

Episode: *Editorial Fellow Interview: "Why Should We Care About the Mental Health of Older Adults?"*

Guest: Badr Ratnakaran, MBBS

Host: Tim Hoff

Transcript by: Cheryl Green

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[bright theme music]

[00:00:04] TIM HOFF: Welcome to another episode of the Editorial Fellow Interview series from the *American Medical Association Journal of Ethics*. I'm your host, Tim Hoff. This series provides an alternative way to access the interesting and important work being done by Journal contributors each month. Joining me on this episode is Dr Badr Ratnakaran, a geriatric psychiatrist at the Carilion Clinic Center for Healthy Aging in Roanoke, Virginia, and the editorial fellow who helped curate the October 2023 issue of the Journal, [Geriatric Psychiatry](#). Dr Ratnakaran, thank you so much for being on the podcast. [music fades]

DR BADR RATNAKARAN: Thank you very much. I'm glad to be here.

[00:00:40] HOFF: So, to begin with, what is the main ethics point of the issue this month?

RATNAKARAN: So, geriatric mental health, or mental health in older adults, it's going to become of prime importance. It has already prime importance, but it's becoming more and more recognized. And this is because the population of older adults around the world is increasing. And by 2050, it's expected around 22 percentage of the population of the world will be older adults. And in the US, by 2060, the population of older adults will double. In that scenario, our patient population who we are seeing in our clinics, our outpatient settings, our inpatient settings will be a sizable number of older adults, and we should be prepared for it to face the ethical problems we have with the mental problems or the health problems that the older adults have. And it's particularly important because older adults are a vulnerable population. We saw that happen during the COVID-19 pandemic where they were isolated. They were at high risk for getting the infection. They had difficulty with access to the resources that they'd need. And our health system and our society is many times not very friendly to their needs. And that's why it's important for us health care providers, whether as doctors or nurses or medical students or residents, to know many of the challenges that they face that contribute to the mental health problems.

[00:02:15] HOFF: And so, you've sort of touched on it there, but what's the most important thing for health professions students and trainees specifically to take from this issue?

RATNAKARAN: Mainly, I would like my readers, our audience, to understand the ethical and professional challenges when you have, when you care for older adults. It's very important to not assume that whatever care you apply for children or adults, it does not apply or generalize to the same type of care for older adults. They have their own needs and challenges, and they're growing old. Many times we try to see them, we can apply the same principles in their care. One example I can give you is if you're prescribing medications for older adults, in older adults we might not be as hesitant when we prescribe the same medications in adults. In older adults you have to make that careful decision about starting with a low-dose medication. It takes time to go up on the medications without harming the patient. And the bigger question is do we need to medicate all the problems for older adults? Do we have to risk polypharmacy? So, that's the first lesson:

The rules you apply for children or adults, and some adults, may not be the same for older adults.

And that also brings me to the next point that just because somebody's older doesn't mean you should provide lesser standards of care. They are still adults. They're still to have the dignity and autonomy. There's a lot of misconceptions because they're old: They don't need care, you don't need to address their pain or depression, it's all part of aging, doesn't need to be medicated or treated. And such ageist attitudes can actually worsen their quality of life and contribute to mental health problems.

[00:04:02] HOFF: And so, if you could add one more thing to this issue or one point to this issue that wasn't covered by the articles already here, what would that be?

RATNAKARAN: The biggest thing I would say is the barriers to access to various types of population of older adults. A lot of older adults, whether they're homeless or they're refugees or asylum seekers or belonging to sexual and gender minorities, they have a lot of barriers of access to mental health care compared to all adults or children. A lot of it's not recognized. A lot of it is related to stigma older adults. Imagine older adults in '60s or '70s, 1960s or 1970s, that there was a lot of stigma in mental health or even stigma of being identified belonging to sexual and gender minorities, homeless trauma and stigma and shame they must have gone through. And for them to express that or talk about it might be not very easy. That's one thing.

And second thing is access to care. There's not many geriatricians or geriatric psychiatrists who are experts in treating older adults in the country. So, specialist care is also difficult for them to get to. [theme music returns] And barriers of access to care is also a very important topic in older adults.

[00:05:25] HOFF: Dr Ratnakaran, thank you so much for your time on the podcast today and for your work in curating this month's issue.

RATNAKARAN: All right. Thank you very much.

HOFF: To read the full article, as well as the rest of this month's issue for free, visit our site, journalofethics.org. We'll be back soon with more *Ethics Talk* from the *American Medical Association Journal of Ethics*.