Active Life Expectancy by Chewing Ability: The Case of Elderly Taiwanese

Mandy, Meng-Fan Li Harvey, Hui-Sheng Lin Yasuhiko Saito Shih Chien University, Taipei, Taiwan Chung-Shen Medical University, Taichung, Taiwan Nihon University, Tokyo, Japan

Paper prepared for the REVES @ 20: Accessing the Past, Looking to the Future, May 7-9, 2008, Manila, Philippines

Purpose of the Study

To examine effect of chewing ability on health expectancy on the elderly in Taiwan

Previous Research: ALE by Chewing Ability

- Saito and Nasu (2006)
 - □ Using number of teeth (20+vs19-) and chewing ability (able/unable to chew the list of food from hardest to soft food)
 - □ Data is from the Nihon University Japanese Longitudinal Study of Aging (NUJLSOA), which is conducted in 1999, 2001, 2003 with 5,000 65+ elderly in 1999.
 - □ Results showed that both number of teeth and ability to chew have the effect on the active life expectancy

Methods - Data & Survey Design

Data

Surveys of Health and Living Status of the Middle
Aged and Elderly in Taiwan (SHLSE)

Survey design

- Nationally representative multi-stage probability sampling method
- □ Population: Age 60 and over in 1989 in Taiwan
- □ Longitudinal surveys

Sampling and Response Rates

Content	1 st wave	2 nd wave	3 rd wave	4 th wave
Survey year	1989	1993	1996	1999
Interview months	4-11	4-12	4-12	4-12
No. or respondents (Age of respondents)	4049 (60+)	3154 (64+)	2669 (67+)	2310 (70+)
Deceased cases (Cumulate N.)	-	590	470 (1069)	426 (1488)
Response rates (%)	91.8%	91.2%	89.3%	90.8%

Definition of Health

- 6 activities: Activity of Daily Living (Bathing) and Instrumental Activities of Daily Living (5 activities: Shopping, managing money, using phone, taking public transportation, do heavy house work)
- Inactive: At least one activity with a lot of difficulty or unable to perform
- Active: otherwise

Definition of Chewing ability

- Question (1989)
 - How well can you chew (with denture)? –self-rated chewing ability
- Levels of chewing ability

chewing ability	n	recode	n
1=very good	500	anad	1436
2=good	936	good	1430
3=so so	1179		
4=bad	863	bod	2581
5=very bad	102	bad	2301
6=soft food only	437		
missing	32		

Distribution of sample person by sex and chewing ability

chewing abilbiy sexes	good	bad	Total
male	919	1371	2290
	(40.1%)	(59.9%)	(57.0%)
female	517	1210	1727
	(29.9%)	(70.1%)	(43.0%)
Total	1436	2581	4017
	(35.8%)	(64.3%)	(100%)

Method of computing ALE

- The Interpolation Markov Chain (IMaCh)
 - □ Able to deal with <u>different interval lengths between surveys</u> (1989, 1993, 1996, 1999)
 - □ Calculate Total Life Expectancy, Active Life Expectancy and Inactive Life Tables with standard error

9

Chewing Ability – both sex

LE by chewing ability

Age	GO	OD	BAD		Statistical
	LE	SE	LE	SE	Test
60	20.8	0.42	19.2	0.28	ns
65	16.9	0.39	15.4	0.24	ns
70	13.4	0.38	12.1	0.22	ns
75	10.4	0.36	9.4	0.21	ns
80	7.9	0.35	7.2	0.22	ns
85	6.0	0.33	5.5	0.23	ns
90	4.6	0.32	4.2	0.24	ns

^{*} p<.05 **p<.01

ALE by chewing ability

Age	GO	OD	BA	ND	Statistical
	ALE	SE	ALE	SE	Test
60	15.2	0.30	12.6	0.24	**
65	11.4	0.27	9.1	0.19	**
70	8.1	0.24	6.2	0.15	**
75	5.4	0.22	3.9	0.13	**
80	3.4	0.19	2.3	0.12	**
85	2.0	0.16	1.3	0.10	**
90	1.1	0.13	0.7	0.07	*

^{*} p<.05 **p<.01

IALE by chewing ability

Age	GO	GOOD		ND	Statistical
	IALE	SE	IALE	SE	Test
60	5.7	0.27	6.5	0.20	ns
65	5.5	0.27	6.3	0.18	ns
70	5.3	0.28	5.9	0.18	ns
75	5.0	0.28	5.5	0.18	ns
80	4.5	0.29	4.9	0.20	ns
85	4.0	0.29	4.2	0.21	ns
90	3.5	0.29	3.6	0.23	ns

