

Deepod Bala

The Caregivers of Our Future



In the dimly lit retirement home, Rani Kulkarni leans over her patient, an old man, checking his health. Despite his incoherent speech and bad hearing, she patiently carries out a conversation with him. She asks him various questions about how he's feeling, to which he responds positively with a smile, despite being on bedrest.



Dr. Kulkarni loves being a geriatrician, a field that is overlooked, yet critical. According to WebMD.com, geriatric doctors are “regular doctors who have additional training in treating older adults, especially those ages 65 years and up, who often have complex medical issues. The goal is to keep patients functional and help them maintain their quality of life” (Martins, et al). With advancements in healthcare and the use of medications like penicillin and vaccines, people are living longer, leading to a significant increase in the elderly population. Therefore, there are significantly more senior people in the world. NextAvenue.org, a nonprofit journalism publication dedicated to older adults, states that there is a roughly 42% increase in people aged 65 and older between 2019 and 2034 (Shahid-ullah). Unfortunately for humankind, living longer does not equate to a better quality of life, which is a problem that geriatric

medicine wants to solve. This means that Dr Kulkarni's job as a geriatrician is exceedingly important. Unfortunately, fewer people are going into geriatrics. This is largely because it doesn't pay as well as most other medical professions, which is a negative for doctors with debt from medical school. In addition there is a big cultural difference between the doctors and their patients. The elderly can be more stubborn and set in their ways, and may also struggle with mental impairments, making communication difficult. However, despite these challenges, geriatricians often find their work deeply fulfilling because of its crucial role in promoting human well-being. According to the American Geriatric Society, some states have set up loan forgiveness programs for aspiring geriatricians, because of the job's importance (“Is Geriatrics Right For You”). In addition, the field offers learning opportunities, including fellowships and mentoring.



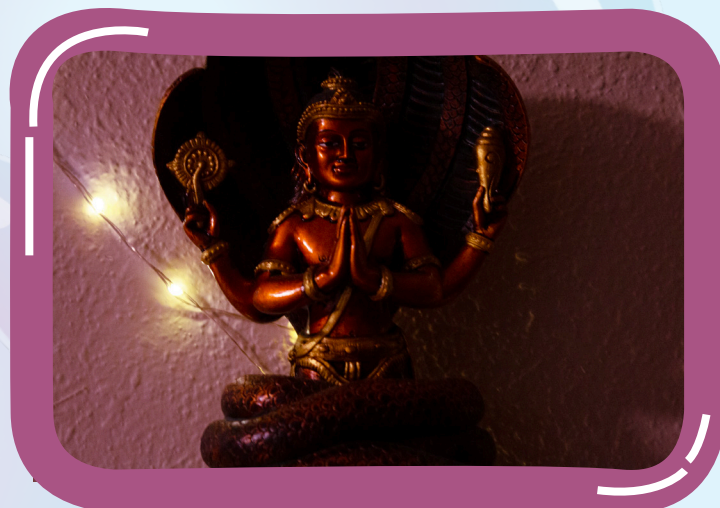
For Dr. Kulkarni, geriatric medicine is her one and only calling. In fact, she wouldn't switch career paths if she had the chance to go back in time: “I think I'm exactly where I need to be. So even if I had the power to go back, I would still probably pick the field that I'm in because I truly enjoy doing what I do” (Kulkarni). For her, the best part about being a geriatrician is seeing patients, who seem near impossible to treat, regaining their strength.

“Recently that I saw at the nursing home was a elderly lady who had a stroke because she had a bleeding brain, and she came to the nursing home completely paralyzed. She was unable to talk. She was unable to eat, so she had a feeding tube in her stomach. And then over time, though, she improved. So now she’s able to actually sit up. Now she’s able to swallow kind of purees, simple food” (Kulkarni).

Another rewarding aspect of the job, according to Dr Kulkarni, is helping people “transition to the end of life”, because while witnessing death is disheartening, it feels good to ensure that they are looked after in their final days and make sure that they know they are cared for. Death is an unfortunate, but inevitable part of life, and it is a geriatrician’s job to make certain the transition from the world of the living to the world of the dead is done with dignity and compassion. “They know that they’re loved, they’re supported, and they’re cared for by their family and the health care team, even if it’s transitioning to something like hospice” (Kulkarni).

