

# OLDER PEOPLE'S KNOWLEDGE ABOUT AND ACCESS TO THE GERIATRICS SERVICE OF MOGI DAS CRUZES, SÃO PAULO

*Conhecimento e acesso de idosos ao serviço de geriatria de Mogi das Cruzes, São Paulo*

*Conocimiento y acceso de mayores a los servicios de geriatría de Mogi das Cruzes, São Paulo*

Original Article

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## ABSTRACT

**Objective:** To assess older people's knowledge about and access to the geriatrics service of a polyclinic located in Mogi das Cruzes, São Paulo. **Methods:** Participants were 200 older people waiting for an outpatient consultation in the waiting room of the Polyclinic of the University of Mogi das Cruzes. These older people answered a questionnaire in the period from September 2013 to January 2014. **Results:** 58% (n=116) of participants reported knowing about the existence of a geriatric physician, but only 9,5% (n=19) were served by this specialist. Regarding older people who are usually served by one single medical specialty in routine consultations, 8% (n=16) sought specialists other than general practitioner, cardiologist and gynecologist. As for these other specialties, only 17.6% (n=35) sought the geriatrician. Most participants (99.5%, n=199) think it is important that older people are seen by a geriatric physician. **Conclusion:** Most older interviewees know the geriatric specialty; however, they never had the opportunity to consult a geriatric physician even though they recognize that this should occur. Despite the existence of this specialty in the polyclinic, it can be said that the population is not informed about the availability of consultations with such professional in the municipal service.

**Descriptors:** Aging; Geriatrics; Health Services for the Aged.

## RESUMO

**Objetivo:** Avaliar o conhecimento e o acesso de idosos ao serviço de geriatria de uma policlínica localizada em Mogi das Cruzes, SP. **Métodos:** Participaram 200 idosos que aguardavam uma consulta ambulatorial na sala de espera da Policlínica da Universidade de Mogi das Cruzes. Esses idosos responderam a um questionário no período de setembro de 2013 a janeiro de 2014. **Resultados:** Dos avaliados, 58% (n=116) dos participantes afirmaram saber da existência do médico geriatra, porém, apenas 9,5% (n=19) foram atendidos por esse especialista. Quanto aos idosos que costumam passar apenas por uma única especialidade para consultas rotineiras, 8% (n=16) buscam especialidades diferentes das de clínico geral, cardiologista e ginecologista. Dentre essas outras especialidades, apenas 17,6% (n=35) buscam o geriatra. A maioria dos participantes, 99,5% (n=199), considera importante que o idoso passe por um médico geriatra. **Conclusão:** A maioria dos idosos indagados conhece a especialidade geriátrica, porém nunca tiveram a oportunidade de se consultar com um médico geriatra, embora reconheçam que isso devesse ocorrer. Apesar da existência desta especialidade na policlínica, pode-se dizer que a população não está informada sobre a disponibilidade dos atendimentos desse profissional no serviço municipal.

**Descritores:** Envelhecimento; Geriatria; Serviços de Saúde para Idosos.

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Angela Alves Correia de Souza<sup>(1)</sup>  
Karis de Campos<sup>(2)</sup>  
Ivone Panhoca<sup>(3)</sup>

1) University of Mogi das Cruzes  
(Universidade de Mogi das Cruzes - UMC)  
- Mogi das Cruzes (SP) - Brazil

2) University of Mogi das Cruzes  
(Universidade de Mogi das Cruzes - UMC)  
- Guarulhos (SP) - Brazil

3) University of Mogi das Cruzes  
(Universidade de Mogi das Cruzes - UMC)  
- São Paulo (SP) - Brazil

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## RESUMEN

**Objetivo:** *Evaluar el conocimiento y el acceso de mayores al servicio de geriatría de una policlínica localizada en Mogi das Cruzes, SP. Métodos:* *Participaron 200 mayores que esperaban por la consulta de ambulatorio en la sala de espera de la Policlínica de la Universidad de Mogi das Cruzes. Esos mayores contestaron a una encuesta entre septiembre de 2013 y enero de 2014. Resultados:* *De los evaluados, el 58% (n=116) de los participantes afirmaron saber que había el médico geriatra pero el 9,5% (n=19) fueron asistidos por ese especialista. Respecto a los mayores que suelen pasar solamente por una única especialidad para las consultas de rutina, el 8% (n=16) buscan especialidades distintas de las del clínico general, del cardiólogo y del ginecólogo. De entre esas otras especialidades solamente el 17,6% (n=35) procuran el geriatra. La mayoría de los participantes, el 99,5% (n=199) considera importante que el mayor pase por un médico geriatra. Conclusión:* *La mayoría de los mayores investigados conoce la especialidad geriátrica pero nunca tuvieron la oportunidad de una consulta con un médico geriatra aunque reconocen que eso debería ocurrir. A pesar de la existencia de esta especialidad en la policlínica, se puede decir que la población no tiene la información de que hay disponibilidad de atendimientos de parte de este profesional en el servicio municipal.*

