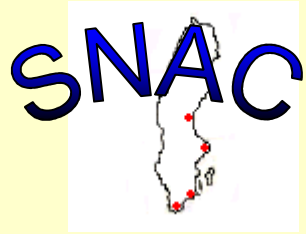


Old-age mortality depending on disability level and mode of long-term care

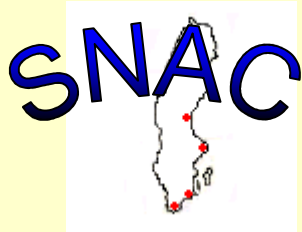
Lagergren M, Thorslund M

Presentation at REVES 2010, Havana, May 21



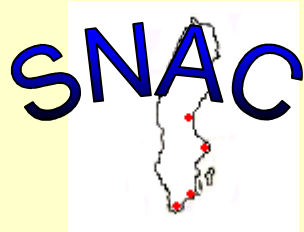
SNAC

Swedish National study on Ageing
and Care



Basic purpose of SNAC

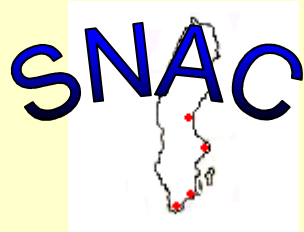
- describe the ageing process from different aspects – the development of health, functional and cognitive ability, social and economic situation etc.
- monitor the total consumption of health care and social services of the elderly population in the area



Four different areas

- Five municipalities in Region Skåne (Eslöv, Hässleholm, Malmö, Osby, Ystad)
- Karlskrona municipality in Blekinge
- Kungsholmen district, Stockholm
- Municipality of Nordanstig

All four areas follow the same design and use the same core protocol



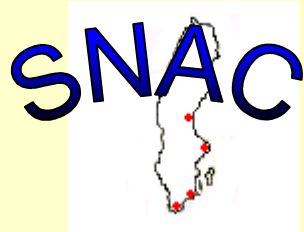
Basic study design

- *Population perspective*

in order to describe the life situation of the elderly and the ageing process

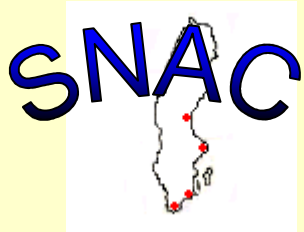
- *Care system perspective*

in order to describe the functioning of the system of health and social care for the elderly in relation to their needs

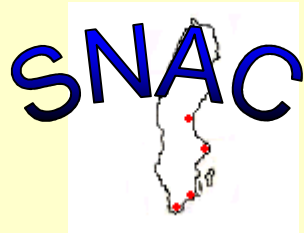


Data from SNAC- Kungsholmen 2001 - 2005

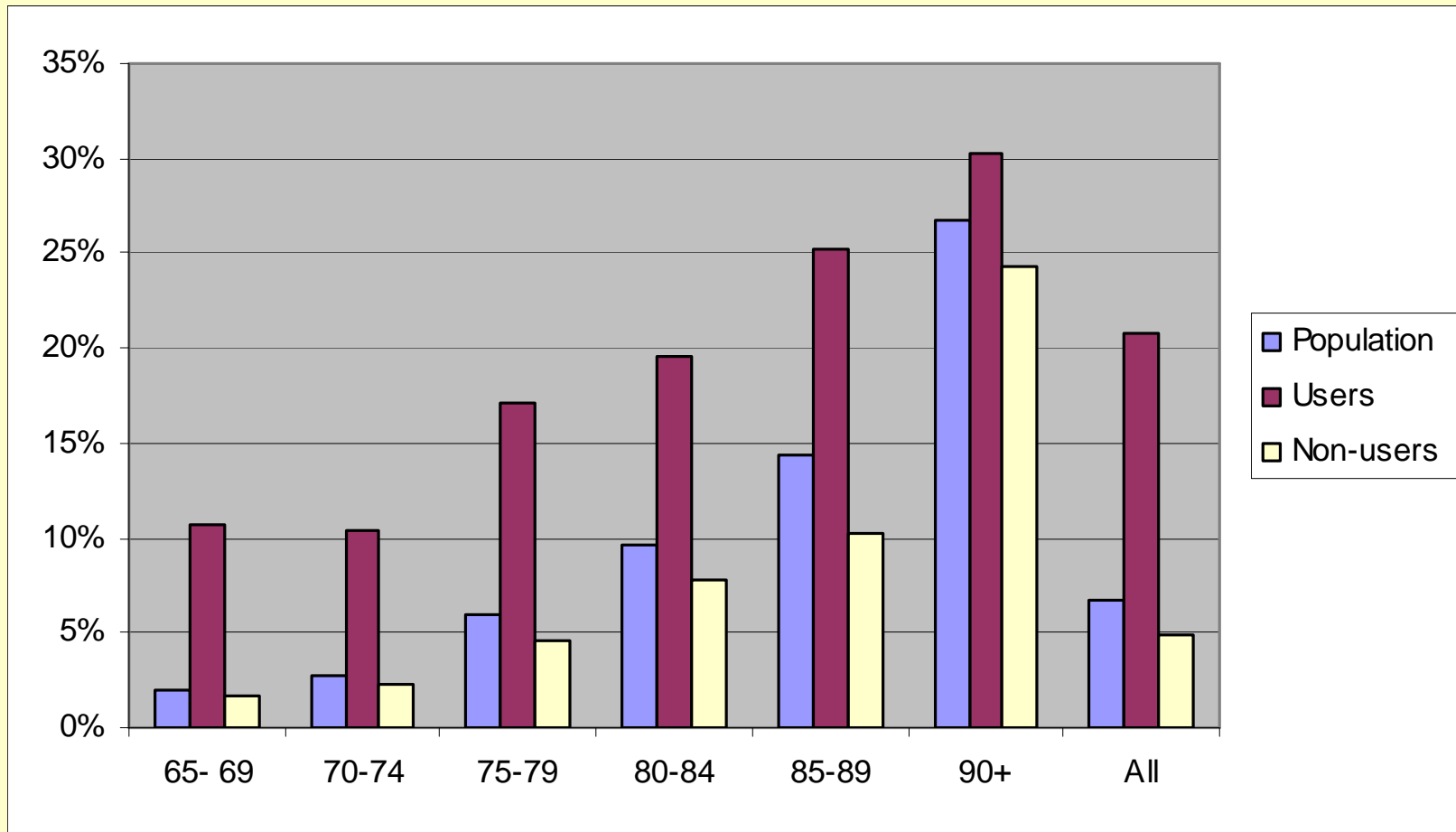
- Disability measured by the SNAC-index – compound measure of ADL-dependency, cognitive disability, mobility disability and incontinence
- Aggregation into five disability classes
- Mode of long-term care: care in the community (home help, home health care), institutional care

