

## Status of self-care in elderly patients of a Havana medical office

### *Estado del autocuidado en pacientes de la tercera edad de un consultorio médico habanero*

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#### ABSTRACT

**Introduction:** self-care in the elderly is essential because, as people get older, they are more likely to experience health complications. **Objective:** to characterize the status of self-care in elderly patients in a medical office. **Method:** an observational, descriptive, cross-sectional study was carried out in the population of the Family Medical Office 7 of the Raúl Gómez García Polyclinic, in the municipality of 10 de Octubre, from September 2021 to September 2022. The universe was made up of 72 patients and it was studied in its entirety. A descriptive analysis was made. **Results:** an equitable distribution was observed in terms of the number of patients by sex (n = 36; 50 % for each one). Both for men (n = 19; 52,8 %) and for women (n = 18; 50 %), partial self-care deficits predominated. The highest number of patients with a partial self-care deficit (n = 15; 60 %) was found in the 71-80-year-old group, while the highest percentage of patients with total deficit was found in the 81-year-old or older group (n = 5; 31,3 %). Among those who perceived themselves as unhealthy (n = 25; 34,7 %), total deficit predominated (n = 11; 15,3 %). Among independent patients (n = 51; 70,8 %), partial self-care deficit was more frequent (n = 24; 33,3 %). **Conclusions:** the population was characterized by partially deficient self-care.

**Keywords:** Older Adults; Primary Health Care; Quality of Life; Aging; Primary prevention

#### RESUMEN

**Introducción:** el autocuidado en los ancianos es esencial pues, a medida que se envejece, es más probable que se experimenten complicaciones de salud. **Objetivo:** caracterizar el estado del autocuidado en pacientes de la tercera edad de un consultorio médico. **Método:** se realizó un estudio observacional, descriptivo, de corte transversal en la población del Consultorio Médico de la Familia No. 7 del Policlínico "Raúl Gómez García", municipio 10 de Octubre, entre septiembre de 2021 y septiembre de 2022. El universo estuvo constituido por 72 pacientes, estudiado en su totalidad. Se realizó un análisis descriptivo. **Resultados:** se observó una distribución equitativa en cuanto a la cantidad de pacientes por sexo (n = 36; 50 % para cada uno). Tanto para hombres (n = 19; 52,8 %) como para féminas (n = 18; 50 %) predominó el déficit parcial de autocuidado. En el grupo de 71-80 años se encontró la mayor cifra de pacientes con un déficit parcial de autocuidado (n = 15; 60 %), mientras que en el de 81 años o más se encontró el mayor porcentaje (n = 5; 31,3 %) de pacientes con déficit total. Entre los que se percibieron como no saludables (n = 25; 34,7 %), predominó el déficit total (n = 11; 15,3 %). Entre los pacientes independientes (n = 51; 70,8 %), tuvo mayor frecuencia el déficit parcial de autocuidado (n = 24; 33,3 %). **Conclusiones:** la población se caracterizó por poseer un autocuidado parcialmente deficitario.

**Palabras clave:** Adulto Mayor; Atención Primaria de Salud; Calidad de Vida; Envejecimiento; Prevención Primaria.



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## INTRODUCTION

Ageing is the result of the accumulation of molecular and cellular changes throughout the periods of life, which produces a slow decrease in physical and mental capacities. Over time it causes non-communicable diseases and/or death<sup>1</sup>.

The World Organization of Health classifies individuals from 60 to 74 years of age as elderly; to those from 75 to 90, as elderly; and those who exceed 90, long-lived. Any human being older than 64 years is considered a senior citizen<sup>1,2</sup>.

The United Nations Organization defines the elderly as any individual over 65 years of age in developed countries, and 60 years of age in developing countries<sup>2</sup>. According to the Cuban Health Statistical Yearbook<sup>3</sup>, some 2,392,197 people are in age groups over 60, with a superiority of the female sex, which is a great concern for the country.

