Reflection #1

When I was assigned the book, *Being Mortal*, I wasn’t excited. Reading about death and getting old did not interest me. The thought of being elderly is a concept that I believed was far into the future for me. After reading the first half of the novel, I can say that I have enjoyed it immensely so far.

It seems in the first chapter, the author, Atul Gawande, reflects on the treatment of the elderly, specifically his girlfriend's grandmother and his grandfather. There was a drastic difference between them. The major difference is that his grandfather lived with family and the culture in India treated older people with respect and turned to them for major concerns. The author’s grandfather lived with family until he was over a hundred years old. With his girlfriend’s grandmother, she lived by herself and it became increasingly more risky to do so. The doctors were only able to help with medications. There was no solution to her problem. These examples come from different cultures and a different time. The author referenced how old age is no longer a rarity in the United States whereas up to thirty years ago, living to old age was rare. With economic prosperity and technological advancements, people live longer. The question Gawande brought up was, why had the treatment of the elderly changed? There were reasons brought up like independence. This could be a factor because in America, you live to work and find a good job then move out of your family’s home. With the older generation and this mentality, it would be difficult to move in a nursing home or with your family because they are used to doing things alone. When one gets older, it gets more difficult to do tasks younger people do like simply taking out the trash. Overall, I was shocked to learn how culture and development changes the treatment of different generations.

The second chapter of *Being Mortal,* is about the physical aspect of aging. Atul Gawande lists how people's life expectancy has changed from a slope to a hilly slope. People get sick and recover and so on. The author also lists physical changes such as grey hair, receding gums, and vision problems. There were several examples like Felix and Bella, and Jean Gavrilles. In Jean’s example, the author visits a geriatrician and the patient, Jean. As the geriatrician inspects the patient, the author observed that she looked healthy and clean. However, when the doctor looked at her feet, it all changed. The nails were unclean and dirty and her feet were swollen. As I was reading this, it made me realize the differences between doctors in geriatrics and other fields. It was shocking. A huge factor in aging, is not what you would typically look at like the lung nodule the patient had. It was falling. There are three main risk factors: more than four medications, poor balance, and muscle weakness. Due to the patient’s medication, she was dehydrated causing dizziness making her more at risk for falls. The geriatrician made tweaks to her medications and recommendations for her lifestyle like a podiatrist and diet, therefore she did not fall for that coming year. This goes to show that aging is inevitable, but manageable. One of things that struck me was what the doctor said his role was. It was to help his patients retain as much freedom from disease as possible and retain as much function for the patient to interact with the outside world. I thought this doctor had the right idea. The doctor did everything in his power to help his patients retain a sense of self.

The next chapter was about dependence the older generations have on others. The author also had a theme of independence in the chapter. He brought up Alice, and Felix and Bella again as an example. For Alice, she eventually was moved to a nursing home at the urge of her family. Alice had felt like she had lost her independence and rebelled. She rebelled against taking her medicine, eating, and participating in activities. It was not her home and she was not used to people taking care of her. She hated it. In this chapter, I feel like many people go through this. They can’t accept that this is what the rest of their life will be like. In a room with other old people, with nurses taking care of them. Eventually, Alice died because she refused to hit the call button for the doctors when she wasn’t feeling well. Even though the Gawande does take note of the fact that nursing homes have drastically gotten better, this sometimes is the end result. It was an eye-opening problem. Freedom is something everyone wants, but sometimes it is not always what we get.

The last chapter is about nursing homes and families. It brings up that families are an alternative, but it can sometimes bring stress families aren’t equipped with today. The author describes Lou Sanders who eventually had to live with his daughter. However, as his problems got worse it put stress on his daughter, Shelley. It got to the point where she could not adequately take care of him. They decided to look for nursing homes much to Lou’s protest because of his independence. It was the one thing he always had. He was able to go make friends and do his own activities. The author relates this to the progress and different theories regarding the issue older people have with nursing homes. They have to try to make it more independent, and more welcoming. With the overall goal of making it a home for its patients. They keep in mind Maslow’s hierarchy of needs. This addresses how one lives life happily and successfully. Home is at the heart of this chapter and what is absolutely needed for those in assisted living and other types of care.

The book, *Being Mortal,* snuck up on me. Reading is a hobby of mine, but I did not expect to enjoy this book. The information Atul Gawande wrote kept me entertained and thirsty for more every step of the way. It was eye-opening to read the real life examples and to see the devotion the author put towards the novel.