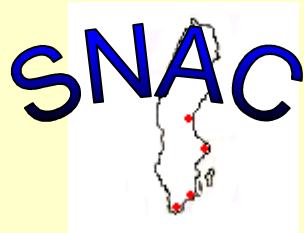


- Ca 5 000 observations, collected 2001- 2005
- Disability level measured March 1st every year
- Mortality controlled by death registers

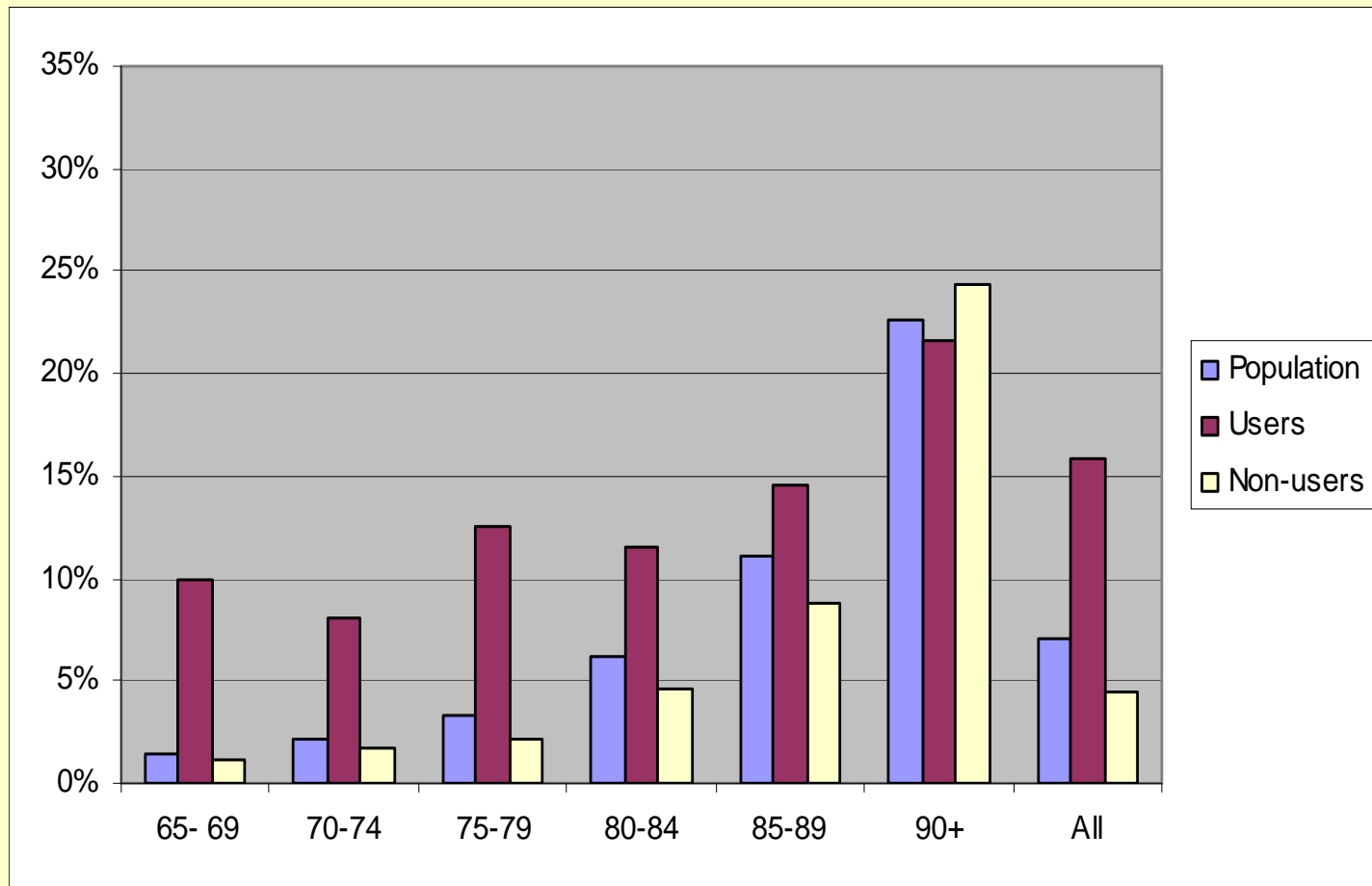


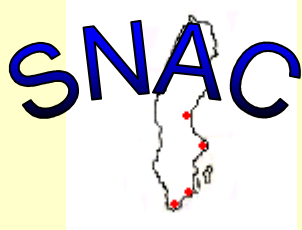
Mortality per age-group – comparison of long-term care recipients and population, men



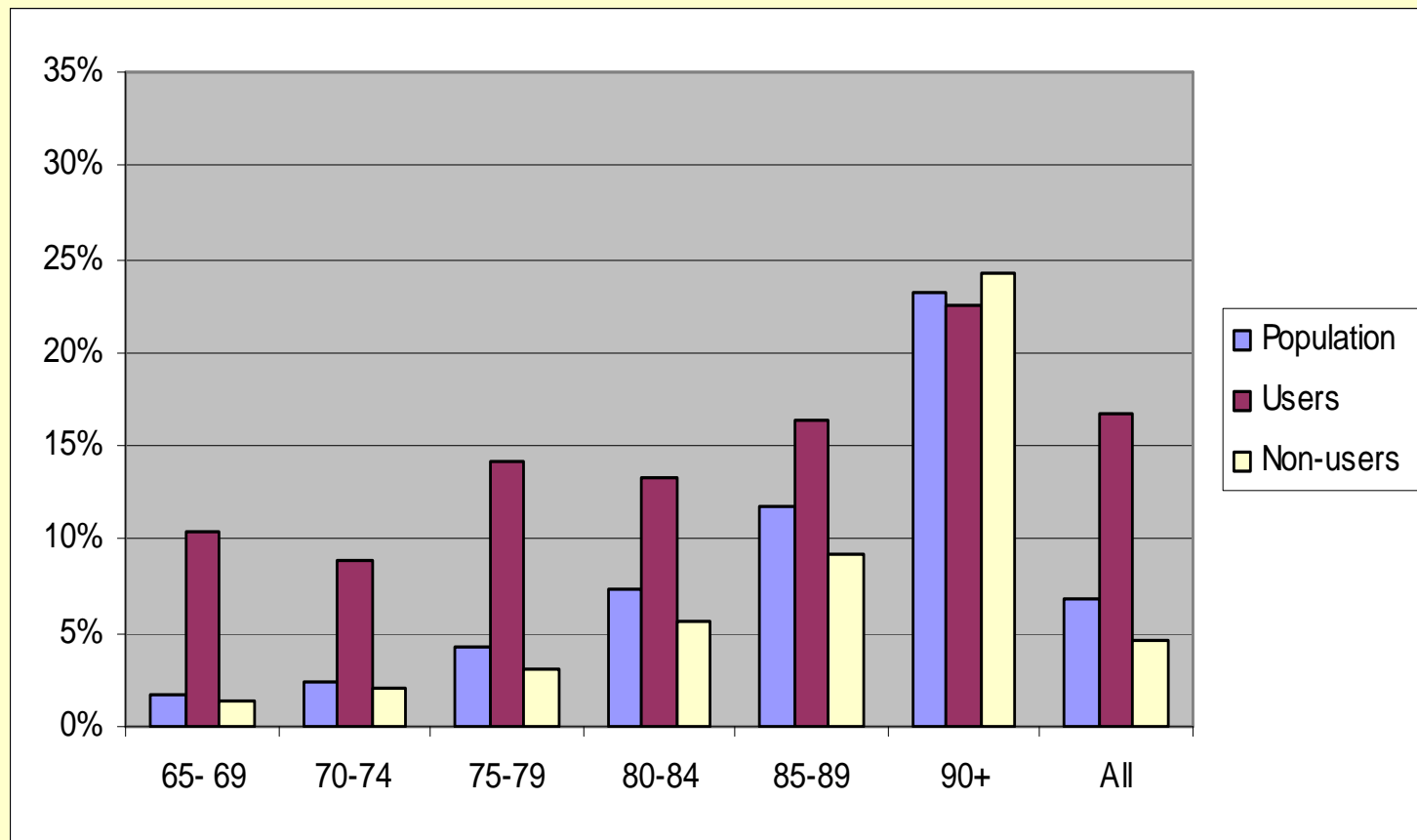


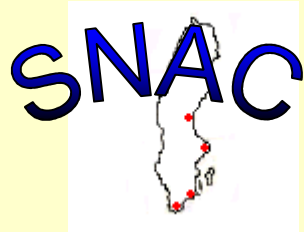
Mortality per age-group – comparison long-term care recipients and population, women