**Descriptor:** *Envejecimiento; Geriatría; Servicios de Salud para Ancianos.*

## INTRODUCTION

Nowadays, there is an accelerated growth of the older population due to an increase in life expectancy and a decrease in the fertility rate. Although this increase in the number of people over 60 years of age may be a good indicator of the effectiveness of public policies, it also reminds society of the need to adapt to the needs of this new age group<sup>(1)</sup>.

It is estimated that the world's population over 60 years will double by 2050, demanding social changes, particularly in health services<sup>(2)</sup>. According to the United Nations Population Fund (UNFPA), half of this population will be living in developing countries, such as Brazil<sup>(3)</sup>.

The 2010 Census demonstrated a great change in the Brazilian age structure, with a decreased number of children aged up to 5 years and an increasing number of people over 60 years old<sup>(4)</sup>. Therefore, investments must be made in health care, with the training of professionals to work in this field<sup>(5-7)</sup>. In this sense, the Statute of the Older Person (2003) establishes the need to insert the gerontology and geriatrics subjects in undergraduate curricula<sup>(8)</sup>. This also points to the need for investment, regardless of the costs, for meeting the demands<sup>(9)</sup>. It is also extremely important

to provide professionals with a human formation because old age, suffering, and death have lost their impact on individuals' emotions<sup>(10)</sup>.

The geriatrician is medical specialist responsible for both health promotion and the treatment of diseases and incapacities of old age<sup>(11)</sup>. Thus, the care of older people should be provided in a holistic manner, recognizing that they are integrated into a social, family, political and historical environment<sup>(12)</sup>. The geriatrician will not only focus on secondary care interventions, but also on health promotion and disease prevention in primary care. For instance, they can inform patients about immunization through vaccines and changes in lifestyle, and also provide counseling<sup>(13)</sup> as the needs in this age group are not solved in the short or medium term and should be permanently addressed<sup>(6)</sup>.

With regard to the Alto Tietê region, data from the Brazilian Institute of Geography and Statistics (*Instituto Brasileiro de Geografia e Estatísticas – IBGE*) showed that there were 39,816 thousand older people in Mogi das Cruzes in 2010, representing 10.1% of the population in the city. IBGE estimates that the number of older people will triple by 2050<sup>(14)</sup>.

According to research, of the 10 municipalities that make up the Alto Tietê region, only Mogi das Cruzes and Poá offer geriatric services through the municipal health network. The results demonstrate an insufficient number of geriatricians in the Alto Tietê region in relation to the existing demand<sup>(15)</sup>.

Thus, the present study aimed to assess older people's knowledge about and access to the geriatrics service of a polyclinic located in Mogi das Cruzes, São Paulo.

## METHODS

This is a quantitative cross-sectional research. The convenience sample consisted of 200 older people aged 60 years and over receiving care at the Polyclinic of the University of Mogi das Cruzes (*Universidade de Mogi das Cruzes*), located in the state of São Paulo, from September 2013 to January 2014. The older people were invited to participate in the research while they waited in the waiting rooms for different outpatient specialty consultations during the morning and afternoon. It should be noted that the polyclinic does not only serve citizens of the city of Mogi das Cruzes, but also people from neighboring cities within Alto Tietê region.

Significant disabilities, such as impairment of cognitive or auditory functions without intervention, difficulty in understanding, inability to sign the name and absence

of a companion, were adopted as exclusion criteria for participating in the research.

The older people who accepted to participate in this study answered an objective questionnaire containing 8 questions addressing the identification of participants, age, gender, marital status, knowledge about the geriatric specialty, consultation with this specialist and opinion about such specialty. A standardization process was carried out with two researchers so that they could carry out interviews in the same way, i.e., adopting the same methods. The questionnaire was read aloud to the patients and explained when necessary. The researcher wrote down the answers.

BioEstat version 5.0 was used for the tabulation of the data, which were described using simple frequencies and percentage. Chi-squared ( $\chi^2$ ) test and Mann-Whitney test were used to analyze the differences found with a significance level of  $p < 0.05$ . Descriptive statistics was used for data tabulation.

