

Case of Mr. and Mrs. White

Mr. Bob White is a right-handed, married, 83-year-old retired dairy farmer. Currently, he leases his 80 hectares for dairy and cattle grazing. Both Mr. White and his wife are unilingual speakers of English. Mr. White completed Grade 9 while his wife Dina, aged 79, completed Grade 8. They have no children. Mr. and Mrs. White live in their own home in a semi-rural area near a relatively small town (population = 12,000) in Eastern Ontario.

Their home is a small, recently made wheelchair accessible, two-storey house. There are two bedrooms on the second floor, a complete 4-piece bath on the second floor, a 2-piece bathroom on the ground floor (i.e. powder room), a summer kitchen attached to the back of the house, and a ground floor living room/parlour that has been converted into a bedroom for Mr. White. He often uses a portable commode that is stored in a hall closet when he feels he is unable to get to the ground floor bathroom.

Mr. White enjoys watching television and visiting with friends and neighbours who drop by the house. Mr. and Mrs. White have long-standing, strong ties with the community, of which they have been members for all of their lives (i.e., both born and raised in the region). Friends and neighbours provide valuable assistance in home upkeep between visits by homemaking personnel who help make meals, clean the house, and do the laundry. Mr. White uses a wheelchair for mobility. Mrs. White is independent, using her truck to drive herself grocery shopping, to help her complete chores, and to transport Mr. White around town.

Medical Information

Mr. White has a history of chronic idiopathic Parkinson's disease, severe bilateral hand deformities as a result of rheumatoid arthritis, and recently diagnosed bilateral cataracts which contribute to his extremely poor vision. His medications include Sinemet (for Parkinson's disease), and Voltarin and Prednisone (both anti-inflammatory medications) and Tylenol 3s (analgesic) for acute bouts of swelling and pain. Mr. White is edentulous for both upper and lower teeth. He suffers both feeding and swallowing problems (oral and oral-pharyngeal stages).

Mrs. White has a history of cardiac problems as a result of essential hypertension and congestive heart failure. She is currently taking Hydrochlorothiazide (diuretic) and Digoxin (heart beat regulator), and Ativan (sleeping pill) at night "for her nerves". The Whites receive homecare services provided by the Regional Home Care Program half a day each week.

Mr. White has been admitted recently to the respite care unit of the local hospital by his family physician. The physician noted that Mrs. White required some time on her own, free of the constant demands placed on her by her husband's condition. Moreover, the physician felt the need to re-examine Mr. White's health care needs in light of the following current problems.

Presenting Problems

- Home Care workers, his wife, and nursing staff (when he is hospitalized for acute medical or respite care) are experiencing increasing difficulty understanding his speech.
- Mr. White reports increased feelings of isolation and frustration as a result of his speech production problems, the inevitable decline in his speech skills with disease progression, and his increasing reliance on others for help with his ADLs.
- Mr. White is using speech strategies that both his wife and the hospital nurses do not find improve his intelligibility; his mask-like facial expression offers few additional cues to what he means.
- Mr. White uses few gestures (due to the Parkinson's disease) and his writing is limited (due to his rheumatoid arthritis).
- Mr. White's deteriorating vision contributes to problems with visual cue reception.
- Mrs. White, Home Care, and nursing staff are experiencing greater difficulty determining whether Mr. White is in pain.
- Mrs. White is concerned about recent changes in her husband's personality and memory skills. In particular, she notes that her husband exhibits frequent outbursts of anger that appear to be unprovoked and are out-of-character. Moreover, Mr. White often forgets what he and his wife talked about earlier in the day. Mrs. White is fearful that her husband may be in the early stages of dementia.
- According to hospital staff and homecare service personnel reports, Mrs. White appears to be suffering from high levels of caregiver burnout.
- Mr. White has undergone repeated, recent hospitalizations for acute medical and respite care reasons.

The health care team is wondering about:

- The urgent need for full-time nursing home placement for Mr. White,
- Whether Mr. White is suffering from dementia or other cognitive impairments,
- The presence of depression for both Mr. Mrs. White.

Adapted from Case Studies in Gerontology for the Applied Health Sciences: An Education Resource developed by J.B. Orange, S. Hobson, M.F. Cheeseman, A.A. Vandervoot, and M.E. Black, July, 1997.