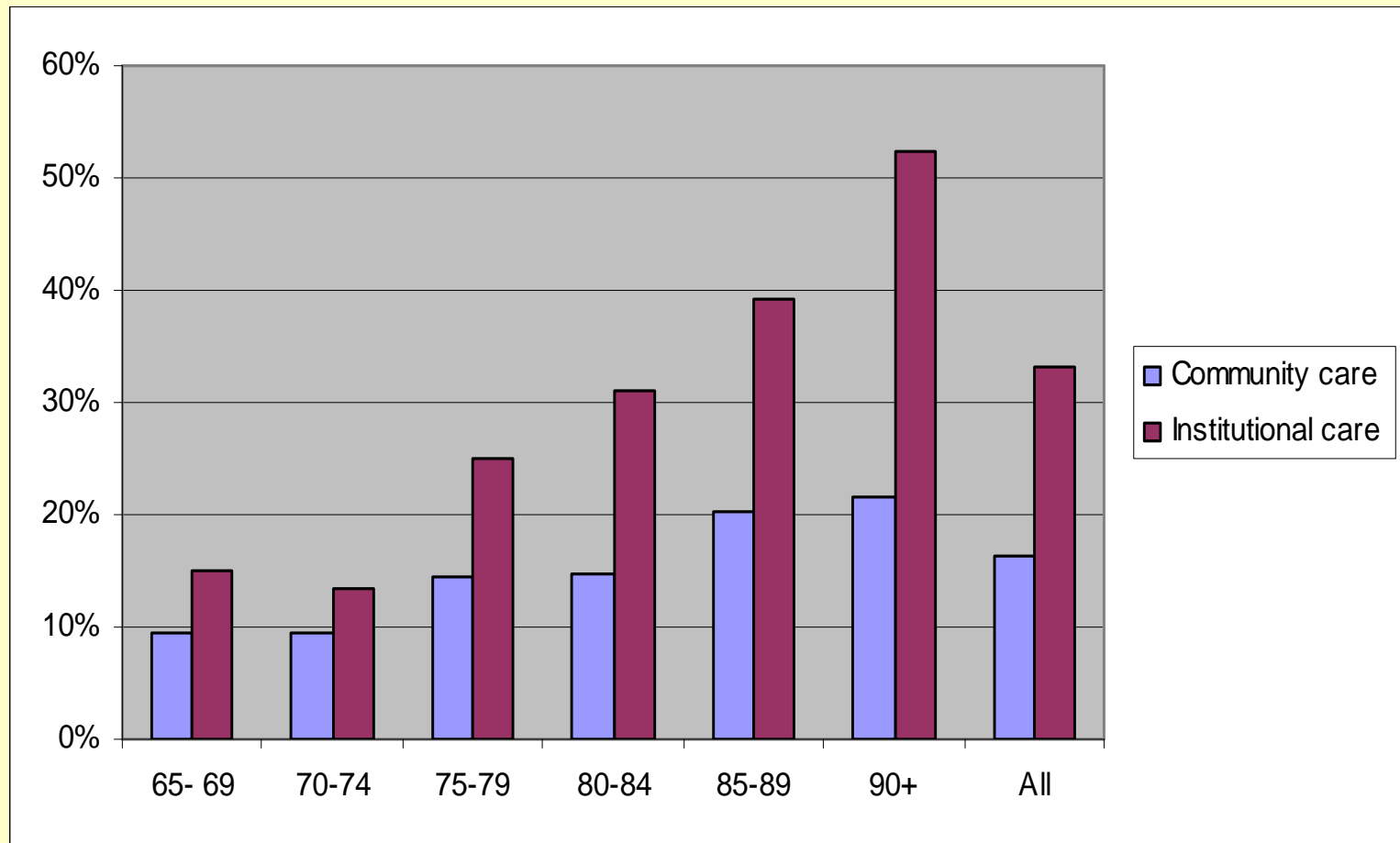


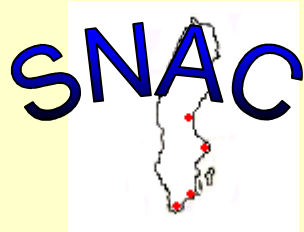
Mortality per age-group – comparison of long-term care recipients and population, all



