

Effective impact of canine psychotherapy on inpatients in geriatric illness.

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Introduction

Geriatrics, also known as geriatric medicine, is a medical specialty that focuses on the health of the elderly. Its goal is to promote health in older adults by preventing and treating diseases and disabilities. There is no set age at which patients may be under the care of a geriatrician, also known as a geriatric physician, who is a doctor who specialises in the care of the elderly. Rather, this decision is influenced by the needs of the individual patient and the availability of a specialist. It is important to distinguish between geriatrics, which is the care of the elderly, and gerontology, which is the study of the ageing process itself. Geriatrics is derived from the Greek words for "old man" and "healer." However, geriatrics is also known as medical gerontology.

History

Jara or rasayana, which is similar to geriatrics, is one of the eight branches of the traditional Indian system of medicine, Ayurveda. Charaka described the fatigue and physical exhaustion brought on by premature ageing caused by a poor diet. According to the Charaka Samhita, elderly patients should avoid excessive physical or mental strain and eat a light but nutritious diet. A number of Byzantine Empire physicians studied geriatrics, with doctors like Aetius of Amida clearly specialising in the field. Alexander of Tralles saw ageing as a natural and unavoidable form of marasmus caused by moisture loss in body tissue. Aetius' works describe the mental and physical symptoms of ageing [1].

In their medical works, Theophilus Protospatharius and Joannes Actuarius both addressed the issue. Byzantine physicians typically drew on Oribasius' works and advised elderly patients to consume a diet rich in foods that provide "heat and moisture." They also advocated for frequent bathing, massage, rest, and low-intensity exercise regimens.

Avicenna's Canon of Medicine, published in 1025, was concerned with how "old folk need plenty of sleep" and how their bodies should be anointed with oil, as well as recommended exercises such as walking or horseback riding. The Canon's Thesis III addressed the appropriate diet for the elderly and dedicated several sections to elderly patients who become constipated [2].

Algizar, an Arab physician (circa 898–980), wrote a book on the medicine and health of the elderly. He also wrote a book on sleep disorders, another on forgetfulness and memory enhancement, and a treatise on the causes of death. Ishaq ibn

Hunayn (died 910), the son of Nestorian Christian scholar Huayn Ibn Ishaq, wrote a Treatise on Drugs for Forgetfulness in the 9th century. In 1849, George Day published Diseases of Advanced Life, one of the first books on the subject of geriatric medicine. Doctor Laza Lazarevi established the first modern geriatric hospital in Belgrade, Serbia, in 1881[3].

The term "geriatrics" was coined in 1908 by Ilya Ilyich Mechnikov, a Nobel Prize laureate in medicine, and was later adopted in 1909 by Dr. Ignatz Leo Nascher, former Chief of Clinic in the Mount Sinai Hospital Outpatient Department (New York City) and the "father" of geriatrics in the United States.

Dr. Marjory Warren, the "mother" of geriatrics, pioneered modern geriatrics in the United Kingdom. Warren emphasised the importance of rehabilitation in the care of the elderly. Using her experiences as a physician in a London Workhouse infirmary, she believed that simply feeding the elderly until they died was insufficient; they required diagnosis, treatment, care, and support. She discovered that patients, some of whom were previously bedridden, were able to gain some mobility [4].

Geriatrics has a long history of multidisciplinary practise in the United Kingdom. It recognises all professions, not just medicine, for their contributions to improving the well-being and independence of the elderly [5].

References

1. Parmelee PA, Thuras PD, Katz IR, et al. Validation of the Cumulative Illness Rating Scale in a geriatric residential population. *J Am Geriatr Soc.* 1995;43(2):130-7.
2. Williams ME, Hadler NM. The illness as the focus of geriatric medicine. *NEJM.* 1983;308(22):1357-60.
3. Bell-McGinty S, Butters MA, Meltzer CC, et al. Brain morphometric abnormalities in geriatric depression: long-term neurobiological effects of illness duration. *Am J Psychiatry.* 2002;159(8):1424-7.
4. Fried LP, Storer DJ, King DE, et al. Diagnosis of illness presentation in the elderly. *J Am Geriatr Soc.* 1991;39(2):117-23.
5. Cho CY, Alessi CA, Cho M, et al. The association between chronic illness and functional change among participants in a comprehensive geriatric assessment program. *J Am Geriatr Soc.* 1998;46(6):677-82.

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