

LETTER TO EDITOR

Caregiver overload in older adults with dementia: a public health problem?

La sobrecarga dela cuidadora de adultos mayores con demencia ¿problema de salud pública?

A sobrecarga do cuidador de idosos com demência, problema de saúde pública?

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Dear Editor:

We would like to congratulate Rondón-Vázquez, et al. for their article Risk factors associated with overload in informal caregivers of prostrate older adults, for highlighting a health problem that affects, mainly, informal caregivers derived from the continuous care required by these patients.⁽¹⁾

Following the same line of research of the study, we want to highlight the overload of the informal caregiver of the relative with dementia, highlighting the negative consequences it has for their physical and emotional health. In addition, it is necessary to know what kind of social and health responses are being developed to prevent and reduce the overload of these caregivers.

According to the data provided by the document Aging and Development in Latin America and the Caribbean, from the Latin American and Caribbean Demographic Center (CELADE), it is emphasized that the increase in demographic aging in Latin America is present in all countries. The document specifies that the percentage of the population aged 60 years and over will increase from 8% in 2000 to 14.1% in 2025 and 22.6% in 2050.⁽²⁾

Similar data are reported by the Spanish National Institute of Statistics (INE) which, according to its forecasts of the aging process, far from slowing down, will increase. According to demographic forecasts for 2050, it is predicted that 31.4% of the population in Spain will be over 65 years of age and 11.6% will be over 80 years of age.⁽³⁾



If the population increase in adults over 65 years of age continues to rise, the expected number of cases of people with dementia will increase progressively. According to several studies, it is reported that between 2 and 10% of all cases of dementia have an onset before the age of 65; and that its prevalence doubles with each 5-year interval after the age of 65.⁽⁴⁾ Among the dementias, Alzheimer's disease is the most prevalent and its major risk factor is aging. Studies show that a high percentage of people with the disease are 65 years of age or older and approximately 33% of people over 85 years of age suffer from it.⁽³⁾

In the study by Rivera-Navarro, et al.⁽⁵⁾ it is reported that the nuclear family constitutes the major support for the attention and care of people with dementia, where the informal caregiver is usually a woman (68-87%), middle-aged, with low level of schooling and is usually the daughter or spouse. Due to the continued need for care, the informal caregiver experiences physical and psychological overload that is expressed as physical and emotional exhaustion, stress and fatigue, which affects the performance of activities of daily living, including family and social relationships.⁽⁶⁾

Given the great negative impact on the health of caregivers, the design of programs to prevent physical and emotional overload is unavoidable. In a literature review by Bressan, et al.⁽⁷⁾ on the needs of informal caregivers of patients with dementia, it is concluded that most of them need to receive emotional support and the need to find a balance between the role of caregiver and their own personal, family and social needs. In addition, it refers that the primary caregiver and the patient's next of kin need information on what dementia is, training on what types of care are most appropriate and how specialized support can be obtained by mental health and social services throughout the course of the disease.

Given the magnitude of the problem, health and social care and care for people with dementia should be considered a public health problem that affects the patients themselves as well as their relatives, family members and primary caregiver. It is for this reason that the WHO Global Action Plan on the Public Health Response to Dementia indicates that dementia care is a goal to achieve the sustainability of any health system.⁽³⁾

Despite these recommendations, the Comprehensive Plan for Alzheimer and other Dementias of the Spanish Ministry of Health⁽⁸⁾ confirms that comprehensive care for patients and their families has not yet been achieved in most cases. It is verified that information and, especially, training on the disease and its care is in most cases deficient.



The document also specifies that in relation to the support and advice that the health system should provide to caregivers in the different phases of the disease, there are also shortcomings and a lack of social and health resources. Given these shortcomings, it is necessary to develop programs that provide satisfactory social and health responses to the needs of people with Alzheimer's and their family caregivers. To this end, coordination with other systems (health, labor, housing, etc.) should be promoted where interventions adapted to each phase and evolution of the disease is required. These measures would alleviate the caregiver's physical and emotional overload, since she could have support and resources that would allow her to rebuild her social relationships, enhance her self-care and continue to work or join the labor market.⁽⁸⁾

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