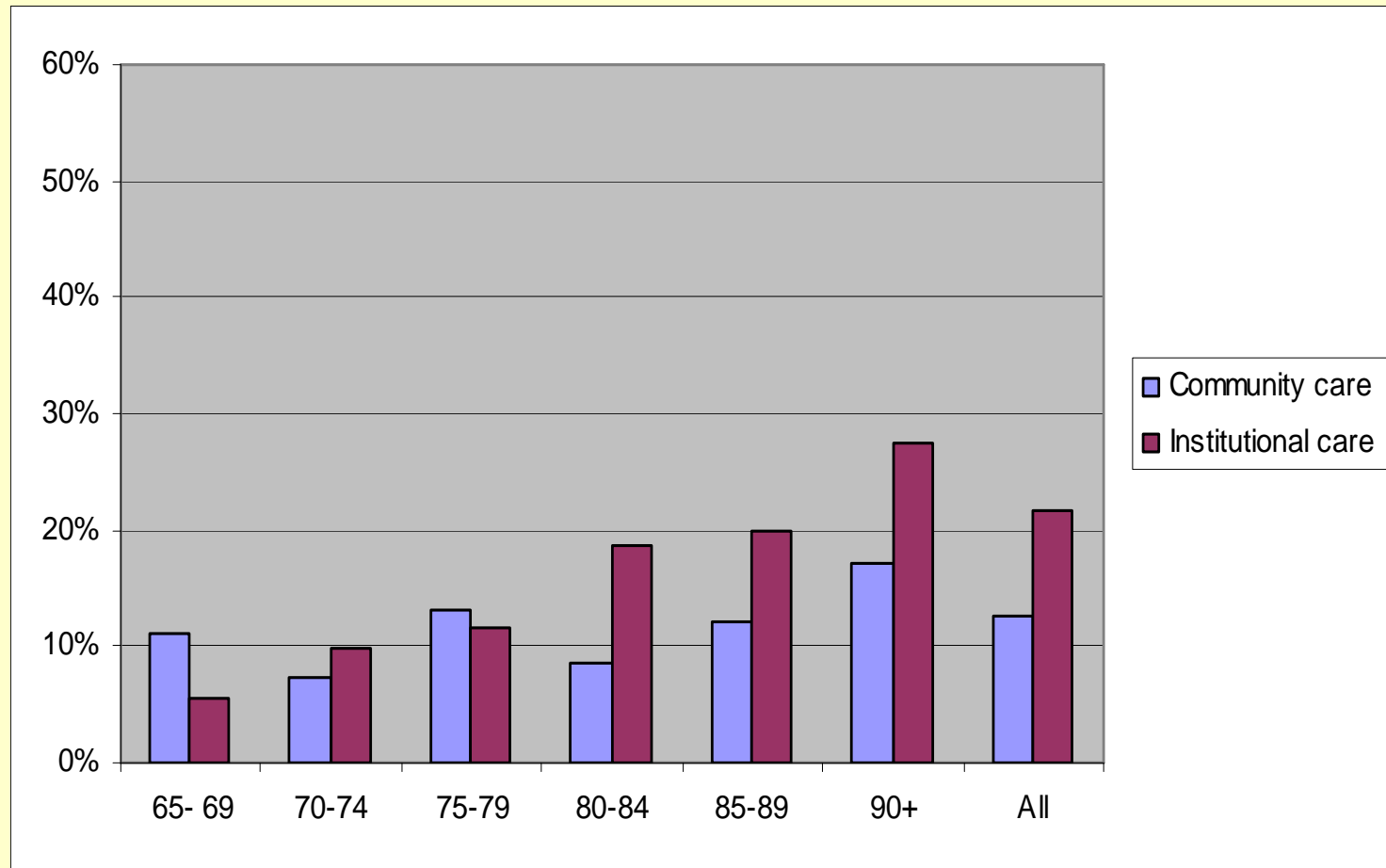


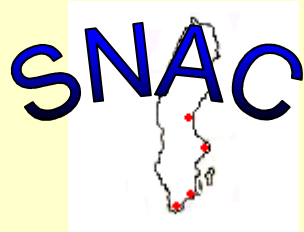
Mortality per age-group – comparison of recipients of community care and institutional care, men



