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THE BODY CONTENT OF VITAMINE D AS A MOTIVATIONAL FACTOR FOR THE ACTIVITY AMONG THE ELDERLY

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Osteoporosis is a metabolic bone disease characterised by decreased bone mass and strength. Common in the elderly population, the disease is associated with numerous health problems eventually leading to high mortality and disability. The pathophysiology is associated with vitamin D deficiency and reduced physical activity. In addition to physical activity, a sufficient amount of calcium and vitamin D intake is vital for the bone health. People with low levels of vitamin D in the body are at risk for fractures and associated complications. The solution may be the vitamin D replacement and adequate physical activity. We believe the elderly population may benefit from proper motivation and awareness of vitamin D deficiency, osteoporosis, healthy lifestyle, maintenance of good physical and mental condition and lifelong learning.

DEVELOPING A CULTURALLY ACCEPTABLE END OF LIFE SURVEY (THE VOICES-ESRD/THAI QUESTIONNAIRE) FOR EVALUATION HEALTH SERVICES PROVISION OF OLDER PERSONS WITH ESRD IN THAILAND

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Background: The development of a culturally acceptable end of life survey (the VOICES-ESRD/Thai questionnaire) is an essential instrument for evaluation health service provision of older persons with ESRD in Thailand. The focus of the questionnaire was on symptoms, symptom control and the health care needs of older people with ESRD who are managed without dialysis.

Objective: The objective of this study was to develop and adapt VOICES to make it suitable for use in a population survey in Thailand.

Methods: The mixed methods exploratory sequential design was focused on modifying an instrument.

Data collection: A cognitive interviewing technique was implemented, using two cycles of data collection with a sample of 10 bereaved carers and a prototype of the Thai VOICES questionnaire. Qualitative study was used to modify the developing a culturally acceptable end of life survey (the VOICES-ESRD/Thai questionnaire).

Data analysis: The data were analysed by using content analysis.

Results: The revisions to the prototype questionnaire were made. The results were used to adapt the VOICES questionnaire for use in a population-based survey with older ESRD patients in Thailand.

Conclusions: A culturally specific questionnaire was generated during this second phase and issues with questionnaire design were rectified.