Dr. Kulkarni was born in Karnataka, India to a pair of teachers. While education and studies were a big part of her young life, she was also very immersed in aspects of her culture like dance, music, and yoga. Over the course of her childhood, she was introduced to a mixture of both Ayurvedic and western medicine. For example, when she was ill, normally she would go to a doctor practicing western medicine. But sometimes, her parents would take her to an Ayurveda practitioner, who gave her herbal supplements. The John Hopkins Medicine website defines Ayurveda as “a natural system of medicine, originated in India more than 3,000 years ago” (“What is Ayurve-

da”). Ayurveda adopts a more subtle form of treatment focused on lifestyle choices like yoga and herbal remedies. When Dr. Kulkarni got older, she became very fascinated by biology, and later down the line, decided to go into internal medicine because of how it is an overview on multiple



parts of the body rather than specializing in just one. She then started a career at Kaiser Permanente. While working there, she came across multiple elderly people. Their health was overall worse than a younger person, and often , Dr. Kulkarni did not know how to help them. This led her to study geriatrics at Stanford University, so that she could cure their ailments in the future.

Dr. Kulkarni uses traditional Indian medicine regularly in her work along with western medicine. Dr. Kulkarni’s yoga instructor, Ganesh Balachandran Ph.D., notes that “Dr. Rani has a very unique approach. She’s a very highly skilled physician with an M.D. specialization in not just one, but in two areas- in internal medicine, as well as in geriatric medicine. She also has a rich tradition of yoga. ”. Balachandran distinguishes Western medicine from Ayurvedic, emphasizing that Western medicine is the stronger and more effective one of the two. However, it is “very interventional. It is

not a preventative system” (Balachandran). In other words, an intervention only works when a problem already exists. Another negative aspect of the western medicine is the unwanted side effects it usually causes. Ayurvedic medicine, on the other hand, is mainly about lifestyle changes, including changing your diet, doing yoga, and taking herbal Ayurveda supplements. The changes it makes are subtle, but they usually don't have negative side effects. It is used to prevent maladies from happening in the first place rather than stopping them. Because Dr. Kulkarni works with elderly patients, Ayurvedic medicine is especially useful, as the elderly's livers and kidneys don't work as well as a younger person's, so they are prone to side effects. Herbal medicine can be a real lifesaver in these situations. As an example, Dr. Kulkarni recalls a patient she has worked with in the past: “I had a lot of gut issues, and nothing was working. She had tried all medications. So I suggested a herbal triphala, it's ayurvedic medicine, and she did find relief.” She also shared that when patients come in with chronic back pain, but can't handle pain medication, she gets them to do simple yoga stretches, which are very helpful to the lower back. Dr. Kulkarni's integration of Ayurveda shows her thoughtful and holistic approach to managing health issues, particularly in the elderly population.



very hopeful for the future due to evolving technology. Before, people would have to drive up to buildings to get examined, but now quality care could be conducted through online calls, meaning the patient doesn't have to leave home. Considering how hard it is for the elderly to move around, this will take away a great burden for not only them, but also their caretakers. Not to mention thanks to social media, people are becoming more receptive to alternative medicine, like healthier diets, yoga, and meditation. Dr. Kulkarni noted that “there's so much more education, so much more awareness, and most importantly, people are all too hungry for knowledge and ready for change”. Newer generations are significantly more open to multiple ways to better their health, which will come in handy when they are older, and more burdened with health problems. She also stated how she hopes that more younger generations plan to be geriatricians when they grow up, considering the steadily growing number of the elderly population, or at least be aware of the problem. There is getting to be far too many patients for providers to care for, which won't sustain humanity in the long run. Dr. Kulkarni challenges us to take action: “How can you, as a citizen, be a part of the solution or help [these people]?”



When asked about the future of geriatrics, Dr. Kulkarni said that she is actually

The background features a light blue gradient with two large, dark blue triangles meeting at a diagonal line. Scattered across the scene are several translucent purple spheres of varying sizes, each with a white highlight and a white crescent-shaped shadow on its surface, giving them a 3D effect.

About the Author