific Electronic Library Online (SciELO), Virtual Health Library, Latin American and Caribbean Literature in Health Sciences (LILACS), using the search engines: “osteoporosis and fracture”; “treatment of fractures in the elderly” and “risk factor for fractures in the elderly”.

Thus, the present work seeks to not only analyze the orthopedic interface within the different thematic points correlated to the geriatric front, aiming to shed light on an educational path, clarifying and raising awareness about the importance of multidisciplinary work

DISCUSSION

Do you know that the fracture in geriatric patients occurs with greater prevalence in women compared to men, as well as the incidence in the diagnosis of osteoporosis. This fact is due to the decrease in bone mineral density, which begins earlier in women shortly after menopause, associated with the fact that women reach the peak of muscle power before men and, consequently, suffer its decline first.

The prevalence of fractures is found more predominantly in the elderly because, in addition to a greater predisposition to the development of osteoporosis, there are also musculoskeletal alterations that predispose to falls due to impairment in the performance of motor skills.

The implementation of a multidisciplinary treatment is fundamental in terms of time to perform the surgical procedure, as well as for the recovery of affected patients. According to Farias (2017), when treatment is carried out in a uni-professional way, the time for the surgical process lasts approximately 4.21 days. When implementing multidisciplinary measures, in approximately 2.47 days. Consequently, the decrease in the period for carrying out the

operative process, there is also a decrease in the rates of early deaths in surgery.

It is known that the Hospital care is the main operating factor in relation to the necessary care for the fracture, even more its prolonged stay in cases of advanced age and previous diagnosis of osteoporosis, as mentioned above. These factors corroborate the increase in lethality rates. That said, patient management through co-care models and, in addition, care prior to the occurrence of the fracture can generate a significantly relevant saving of hospital resources and, logically, adding value to patients.

Also according to Farias, when adhering to multidisciplinary care within health units, mortality rates reduced from 22.6% to 8.2% in the general population. In elderly patients with osteoporosis, the rates that were previously found at 23% reduced to 12.7%. That said, the importance of the multidisciplinary team is emphasized, including for a decrease in the mortality rate as a result of the above-mentioned condition.

CONCLUSION

In view of the above, it is clear that the application of a multidisciplinary treatment for fractures in elderly people with osteoporosis is of fundamental importance for a better prognosis, accelerating surgical time and recovery time, in addition to reducing the number of deaths due to the referred condition.

Thus, health unit administrators and health professionals must organize measures and proposals for the implementation of multidisciplinary treatment for the treatment of fractures in elderly patients with osteoporosis in order to improve the prognosis of those affected, whether in the short or long term.

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