



Pathology Biology Section – 2003

G47 Elderly Neglect/Abuse

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This presentation is designed to bring awareness to the forensic community of elderly neglect/abuse which is a widespread problem possibly affecting hundreds of thousands of elderly across the country. It is still underreported due to a variety of reasons. This will discuss in detail what constitutes elderly neglect/abuse, medical, investigative, and autopsy assessment with presentation of several case reports from the State of Hawaii.

On June 18, 2002, the U.S. Congress heard detailed accounts of case reports of elderly neglect/abuse by a panel of experts and a report issued by the National Research Council stating, "Based on the available estimates, between one to two million Americans 65 and older have been injured, exploited, or otherwise mistreated by someone on whom they depended for care and protection." The overall national response to elder mistreatment currently remains weak and incomplete. Information on neglect/abuse cases and policies on how to deal with it vary from state to state. Therefore, they requested that someone at the Federal level take charge of the situation, gather statistics, and try to find a way to deal with the problem that will only grow worse as the population ages.

The National Center on Elder Abuse has defined three major categories of abuse/neglect as domestic, institutional, and self-neglect. The types of abuse are physical abuse, sexual abuse, psychological abuse, financial exploitation, and neglect. If not considered in the differential diagnosis, like a disease, elderly neglect may not be diagnosed. Inconsistent statements by the caretakers, evaluation of the environment, medications, nutritional evaluation, and statements in regard to the explanation of injuries/ulcers should be considered in investigating deaths due to the neglect/abuse. Medical and autopsy assessments should indicate the nature and extent of injuries, evaluation of hydration and metabolic status, detailed documentation of decubitus ulcers with the size, extent, and appearance with reference to staging, determination of the cause of death with evaluation of the duration of specific conditions, and documentation for legal proceedings.

Preventive measures include public awareness through education and early identification, intervention, and treatment for elders and their caregivers in high-risk situations, increasing the staff in the care homes, and even criminal prosecution of caregivers.

Elderly, Abuse, Neglect