How to add years to life

KEYWORDS: Aging; Aged; Quality of Life; Mental Health; Health Status

For all people aging is inevitable. It is a period of life in which life activity decline, and needs for somebody's support, help and care increase. Thirty-eight old persons aged 90 years and more were tested by means of a questionnaire in the territory of Smederevo (villages of Smederevo community were also included). We investigated: 1. Subjective feeling of health of the persons aged 90 years and more; 2. What factors influenced quality of life up to 50 years of age and how they influenced life of nonagenarian persons? 3. What is a degree of the functional capability of the population aged over 90 years? 4. Who takes cares about aged persons? We found that most people aged 90 years and more, regardless their very old age, are of preserved mental and physical health; that none takes care of majority of old population; that they have positive life attitudes and habits regarding correct nutrition and physical activities. Although they are all well along in years, we learned very interesting life messages when we talked to them. Once we were their children, and meanwhile they become ours. All they need is little of our time and patience and few kind and warm words.

The importance of social support in adaptation of patients with malignant diseases

KEYWORDS: Lung Neoplasms; Social Support; Adaptation, Psychological

Social support includes the other persons, who can provide the help to patients, to use their own psychological abilities to overcome their emotional problems. Supporting persons can help, using their experience and other resources, giving the information and counseling, with the aim to minimize or solve stress situation. The aim of the study is to estimate the sources of support, to define its quantity and quality, and to grade the patients need for support. In addition, to assess the influence of social support on the patient's adaptation to malignant disease. The questionnaire for evaluation of psychosocial adaptability was applied and the scale for evaluation of emotional distress (HAD) been used. Number of examined patients was 72 (36 lung cancer and 36 tuberculosis). Our results showed very distinctive presence of psychosocial, emotional and practical support of patients with cancer. The most frequent source of support was marriage partners. There was found distinctive need for social support in all patients. It was accomplished by contacts with social environment. The grade of anxiety and depression was minor in supported patients. In conclusion, satisfaction by the given social support resulted in positive cope with the disease and treatment, and good adaptability.