

## **Lack of Affection and Basic Safety**

I, as a district nurse, got a request via a general practitioner to go and check on a son who couldn't take care of his care dependent mother anymore. The GP noticed that the son was too stressed. I had not even begun to try and talk to the old woman when the son told me his side of the story at length. He told me that he had been living with his elderly mother in her senior flat for years. He had previously worked in a fashion store and his mom took care of the household. He assisted her with some things, such as going to the doctor and lifting heavy groceries. When she was still doing well, he took her everywhere in his beautiful (expensive) car. He often took her shopping, made sure that she was looking her best, with nice clothes and jewellery, well-groomed and wearing a nice cologne. That is what he told me during my first house call. But instead of fun outings with his mother, he now had to take complete care of her on a daily basis. An underlying neurological clinical picture of the elderly woman was the cause of this.

The son was retired at that time, but he was kind of done spending so much time taking care of his mom every morning. Lately, his mother had started to walk even worse and he had to help her go to the bathroom approximately 6 times a day. Nevertheless, she was frequently wet due to urine leakage, even at night. And to make things even worse, he was fed up with his mother's drooling; often, even after a few hours, her clothes already looked poorly. Because of that, his pile of laundry had reached new heights. I let the son finish, whilst thinking about better incontinence material, but, the best part of it, I felt very embarrassed for the old woman who was silently staring out of the window.

The son was telling me that one of the worst parts of it

was that he could not go on holiday anymore. After asking further questions, I found out that he had a sister who lived far away. She had her own family to take care off and also wanted to babysit her grandchildren twice a week. She visited her mother and brother once a week to help around the house so that her brother could go grocery shopping and be 'relieved' of his mother for a couple of hours, as he described it.

An agreement was reached to aid the son with the care of his mother for five mornings a week, for the time being. This could immediately unburden him from some of the care. After approximately two weeks, the son increasingly started pulling away from his mother's care as, now the caregiver was here, he could take care of some of the other responsibilities around the house. All good and well, everything we needed was in the bathroom. Nevertheless, my colleagues and I constantly had to ask him in helping his mother walk from her bed to the bath and living room. This was too difficult for a caregiver to do alone and she walked better when her son was close. The son declined all mention of domestic help. He said that he already had his fair share of care providers.

After a while, the son requested whether a caregiver could help him the weekend mornings too and his request was honoured. A few weeks after that, the son requested evening care to help his mother get in bed. The old woman had indeed started to move more poorly and was hobbling about in front of the TV. This annoyed the son immensely because he actually wanted to quietly watch a certain TV programme. After a while the son requested even more help, this time during the day. As the woman was collecting more and more tiny bruises and even skin tears (lesions) on her underarms, the extra afternoon care was rapidly enforced. We observed that there was little left of the dainty lifestyle the son and his mother once had.

I notified the GP to have a conversation with the son. The old woman was well past the point of standing up for herself. Her daughter did not have a clue about what was transpiring in her mother's apartment. With interference of the GP, a request was sent to get the mom into a nursing home. This request had been made earlier, but the son had put a stop to it every time. If his mom would go to a nursing home, her income would be cut down significantly, his mother's capital would then be 'consumed' and he would have to pay for the apartment himself. The old woman was placed into a nursing home shortly after that. What is still a mystery to me, is whether this elderly woman deteriorated faster mentally and physically due to a worsening clinical picture or a serious lack of affection and basic safety. The son stayed in the senior apartment and kept driving his beautiful, expensive car. My colleagues and I were left with a hangover of sorts, even though we realised that this admission had turned out to be the best solution for the elderly lady.