The elderly frequently suffer from diabetes mellitus, arterial hypertension, obesity and arthritis, in addition to loss of muscle mass that leads to a decrease in muscle strength and, in turn, to the deterioration of functional capacities. These conditions can cause changes in range of motion and gait disturbances, as well as in activities of daily living, to the detriment of physical-functional performance and, consequently, loss of autonomy<sup>4</sup>.

Self-care in the elderly is essential because the older you get, the more likely you are to experience health complications. It implies adopting a series of actions aimed at guaranteeing both physical and mental health, which together allow us to lead a healthier and more fulfilling life. Self-care is a way of encouraging people to take care of themselves in order to achieve and maintain a state of complete health and well-being. In this sense, the medical team plays a very important role as a facilitator of learning. By disseminating the basic concepts of health, it makes the person autonomous in these aspects<sup>5</sup>.

The objective of this research was to characterize the status of self-care in elderly patients in a medical office.

## METHOD

**Type of study:** an observational, descriptive, cross-sectional study was carried out in the population of the Family Medical Office (CMF, as it stands in Spanish) No. 7 of the "Raúl Gómez García" Polyclinic of the 10 de Octubre municipality, between September 2021 and September 2022.

**Universe and sample:** the universe consisted of 72 patients, studied in its entirety. The selection criteria were: provide informed consent to participate in the research, have physical and mental capacity to participate in the study, be 60 years of age or older at the time of the study, and reside in the health area.

**Variables and data collection:** the variables were studied:

- Sex: male, female.
- Age groups: 60-70, 71-80, 81 or more (in completed years).
- Self-perception of health status: healthy, unhealthy.
- Functional level: independent (does not depend on other people to carry out activities of daily living), dependent (does depend on other people to carry out some or all activities of daily living).
- Level of self-care: adequate (21-24 points), partial deficit (16-20 points), total deficit (15 or less), according to the CYPAC-AM test (Capacity and Perception of Self-Care of the Elderly)<sup>6</sup>.

For the collection of information, a questionnaire was used where information on sex, age, self-perception of health status and functional level was obtained. In addition, the CYPAC-AM6 test was applied.

**Statistical processing:** Microsoft Excel 2016 (Windows) was used, to which the data collected with the questionnaire and the test were exported. A descriptive statistical analysis was performed.

**Ethical aspects:** Informed consent was obtained from the participants. It was communicated that the personal data would be kept reserved and confidential, and that the participants could withdraw from the research at any time they considered it. They were made aware of the meaning of key terms of the applied instrument. The principles of the II Declaration of Helsinki were complied with.

## RESULTS

An equitable distribution was observed in terms of the number of patients by sex ( $n = 36$ ; 50 % for each). Both for men ( $n = 19$ ; 52,8 %) and for women ( $n = 18$ ; 50 %), the partial self-care deficit predominated (Table 1).

**Table 1.** Patients according to sex and level of self-care

Sex	Self-care level							
	Appropriate		Partial deficit		Total de icit		Total	
	No.	%	No.	%	No.	%	No.	%
Male	10	27,8	19	52,8	7	19,4	36	50
Female	14	38,9	18	50	4	11,1	36	50
Total	24	33,3	37	51,4	11	15,3	72	100

The largest number of patients was found in the 60-70-year-old group (n = 31; 43,1 %). However, the highest number of patients with a partial self-care deficit was found in the 71-80-year-old group (n = 15; 60 %), while the highest percentage was found in the 81-year-old or older group (n = 5; 31,3 %) of patients with total deficit (Table 2).

**Table 2.** Patients according to age groups and level of self-care

Age groups	Self-care level							
	Appropriate		Partial deficit		Total de icit		Total	
	No.	%	No.	%	No.	%	No.	%
60-70	14	45,2	14	45,2	3	9,6	31	43,1
71-80	7	28	15	60	3	12	25	34,7
81 and over	3	18,7	8	50	5	31,3	16	22,2
Total	24	33,3	37	51,4	11	15,3	72	100

It was observed that, among the older adults who perceived themselves as healthy (n = 47; 65,3 %), none reached the total self-care deficit. In those who perceived themselves as unhealthy (n = 25; 34,7 %), the total deficit predominated (n = 11; 15,3 %), as shown in Table 3.

