

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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Chiemi TOKUYAMA and Takanori OGAWA

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 —

Kinuko OKAMOTO, Mieko YAMAGUCHI and Taiichi SAITO

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

circulation in the lower extremities. Blood velocity in the femoral artery was examined by the ultrasonic Doppler method in 145 healthy females between the ages of 15 and 96. The subjects were divided into four groups: ten ~ twenties, thirty ~ forties, fifty ~ sixties and over seventy.

In the supine position they were asked to exercise on an ergometer for five minutes at a load of 20 watts. Before and after the exercise, the ankle pressure index API [Systolic pressure of brachial artery (APS) / Systolic pressure of dorsalis pedis artery (BPS)] and the area under the Doppler curve (AUDC), using an image analyzer (IBAS 2000), were measured.

With increasing age the number of people who walked regularly and had hobbies increased. In the resting state BSP and ASP increased with age, but there was no significant difference in API among the four groups. After exercise BSP and AUDC increase significantly in all groups. AUDC increased most in the thirty ~ forties group regardless of their life style. This is partly due to the relatively light exercise load for this age group which had good circulation in the legs.

For elderly people proper exercise may contribute to good circulation in the legs and improvement of QOL.

Quality of Life Assessments of Cancer Patients with Palliative Care — Total Sufferings of the patients who are unresponsive to curative treatments — Harumi KATAYAMA

This is a preliminary study to develop a new questionnaire for QOL assessments of cancer patients who are unresponsive to curative treatments and their families. To select the QOL domains suitable for assessment of the patients, the author investigated 19 cases at a palliative care unit of a general hospital founded by a Christian organization. In this paper, three cases are described.

Among total sufferings, it was revealed that the physical suffering needed to be palliative first, because physical suffering interfaces with the recognition of other types of suffering. And easing of physical suffering discloses of other types of suffering. Palliation of psychological suffering which modifies physical suffering is necessary for patients to accept their situations and maintain as normal life-style as possible.

In conclusion the questionnaires to assess the QOL of patients with advanced cancer should take into consideration for the stage of the disease and the acceptance of the disease by patients and their families.

Pattern Generator for Rhythmical Movements during Oviposition Behavior in the Cricket

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A quantitative analysis of electromyograms recorded from the cricket ovipositor valve muscles was done in terms of the cycle period, burst duration, and relative burst onset times of rhythmic bursts associated with oviposition behavior. In a freely moving animal, the temporal pattern of rhythmic bursts changed in the following sequential order during oviposition behavior: searching, positioning, penetration of ovipositor, short lift of ovipositor, rest phase, egg deposition and withdrawal of ovipositor. Two types of rhythmic bursts, one occurring during short lift of the ovipositor-step and the other during the egg deposition-step, were produced by transection of the ventral nerve cord between the fourth and terminal abdominal ganglia in an intact animal or by pinching the ovipositor in a transected animal. In a transected animal, 2×10^{-3} M pilocarpine (muscarinic cholinergic agonist) applied to the ganglia evoked repeatedly in turn the two types of rhythmic bursts. These facts showed the presence of a pattern generator for the egg-laying portion of the oviposition motor program in the terminal abdominal ganglion.