Geriatric consultation: A specialty to care for the elderly

Since coming in to the community, I have been asked by both lay people and those working in the medical field about what I do and what I have to offer. Saying simply that I specialize in medical care for the elderly does not tell the whole story. Geriatrics is a relatively new specialty. It was only in the 1980s that the first formal fellowship in Geriatrics began. The American Board of Internal Medicine recognized Geriatrics as a subspecialty in 2006.

Unique Population

It is difficult to identify a specific age that defines the Geriatric population. I am sure we have all met 90-year-olds who seem much “younger” than some 50-year-olds. So although many use the age of 65 for this definition, it may be younger depending upon the issues being addressed.

There are many changes that occur as part of the normal aging process and it is my specialty to distinguish normal process of aging from disease.

There are many changes that occur as part of the normal aging process and it is my specialty to distinguish normal process of aging from disease. As an example, it may be expected that some impairment occurs in the kidneys with aging, but it is certainly not automatic that all of the elderly have kidney failure.

Complexivists

Geriatricians have frequently been called “Complexivists” because we care for patients who are frail, high risk, and have multiple and complex diseases. What makes our decision-making process more challenging is that most guidelines used by physicians are based on research studies or trials that specifically exclude the elderly, so those guidelines usually do not apply. Geriatrics is a specialty which is not organ-specific such as those that focus only on the brain, the heart or the lungs might be. Rather Geriatrics crosses all organ systems.

Some of the syndromes that are more commonly encountered in the elderly include dementia, delirium, falls, incontinence, use of many medications at the same time and adverse drug events. A comprehensive geriatric assessment pays special attention to those issues, as well as functional status, goals of care, and quality of life.

The Geriatric Consultation Model

I work in partnership with each patient’s primary care physicians, hospitalists, surgeons, and oncologists to provide care for the elderly patient that is individualized and goal-directed. My focus is on maintaining functional status, independence, and quality of life. As a geriatrician, I practice in many settings including my office practice, the hospital, skilled nursing facilities, assisted living facilities, and patients’ homes for those who are home bound.

Margarita Reyes, M.D., is a member of the medical staff of the Bristol Hospital Multi-Specialty Group, Inc, and its new Geriatric Medicine Program. Dr Reyes’ office will be located at 85 Beleden Gardens Drive in Bristol and she specializes in geriatric medicine. Dr. Reyes is accepting new patients for consultation and can be reached at 860.845.5901. Please ask your primary care physician if consultation with a geriatrician would be right for you.