

The final decision to select a nursing institute for terminal care depends upon the type of care and support offered by her or his own family and also by the workers of the institute.

Less care and support from her family and the help-workers of the home-institute are expected to be given to a very old female and her wish would be often neglected by her family, because of her mental and physical disturbances, such as aphasia, complete loss of expression of herself, dementia, or complete palsy.

We, as family members or as nursing participants, have to try to find out and accept the true desire of an old disabled client, and offer our heartfelt care and support.

The Factor to Make the Palliative Care at Home for Elderly People Possible in Countryside

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The factors which enable elderly people in countryside to die in their own homes were examined to determine what kinds of social services should be available to them. Two kinds of questionnaires were sent to two rural areas selected at random from each prefecture in Japan.

The one was about: 1) the number of elderly people in the area, 2) the total number of death of elderly people and the number who died at home during the past three years, and 3) the type of social services available. The other was to get more detailed information about those who died at home: 1) the cause of death, 2) age at death, 3) condition of the patient at the time of death, 4) the type of social services being used for the patient, and 5) whether the patient or family members had requested that the patient would be allowed to die at home or not.

Thirty-eight replies were received. Twenty-nine percent of elderly patients died at their homes. This is slightly higher than the national average 25.0% in Japan. Those over 65 years old comprised 25.1% of the total number of people.

Only 20 of the 38 who returned the questionnaires supplied the more detailed information about those who died at home. The total number of those who died at home was 767, of which 371 were males and 396 were females. The average age at death 81.7 ± 11.6 . The most common causes of death were heart diseases and stroke. Those who died suddenly of heart attacks, pneumonia, etc. were relatively younger while the more elderly died of chronic illnesses.

Home care services being provided included: visiting by public health nurse (21.2%), nurse care (34.9%), physicians house call (50.4%), home helper service (12.0%), help for bathing (10.8%), and delivering meals (0.03%).

Of those patients and their families who wish to die at home, 90% were able to do so. It is necessary to determine the medical and social support services that are available as soon as possible. Those who provide services should endeavor to understand the needs of the patients.

Finally, it was found that patients suffering from dementia did not use social services. Such services should be made available at an early stage of illness.

Changes in Femoral Artery Circulation after Exercise and its Relationship to Life Style in Healthy Females

— By the Ultrasonic Doppler Method —

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Activities of daily life in elderly people are intimately related to walking ability which depends on the