

# kakopofleyrfighfot"cnteyt peu vay gipt⊙kij grvpoy⊙q "K" lēpt app∨v"c ii"tu app vp"or ilip apDaght "Wicgije eyr Kv xk( 165' Rood' v'o gneyntegrin 'K' juk depuany kg

ults: The intervention group, under the HQP model, demonstrated a statistically rates compared to the control group (p < 0.05). Additionally, patients in the HQP groal readmissions and reported higher levels of overall well-being and satisfaction with

clusion: The HQP model, with its multidimensional approach to patient care, signi, nong long-term ill older patients. This model, emphasi: ing not just medical but also publications of care, or ers a more erective strategy for managing the complex needs ings advocate for the integration of the HQP model into standard healthcare practices and quality of life in long-term care settings.

**Keywords:** Holistic quality of life; HQP model; Long-term illness; Older adults; Mortality reduction; Integrated care

## Introduction

e increasing prevalence of long-term illnesses among older adults presents a signi cant challenge to global healthcare systems. ese chronic conditions o en lead to higher mortality rates, reduced quality of life, and increased healthcare costs. Traditional medical approaches, while e ective in managing speci c health issues, may fall short in addressing the comprehensive needs of this demographic. e Holistic Quality of Life (HQP) model emerges as a promising approach to bridge this gap, aiming to reduce mortality rates and enhance the overall well-being of long-term ill older patients. is study explores the e cacy of the HQP model in achieving these objectives [1].

## Background and signi cance

As the population ages, a larger segment is living with chronic diseases such as heart disease, diabetes, and COPD. is trend necessitates a healthcare approach that goes beyond conventional medical treatment. e HQP model o ers a more nuanced approach, integrating medical care with psychological, social, and spiritual support. is model is predicated on the understanding that the well-being of older adults with long-term illnesses is in uenced by a complex interplay of various factors [2,3].

**Objective:** e primary objective of this research is to evaluate the impact of the HQP model on reducing mortality rates among long-term ill older adults. Secondary objectives include assessing improvements in patients' overall health status, hospital readmission rates, and their self-reported quality of life [4].

**e HQP model:** e HQP model is characterized by its holistic approach, focusing not just on physical health but also encompassing mental, social, and spiritual dimensions. is integrated care model is designed to cater to the diverse and complex needs of older adults,

promoting not only longevity but also an enhanced quality of life [5].

**Research signi cance:** is study is signi cant as it provides insights into the e ectiveness of a holistic care approach in managing long-term illnesses among older adults. By evaluating the HQP model, the research aims to contribute to the development of more e ective health care strategies for this growing population segment, potentially in uencing policy and practice in geriatric care. e stage for a detailed investigation into the e ectiveness of the HQP model. It outlines the background, objectives, and signi cance of the research, highlighting the need for a holistic approach in the care of long-term ill older adults [6].

## **Results and Discussion**

#### **Results**

e implementation of the Holistic Quality of Life (HQP) model in the care of long-term ill older patients yielded signi  $\,$  cant  $\,$  ndings:

**Mortality rates:** e mortality rate in the HQP group was signi cantly lower than in the control group. e HQP group showed

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healthcare systems should consider adopting holistic care models like HQP to better meet the complex needs of this growing population segment. However, it is important to acknowledge the limitations of the study, including its scope and duration. Future research with larger sample sizes and over extended periods is recommended to validate and expand upon these ndings.

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None

### Con ict of Interest

None

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