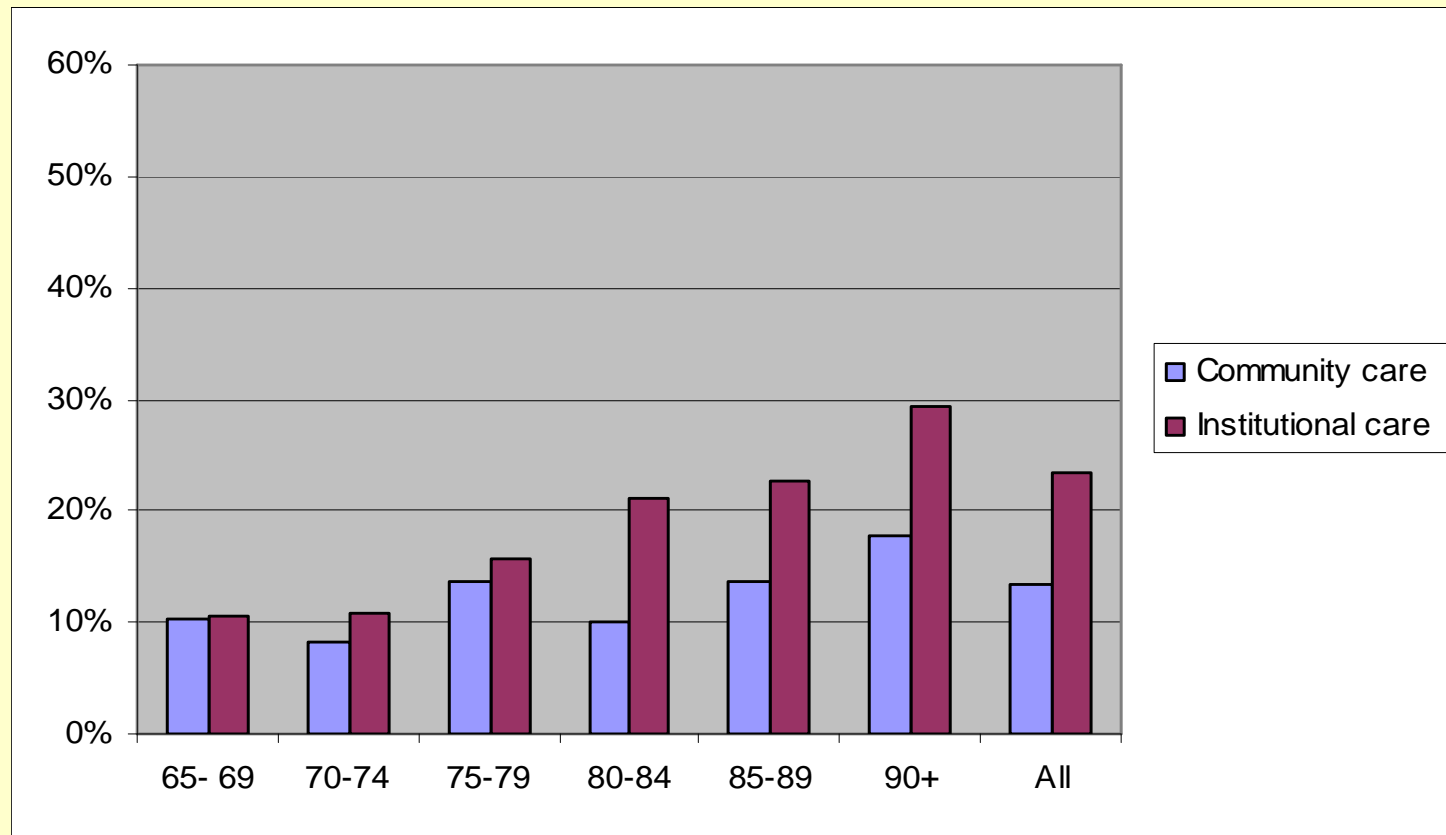


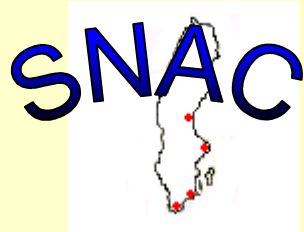
Mortality per age-group – comparison recipients of community care and institutional care, women



