The silent epidemic

Substance abuse is not the domain of youngsters only, says Adèl Grobbelaar of Lyndhurst-based Wedge Gardens Treatment Centre.

"Addiction difficulties among seniors is a silent epidemic, especially with regard to alcohol and medication," says Grobbelaar.

"It often goes undiagnosed and untreated. While health problems caused by alcohol and medication abuse or misuse are treated, the addiction is ignored – which ultimately can lead to a premature death."

Grobbelaar, a former social worker who has a BA (Psyc) Honours Degree, has been with the Rand Aid Association-run treatment centre for over 12 years. With patients coming mainly from Johannesburg and Ekurhuleni, Wedge is one of the largest all-male in-patient rehabilitation centres in Southern Africa.

While Grobbelaar admits that South Africa does not have in-depth statistics on older adults, she says what has been established is that addiction difficulties amongst older adults has become a costly problem in our country.

America has more information readily available, says Grobbelaar, saying that 60 billion dollars are spent annually in the USA on alcohol-related hospital care.

Other USA statistics:

- Older adults abusing substances lose an average of 10 years off their lifespan
- Only 1% of general practitioners correctly diagnose alcoholism; in 80% of cases it is misdiagnosed as depression
- The highest growing number of alcoholics is amongst 75-year-old widowers
- 60% of all prescription and over-the-counter medication is consumed by older women
- 10% of people older than 60 diagnosed with Alzheimer's actually suffer brain damage caused by alcoholism (Korsakoff's syndrome)
- Substance abuse and addiction is the leading health problem in the USA.

Grobbelaar says that older adults are often able to hide their addiction because they drink alone at home, there are often no work-related problems because they are retired and there is less opportunity to get arrested for drinking and driving as they do not have to be on the road on a daily basis.

"It is so well hidden that it is often mistaken for depression, Alzheimer's or Parkinson's Disease," she says.
Characteristics of addiction to medication:

- Loss of control over the use of the drug
- Continues use despite associated problems
- Denial of the problem
- Attempts to control use of the drug ultimately fail.

"When medicine is abused, the true intent is to alter the mood, not treat a diagnosed illness. The drug makes life worse, not better, and increased dishonesty and defensiveness develop," says Grobbelaar.

She adds that sobriety requires specific chemical dependency treatment but says that families sometimes ignore addiction due to a misguided sense of protecting the older adult’s privacy.

Other signs to look for:

- Bruises, abrasions and scars. This could suggest frequent bumps or falls
- Flushed or florid faces
- Hypertension
- Sleep complaints or observable changes in sleep patterns; unusual fatigue
- Weight gain or loss
- Change in eating habits
- Unexplained complaints of chronic pain
- Urinary retention
- Poor hygiene or self neglect
- Unusual restlessness or agitation
- Complaints of blurred vision or dry mouth
- Slurred speech
- Cigarette burns on the fingers or carpets
- Jerky eye movements or loss of central vision
- Damage to nerves causing numbness or tingling
- Gastrointestinal or other bleeding
- Signs of immunodeficient disorders
- Malnutrition and muscle wasting
• Tremors and more serious seizures
• Depression and anxiety
• Cirrhosis or other evidence of liver impairment.

Instead of seeking professional help, loved ones often try and ration the substance, do all the shopping to limit the opportunity to obtain stock, scan the house for full or empty bottles of alcohol or addictive medication and may even go as far as confiscating the car or hiding the car keys.

"These solutions take up a lot of time and effort but unfortunately do not solve the problem," says Grobbelaar, adding that in order to sensibly deal with addiction, you need to separate fact from fiction.

"Educate yourself and make well informed family decisions."

**Intervention by family members:**

• It should not be confrontational, an ambush or trickery
• It should not involve deception or develop into a free-for-all or a brawl
• It should be a finely choreographed combination of love and honesty that cracks through an older adult’s denial while preserving their dignity
• Intervention should not be done without proper education, planning and preparation.

**How to properly intervene:**

• Gather information about the older adult’s alcohol or other substance use
• Select your intervention members
• Complete the planning and training for intervention
• Determine resources before the intervention date regarding treatments available
• Evaluate different treatments available
• Set a date and time for the intervention
• Discuss and choose a treatment programme that best suit the older adult's needs
• Prepare for the possibility that the older adult may refuse treatment.

"At Wedge Gardens and other treatment centres, professional guidance can be given on where to start. With the right information, you are likely to be effective in helping your addicted older adult get well."

**For further information, contact Grobbelaar at 011 430 0320.**
Rand Aid Association DNA

Rand Aid Association, a registered non-profit organisation, provides a variety of luxury retirement accommodation for the well-established retiree, which in turn generates a portion of the valuable income required and used to assist the aged in need and people suffering from substance abuse.

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