

Geriatric COVID .phrase for Electronic Health Record and Guidance:

Are older adults more susceptible to the virus that causes COVID-19 compared with the general population and how can infection be prevented?

Yes, there is evidence that older adults (Over 60) are more susceptible, and older adults have been identified by the CDC as persons at higher risk of getting very sick from this illness. People living in long-term care facilities are at particularly high risk due to the increased ability for viruses to spread rapidly in this environment. Please see the [CDC's specific guidance for older and adults and people with chronic conditions like heart disease, lung disease and diabetes](#). The CDC also has a useful [webinar for older adults](#) on COVID-19.

Older adults with additional medical problems (heart disease, diabetes, lung problems and potentially dementia are at the highest risk), so it is important for you to understand your individual risk.

Older adults should engage in usual preventive actions to avoid infection, including cleaning hands often using soap and water or alcohol-based hand sanitizer, avoiding people who are sick, and staying up to date on vaccinations, including influenza vaccine.

In addition to these important preventive actions, older adults should **stay at home as much as possible ("social distancing")**, avoid crowds and stock up on necessary supplies/medications (try to recruit a friend or family member to help with this). Older adults should avoid all non-essential travel, including plane trips and cruises. Social distancing can lead to loneliness and isolation, which can also be detrimental to your health. **It is critical to still connect with others (e.g. via telephone, video call, email, etc) to reduce loneliness. The Institute on Aging offers a free 24/7 Friendship Hotline: 1-800-971-0016.** You may also go for a walk outside, in a non-crowded area, and should still try to stay active at home.

It is still OK to go get groceries and medications or ask to see if someone else can help you with this.

How should I manage my need for routine medical care for chronic conditions, during the COVID-19 pandemic?

UCSF and your providers are able to offer telehealth visits, in which you can interact with your provider via video and receive management recommendations without coming into the clinic. The first step to setting this up is to activate your MyChart account, and call your provider's clinic to set up the visit. At this time, we recommend video visits for routine, non-urgent medical visits. If you are unable to do a video visit, we recommend postponing non-urgent visits. Your clinical team is also available to respond to your questions via MyChart and telephone. We can also see you in a face-to-face visit for urgent issues that cannot be resolved via telehealth, telephone or MyChart.

If possible we recommend keeping at least a 14 day supply of medications for chronic conditions. Your insurance company may limit the amount you can keep on hand (consider a mail order pharmacy). Keep over the counter home remedies available, if you need to treat fever at home. We recommend keeping acetaminophen at home, as this is safe for most older adults.

If you are caring for an older adult with dementia, the Alzheimer's Association provides useful tips and information here: [https://www.alz.org/help-support/caregiving/coronavirus-\(covid-19\)-tips-for-dementia-care](https://www.alz.org/help-support/caregiving/coronavirus-(covid-19)-tips-for-dementia-care)

Does the clinical presentation of COVID-19 differ in older adults compared with the general population?

The most common symptoms of COVID-19 are fever, cough and shortness of breath. Older adults may not have these typical symptoms, and may instead have more vague symptoms like malaise or confusion. In some cases, COVID-19 infection evolves into more severe symptoms, which can include shortness of breath, pain/pressure in the chest, new confusion/somnolence, or bluish lips/face. These are emergency warning signs for which you should seek emergency care.

Are older adults at increased risk for severe illness, morbidity, or mortality from COVID-19 infection compared with adults?

Reports suggest that older adults are at increased risk for severe illness, morbidity and mortality, and that risk increases with increasing age and certain comorbidities (other medical problems) like heart disease, lung disease and diabetes.

Are there any treatments available for older adults with COVID-19?

There are currently no antiviral drugs recommended or licensed by the U.S. Food and Drug Administration for COVID-19. Clinical management includes prompt implementation of general health care settings [recommended infection prevention and control measures](#) in healthcare settings and supportive management of complications. See more information on CDC [Clinical Guidance for COVID-19](#).

Older adults and their family members should engage in usual preventive actions to prevent the spread of respiratory infections, including covering coughs, cleaning hands often with soap and water or alcohol-based hand sanitizer, and staying up to date on vaccinations, including influenza.