

YOUR QUESTION

What are the specific requirements or considerations for patients >65 with COVID-19?

What is the best evidence currently?

Since COVID-19 seems to have a similar pathogenic potential as SARS-CoV and MERS-CoV,6 older adults are likely to be at increased risk of severe infections, cascade of complications, disability and death, as observed with influenza and respiratory syncytial virus infections. The risk of dying from COVID-19 increases with age and most of the deaths observed are in people >65, especially those with chronic conditions such as cardiovascular disease. Identification of the early stages of pneumonia [as one of the presenting symptoms of COVID-19] in older patients can prove difficult. Traditional symptoms and signs, including fever, may be absent. Limited evidence suggests that many tests that are useful in younger patients do not help diagnose infections in older adults. The onset of pneumonia in elderly people can often be rapid, and the prognosis is poor in severe pneumonia: as many as 20% will die. The older you are the more prevalent severe pneumonia becomes. Patients in nursing homes appear to fare even worse as they often have several comorbidities and poor nutritional status and are often physically inactive. In-hospital mortality is significantly higher.

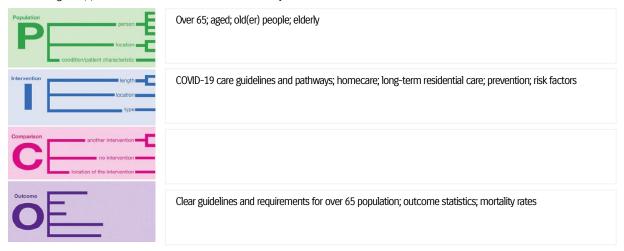
Specifically in respect of dementia, patients may forget to wash their hands or otherwise adhere to infection prevention and control measures.



SOURCES*

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The following PICO(T) was used as a basis for the evidence summary:



The following search strategy was used:

Coronavirus OR COVID-19 AND elderly OR aged OR older adult* OR over 65 OR >65.

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^{* [}Copy sources used in Evidence Summary and include as endnote HERE].