**Table 3.** Patients according to self-perception of health status and level of self-care

Self-perception of health status	Self-care level							
	Appropriate		Partial deficit		Total deficit		Total	
	No.	%	No.	%	No.	%	No.	%
Healthy	18	25	29	40,3	0	0	47	65,3
Not healthy	6	8,3	8	11,1	11	15,3	25	34,7
Total	24	33,3	37	51,4	11	15,3	72	100

Independent patients predominated (n = 51; 70,8 %); Among them, the partial self-care deficit was more frequent, with 24 subjects, for 33,3 % (Table 4).

**Table 4.** Patients according to functional degree and level of self-care

Functional Grade	Self-care level							
	Appropriate		Partial deficit		Total deficit		Total	
	No.	%	No.	%	No.	%	No.	%
Independent	22	30,6	24	33,3	5	6,9	51	70,8
Dependent	2	2,8	13	18,1	6	8,3	21	29,2
Total	24	33,3	37	51,4	11	15,3	72	100

## DISCUSSION

Sex in this study was not a variable that marked a difference between the patients, since an equal number of both men and women was found, which is inconsistent with the research by Sánchez-Marín et al.<sup>7</sup> and García-Falcón et al.<sup>8</sup>, in which the female sex predominated. Regarding age, this study is very similar to that of Díaz de León Castañeda et al.<sup>9</sup>.

Regarding self-perception of health status, it could be noted that many of the patients who considered themselves unhealthy had a total self-care deficit, which coincides with the study carried out in Sancti Spiritus by González Gutiérrez et al.<sup>10</sup>. Villarreal Ángeles et al.<sup>11</sup> point out that the level of perception of the health status of the elderly is also given by their capacity for social integration.

The study by Plasencia Vilcarromero and Quispe Díaz<sup>12</sup> shows a high frequency of elderly people who are independent, a fact that coincides with what was indicated in this study and that does not coincide with what was reported by Bejines-Soto et al.<sup>13</sup> (approximately one 60.9% of the patients analyzed were dependent).

The study by Enríquez Hernández and Pantoja Muñoz<sup>14</sup> on self-care in the adult male population yields data similar to those of this study in that male patients have an adequate level of self-care or a partial deficit in most cases and very rarely reach the total deficit of self-care. Vallejo<sup>15</sup> highlights how those older adults who feel inserted manage to maintain a level of self-care between the partial deficit and the adequate level.

The study by Dorantes-Mendoza et al.<sup>16</sup> supports the fact that people with moderate and poor levels of self-care are mainly over 80 years of age. This is similar to what was found in this work.

Self-care is inherent to the human being and essential for life. It results from the growth of the person in daily life, in each experience as a caregiver for himself and those who are part of his environment. Due to its great potential to positively influence people's way of life, self-care constitutes an important strategy for health protection and disease prevention<sup>5,17</sup>. The relationship between self-care and an opportune standard of living in the elderly is transcendental and extremely important for the world population in general<sup>18,19</sup>, so it should be one of the pillars of great attention and care. The Romero<sup>20</sup> study yielded results in which almost the entire population studied had a total self-care deficit, which is not similar to what was observed in this study.

The authors consider that it is necessary to carry out an educational intervention on self-care in the population studied, with emphasis on the unhealthy and over 80 years of age.

## CONCLUSIONES

The population was characterized by having a partially deficient self-care. The predominant age group was 60-70 years. Most of the patients perceived themselves as healthy and had a fundamentally independent functional degree.

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**CONFLICT OF INTERESTS**

The authors declare no conflict of interests.

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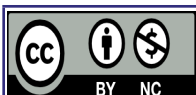
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