Infectious Diseases and the Elderly
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As we age, we become more susceptible to illness, particularly infectious diseases. While there is a general immunosenescence that accompanies the aging process, it is thought that the increased incidence of infectious disease can be primarily attributed to malnutrition and comorbid illness. Healthcare providers must be aware that infectious diseases present themselves differently in older adults, and the management of antibiotics changes in elderly patients. The following infectious diseases are common among elderly patients: pneumonia, influenza, urinary tract infection, tuberculosis, septic arthritis, osteomyelitis, HIV infection and AIDS, neurosyphilis, reactivated varicella zoster virus, and facial nerve palsy.

As the number of older adults increases in most countries, more individuals are being institutionalized, and the age of institutionalization is also increasing. The incidence of infectious diseases is higher in institutions such as nursing homes because the patients are sharing many resources, including caregivers. Nursing home patients are especially likely to develop respiratory tract infections, gastrointestinal infections, skin and soft-tissue infections, and infections from antimicrobial-resistant bacteria. Healthcare in nursing homes has been a highly debated subject, as many institutions are understaffed and the employees have to work long hours. Recently, standards for healthcare in nursing homes and other long-term care facilities have been formulated. Factors to consider for the prevention and control of infectious disease in nursing homes are surveillance methods microbial use and resistance, vaccinations of the healthcare providers and patients, isolation and precaution, and hand hygiene.