The present study was submitted to the Research Ethics Committee of the University of Mogi das Cruzes (*Universidade de Mogi das Cruzes – UMC*) and approved under Opinion No. 348.408. All the participants of this research signed the Free and Informed Consent Form. Thus, the study complied with all the ethical precepts of Resolution no. 466/2012.

## RESULTS

The group comprised 81 men (40.5%) and 119 women (59.5%) aged 60 years and over. The minimum age was 60 and the maximum was 88 years, with a standard deviation of 7.1 years. The median value for age was 68 years and the mean age of participants was 70 years. As for marital status, the majority (58%,  $n=116$ ) were married, 8% ( $n=16$ ) were single, 7% ( $n=14$ ) were divorced, 1% ( $n=2$ ) lived in a common-law marriage, and 26% ( $n=52$ ) presented other marital statuses.

Regarding the question about the knowledge of the existence of the geriatrician, 58% ( $n=116$ ) of the participants stated that they knew about the existence of a physician specialized in older people (Table I). However, 90.5% ( $n=181$ ) of the participants reported they had never been seen by such physician.

When the correlation between age and knowledge about the geriatric specialty was analyzed, it was verified that there was no trend towards greater knowledge about the specialty with increasing age. A decision level of 0.05 was used (Table II). Within this same context, it was observed that there was no trend towards greater search for a geriatrician with increasing age (Table II).

Of the 9.5% ( $n=19$ ) patients seen by a geriatrician, 80% ( $n=15$ ) reported they have noticed a difference between

Table I - Knowledge about and access to geriatric services. Mogi das Cruzes, São Paulo, 2015.

Variables	Yes		No		Total	
	n	%	n	%	n	%
Knowledge about the existence of the Geriatrician	116	58%	84	42%	200	100%
Quantity of older people seen by the Geriatrician	19	9.5%	181	90.5%	200	100%

Table II - Older people's answers regarding their knowledge about and the care received from a geriatrician. Mogi das Cruzes, São Paulo, 2015.

Variables	Age				
	60-65	66-70	71-75	76-79	≥80
Knowledge about Geriatrics					
Yes	42	29	20	14	12
No	24	22	16	9	12
Seen by a geriatrician					
Yes	7	2	4	3	3
No	59	49	32	20	21

the care provided by the geriatrician and that provided by the physician with whom they were routinely seen before consulting with the geriatrician. The most cited differences were: longer consultation, greater understanding of age issues, more specific and detailed care, and more attention from the doctor during the consultation. Of the participants seen by the geriatrician, 55% (n=110) mentioned the place where the consultation carried out – 54.5% (n=109) of the consultations took place in the municipality of Mogi das Cruzes.

Regarding the question about what kind of physician these participants routinely consulted with, 59.5% (n=119) of the participants reported only one kind of physician, 29% (n=58) underwent two different medical specialties for routine consultations, and 11.5% (n=23) were usually seen by three or more different specialists.

As for older people who were usually seen by one specialist, 40% (n=80) sought a general practitioner, 9.5% (n=19) sought a cardiologist, 2% (n=4) sought a gynecologist, and 8% (n=16) sought other specialties. Regarding these other specialties, 29.4% (n=59) of the participants sought the ophthalmologist and 17.6% (n=35) sought the geriatrician.

Of those who seek two specialists for routine consultations, the majority (15.5%, n=31) reported seeking the general practitioner and gynecologist and 3.4% (n=7) sought the cardiologist and geriatrician.

Finally, when the participants were questioned if they considered it important that the older person consulted with a specific doctor, i.e., the geriatrician, 99.5% (n=199) answered yes. This finding demonstrates the perception they have about the importance of the consultations and interventions carried out by the geriatrician to older people's health.

## DISCUSSION

It was verified that women constituted 59.5% of the sample of 200 older people attending the Polyclinic of the University of Mogi das Cruzes (*Universidade de Mogi das Cruzes*). The majority of the sample (58%) were married, and the mean age of participants was 70 years.

The fact that the sample was composed primarily of women is in line with the 2010 Census conducted by the IBGE<sup>(4)</sup>, in which the older population, i.e., individuals aged 60 years and older, is also composed of a greater number of women compared to men and confirms the greater longevity of women compared to men, a fact that has also been observed by other authors<sup>(14,16)</sup>. One study suggested that this difference in the male to female ratio may be due to the greater demand for medical care by women<sup>(17)</sup>.

Other studies have also found a majority of married participants<sup>(18,19)</sup> – in one of them, the mean age of participants was 69.1 years<sup>(19)</sup>. These findings were similar to those found in the present study. The mean age of circa 70 years shows the real increase in life expectancy observed by the IBGE<sup>(4)</sup>, which reported in the 1990 Census a life expectancy of 67.7 years.

