

Ageing in India--an overview

V Kumar¹

Affiliations expand

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Abstract

Accelerated population ageing experienced in the last few decades is an unprecedented phenomenon. Currently, this is more in the developing countries. Soon three-fourths of the elderly will be in the developing world. From 1990 to 2025, the elderly population in Asia will rise from 50 per cent of the world's elderly to 58 per cent, in Africa and Latin America from 5 to 7 per cent, but in Europe the figure will drop from 19 to 12 per cent of the world's elderly. The life span has increased in India from 32 yr in 1947 to more than 62 yr now. From the morbidity point of view, almost 50 per cent of the Indian elderly have chronic diseases and 5 per cent suffer from immobility. There are several vulnerable groups and a big disadvantaged lot are elderly females who are one of the fastest growing segments, which will increase to become 4 times the current figure, by 2025. In spite of professional disinterest in the speciality, recent trends indicate the beginning of sensitization of medical teachers, advancing speciality of psychosocial gerontology and availability of some research funds. Importance of training of health professionals and priorities in gerontological research are also under consideration. Infections still take a heavy toll of our elderly population apart from well known degenerative disorders. Limitations of a developing country further influence the morbidity pattern in various ways. Nutritional deficiencies are common and often subclinical thus escaping the desired interventions. Coronary heart disease, hypertension, mental and many other disorders in the elderly have been reported as isolated observations highlighting differences from those made in the Western countries. Socio-economically, the traditional support of extended families is rapidly undergoing erosion making the elderly further vulnerable. This causes more emotional and psychological problems while the State finds itself helpless in providing a comprehensive care to its large chunk of elderly population. It will be important to surmise and predetermine the future factors that are going to modify the diverse patterns of morbidity, disability and mortality in regional context.

PIP: The author discusses aging trends in India, with a focus on ways of dealing with the resulting dependency burden. Sections are included on various dimensions of aging, the health status of the elderly, mortality and morbidity, and psychosocial status and support for the aged.