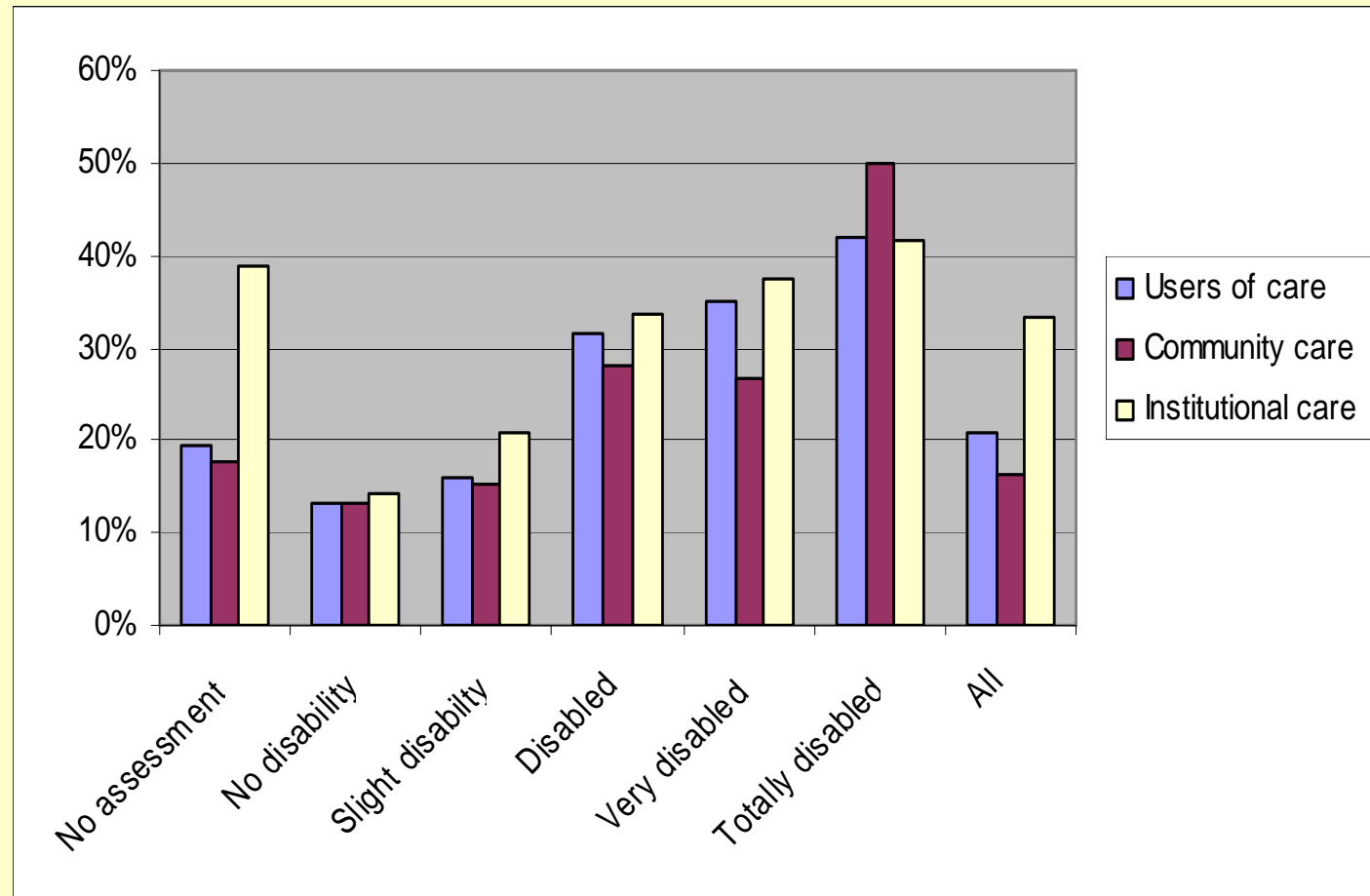


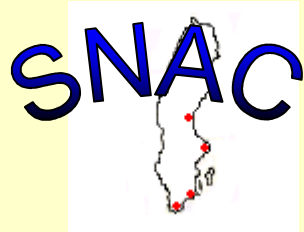
Mortality per age-group – comparison recipients of community care and institutional care, all



