

Living Old

1 x 60



International

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For the first time in history, people over 85 are now the fastest growing segment of the US population. While medical advances have enabled an unprecedented number of people to live longer, healthier lives, for millions of elderly, living longer can also mean a debilitating physical decline that often requires an immense amount of care. And just as more care is needed, fewer caregivers are available to provide it. FRONTLINE producers Miri Navasky and Karen O'Connor investigate this national crisis and explore the new realities of aging in America in *Living Old*.

"We're on the threshold of the first-ever mass geriatric society," says Dr. Leon Kass, former chairman of the President's Council on Bioethics. "The bad news is that the price that many people are going to be paying for [an] extra decade of healthy longevity is up to another decade of anything but healthy longevity. ... We've not yet begun to face up to what this means in human terms."

Vast numbers of the elderly are living lives that neither they nor their families ever prepared for or imagined. Through the perspectives of the elderly, their families and the doctors and nurses who care for them, *Living Old* explores the modern realities of aging in both urban and rural America, taking viewers on an intimate and powerful journey that raises new and troubling concerns about what it really means to grow old.

For millions, living longer means coping with multiple chronic illnesses, increasing frailty and prolonged periods of dementia, which may last for years and sometimes even decades. Only one in 20 people over the age of 85 is still fully mobile, and roughly half will develop some form of dementia.

"Everything started to go at 82 years," says Rose Chanes, now 96 and in assisted living. "I don't hear, I don't see. ... You've got to be crazy to call it a blessing to live like this. ... I call it a curse."

For the elderly and their families, the emotional toll is often severe. In an attempt to lessen the burden on families and to ensure that their wishes are fulfilled, many elderly write advance directives, such as living wills, powers of attorney and do-not-resuscitate orders.

As the nation ages, many believe that health care systems, with their focus on treatments and cures, are woefully ill-equipped to handle the new realities of long-term care. "Nobody's bothered to think about what the repercussions are of trying to keep people alive longer and longer," says Dr. David Muller, co-founder of Visiting Doctors, a program that provides primary care to homebound elderly in New York City. With families smaller and more dispersed than ever before, and more doctors choosing medical specialties over family medicine, many fear that we are on the brink of a national crisis in care.

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CREDITS

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