^{*} p<.05 **p<.01

Chewing Ability – FEMALES

LE by Chewing Ability: Females

Age	GOOD		BAD		Statistical
	LE	SE	LE	SE	Test
60	23.2	0.69	20.7	0.39	*
65	18.8	0.66	16.5	0.34	*
70	14.7	0.63	12.7	0.31	*
75	11.2	0.59	9.6	0.30	ns
80	8.3	0.55	7.1	0.30	ns
85	6.1	0.50	5.3	0.30	ns
90	4.5	0.45	3.9	0.30	ns

^{*} p<.05 **p<.01

ALE by chewing ability: Females

Age	GO	OD	BA	AD	Statistical
	ALE	SE	ALE	SE	Test
60	14.4	0.46	11.5	0.35	**
65	10.4	0.41	7.9	0.26	**
70	7.0	0.35	5.0	0.19	**
75	4.4	0.29	2.9	0.16	**
80	2.5	0.24	1.6	0.13	*
85	1.3	0.18	8.0	0.10	ns
90	0.7	0.12	0.4	0.07	ns

^{*} p<.05 **p<.01

Chewing Ability – MALES

LE by chewing ability: Males

Age	GOOD		BAD		Statistical
	LE	SE	LE	SE	Test
60	19.6	0.52	18.1	0.39	ns
65	16.0	0.49	14.6	0.33	ns
70	12.8	0.47	11.6	0.30	ns
75	10.0	0.46	9.1	0.30	ns
80	7.8	0.46	7.0	0.31	ns
85	6.0	0.45	5.5	0.32	ns
90	4.7	0.44	4.4	0.35	ns

^{*} p<.05 **p<.01

ALE by chewing ability: Males

Age	GOOD		BAD		Statistical
	ALE	SE	ALE	SE	Test
60	15.6	0.40	13.5	0.34	**
65	12.0	0.36	10.1	0.27	**
70	8.9	0.34	7.2	0.23	**
75	6.2	0.32	4.9	0.21	**
80	4.2	0.30	3.1	0.19	**
85	2.6	0.27	1.8	0.18	**
90	1.6	0.23	1.0	0.15	*

^{*} p<.05 **p<.01

Summary

	Life Expectancy	Active Life Expectancy	Inactive Life Expectancy
Both Sexes	ns	Significant	ns
Females	Significant (60-70)	Significant (60-80)	ns
Males	ns	Significant (all ages)	ns

Discussions: Both Sexes

- Statistically significant effect of chewing ability on active life expectancy for both sexes combined
 - □ Elderly with good chewing ability are expected to have 2 more years of ALE at age 60
- But no significant effect of chewing ability on life expectancy and inactive life expectancy
 - □ Although the differences are not statistically significant for those with good chewing ability have 1.6 more years live and about 1 year less inactive life at age 60

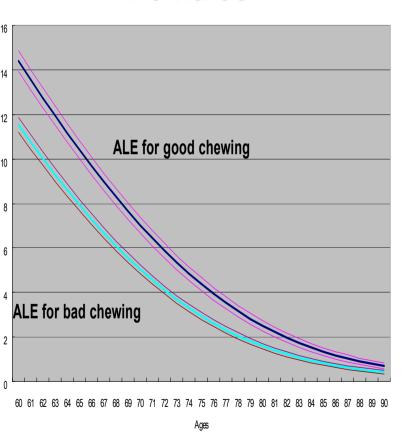
2008/05/08 **2**°

Discussion: by sex

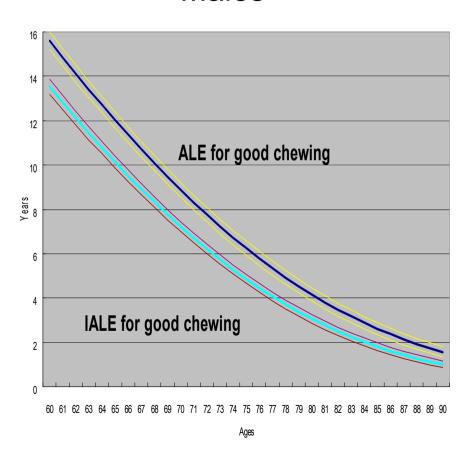
- For females: Differences in life expectancies and active life expectancies are statistically significant at younger age groups by chewing ability
 - □ For those with good chewing ability: 3 more years of active life expectancy
- For males: Only differences in active life expectancies are significant by chewing ability
 - □ For those with good chewing ability: 2 more years of active life expectancy

ALE by chewing ability for the elderly

Females



Males



Conclusion

- We found similar results with the Japanese study. Keeping a good chewing ability seems to be good for health of the elderly Taiwanese.
- The effect of chewing ability on active life expectancies seems to be larger for females (3 more years vs. 2 more years).

Future Study

add data from the 5th wave of the survey conducted in 2003

2008/05/08 **25**

Acknowledgements

Bureau of Health Promotion, DOH, Taiwan, R.O.C.