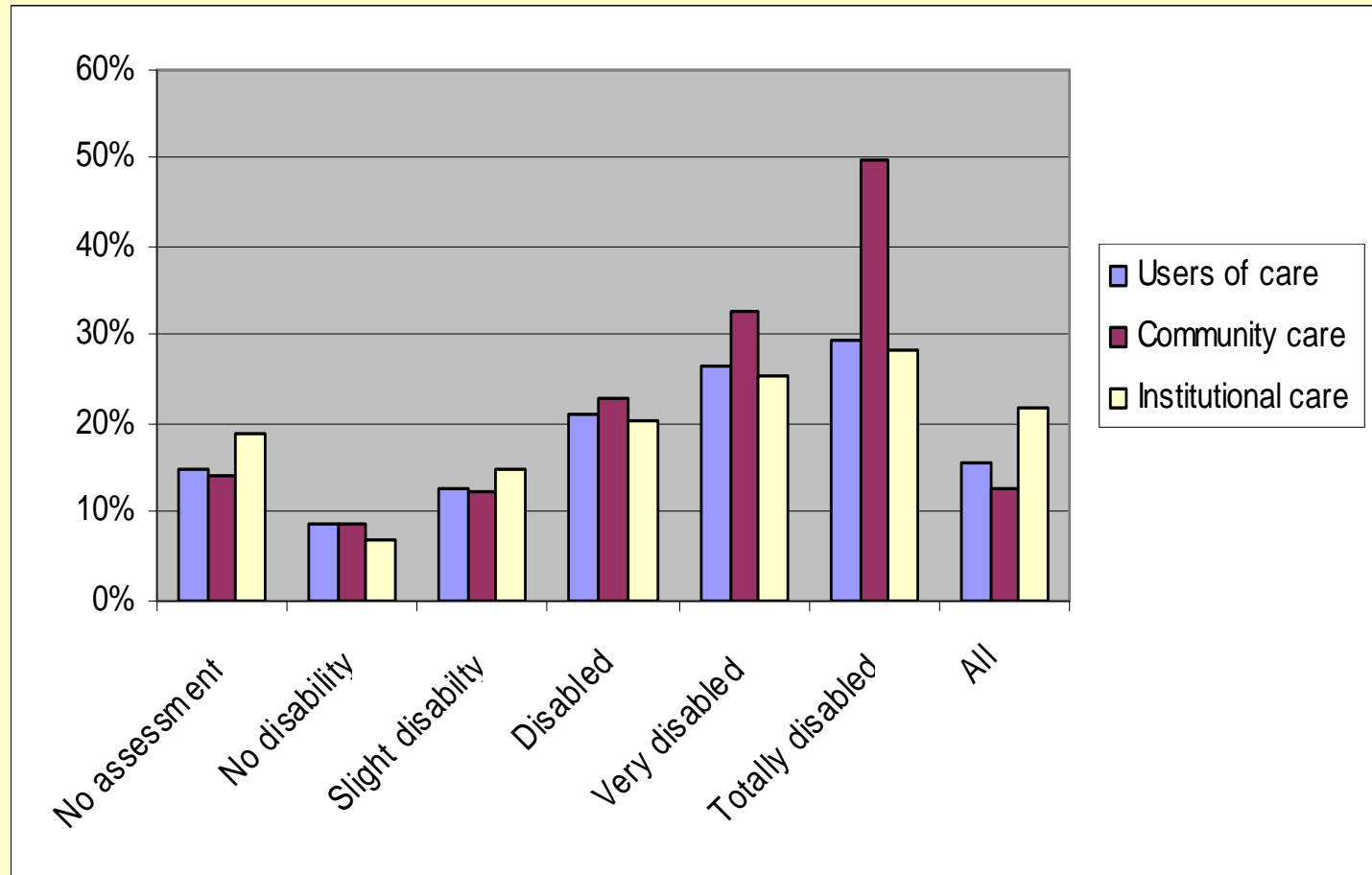


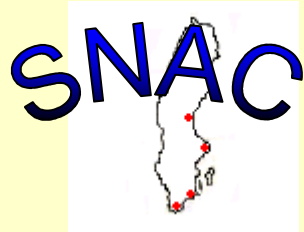
Mortality by degree of disability, men



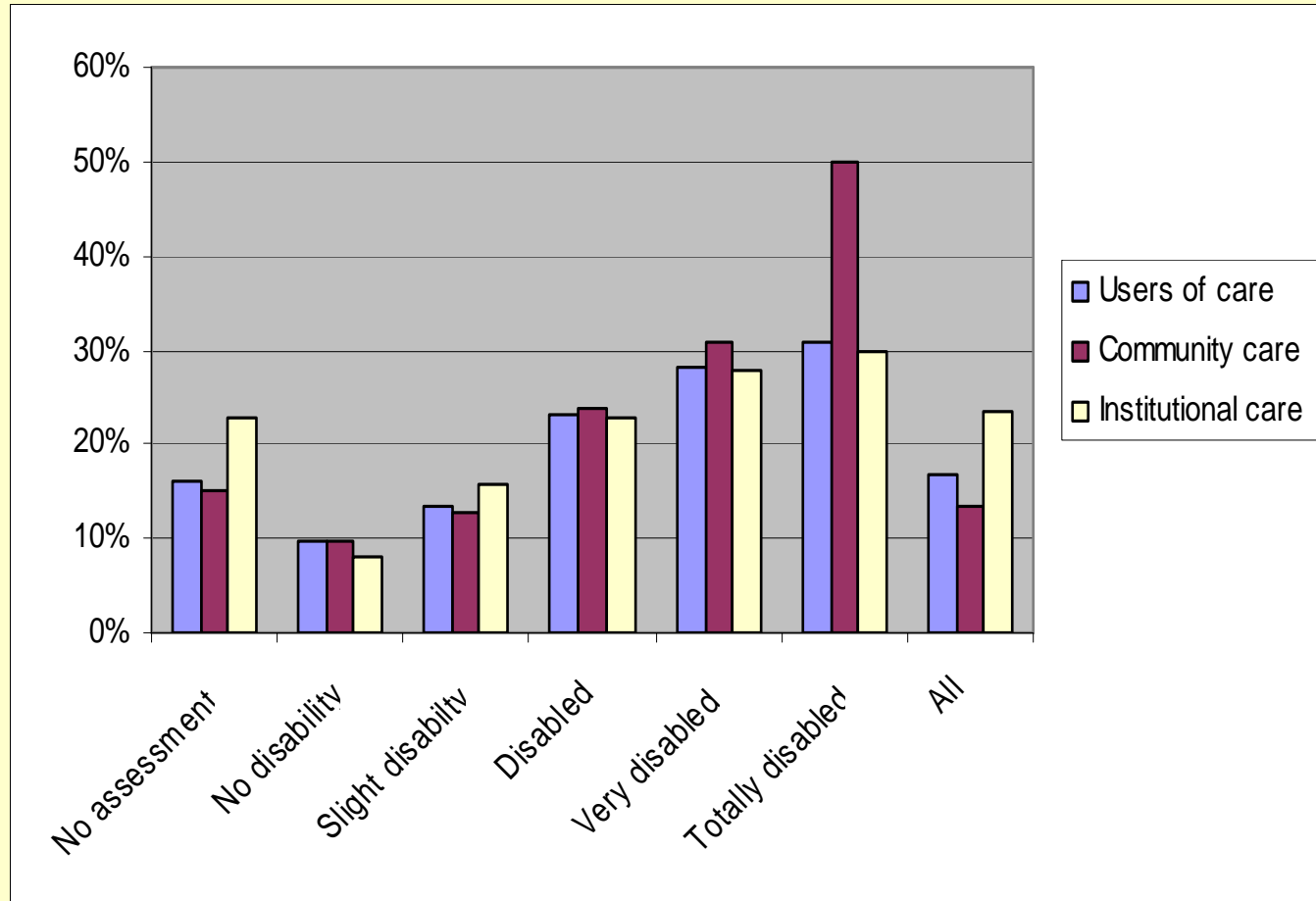


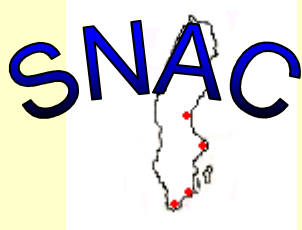
Mortality by degree of disability, women





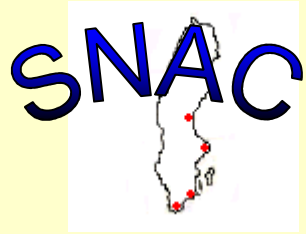
Mortality by degree of disability, all





Conclusions

- Recipients of long-term care and services have a much higher mortality than the rest of old people. The difference is larger for younger persons than for older
- For recipients of long-term care mortality is strongly connected to disability
- There is also a connection to mode of care – but patterns differ between genders



That's all folks – thank you for listening to
the end!!