Regarding the question addressing the knowledge about the existence of the geriatrician, 58% of the participants stated that they knew about the existence of a physician specialized in older people (Table I). However, 90.5% of the interviewees reported they had never been treated by this kind of doctor. This finding corroborates the reality in Brazil, where there were 1,149 geriatricians in 2013, which corresponded to 0.43% of all medical specialists in the country. Importantly, Brazil has 0.59 geriatricians per every 100,000 inhabitants<sup>(20)</sup>. The reality of the Alto Tietê region is not different; there is a shortage of geriatricians in relation to the demand presented, as research demonstrates<sup>(15)</sup>.

The majority of individuals seen by a geriatrician (80%) mentioned that they noticed a difference between the care given by the geriatrician and that provided by the physician with whom they were routinely seen before consulting with the geriatrician. In addition, they highlighted some characteristics: longer consultation, better understanding of age-related problems, more specific and detailed care, and more attention from the doctor during the consultation. These findings are in line with research carried out in Kentucky (USA), which identified the need for specific knowledge and skills to care for older adults during consultations, with competence in geriatrics differentiated from general competence<sup>(9)</sup>. This complies with the differential of the geriatric approach, which carried out a broader clinical evaluation and includes psychosocial aspects that result, therefore, in a longer consultation according to information from the Brazilian Society of Geriatrics and Gerontology (*Sociedade Brasileira de Geriatria e Gerontologia*)<sup>(21)</sup>.

Of the participants seen by a geriatrician, 55% mentioned the place where the consultation took place. Of these, 54.5% were seen in the municipality of Mogi das Cruzes. This finding is consistent with research carried out in Alto Tietê, which reports that only the municipalities of Mogi das Cruzes and Poá have a geriatric specialty in their municipal health care network<sup>(15)</sup>. It should be noted that the Polyclinic of the University of Mogi das Cruzes (*Universidade de Mogi das Cruzes*), where the research took place, serves its population and also people from the surrounding cities. Therefore, some participants were from the municipality of Mogi das Cruzes and others were not.

A study carried out in Campinas<sup>(22)</sup> with older people attending outpatient clinics found that the majority of the

sample would be treated in the internal medicine department, followed by the ophthalmology sector and the cardiology department, which corroborates the finding of the present study in which most people (40%) are seen by the general practitioner, followed by the cardiologist (9.5%), with the ophthalmologist being the most sought medical specialist by 8% of the people who seek medical specialties other than general practitioners, cardiologist and gynecologist in this population (29.4%).

The great demand for the general practitioner is possibly because such specialist is the first to provide care in Primary Health Centers, a place sought by the vast majority of older people. The demand for cardiologists is justified by the fact that there is a higher incidence of cardiovascular diseases in old age, which compromises people's quality of life and exposes a relevant cause of morbidity and mortality<sup>(23)</sup>. Other facts that deserve attention are the lack of a reference physician and that many older people are seen by more than one medical specialist, demonstrating the lack of health care programs targeted at older people<sup>(24)</sup>.

The shortage of geriatricians in health care services is evidenced in a study carried out in Primary Health Centers of Cascavel, Paraná<sup>(25)</sup> and in a study carried out in Health Care Networks of Fortaleza, Ceará<sup>(26)</sup>, which reveal a demand that is greater than the supply. This finding corroborates the present research as only 10% of the sample had already been seen by a geriatrician. Regarding the 8% of participants who sought other medical specialties, only 17.6% sought a geriatrician for routine consultations and only 3.44% of the older people sought this specialist and a cardiologist for routine consultations.

Finally, when the study participants were questioned if they considered it important that the older person consulted with a specific doctor, i.e., the geriatrician, 99.5% said yes. This finding demonstrates the perception they have about the importance of the consultations and interventions carried out by the geriatrician to older people's health.

## CONCLUSION

Thus, it can be concluded that the majority of the older people interviewed know the geriatric specialty; however, the majority never had the opportunity to consult with a geriatrician, although they also recognize that this should occur.

Despite the provision of geriatricians – although in a small number – in the municipal service, it can be said that the population is not informed about their existence and that there is a need for their greater dissemination among older patients.

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**Mailing address:**

Angela Alves Correia de Souza  
 Rua Monte Negro, 73  
 Bairro: Jardim Santo Antônio  
 CEP 06126-030 - Osasco - SP - Brasil  
 E-mail: [angela.aacs@yahoo.com.br](mailto:angela.aacs@yahoo.com.br)