



Risk factor change and disability.

A multistate approach of the US
Health and Retirement Survey

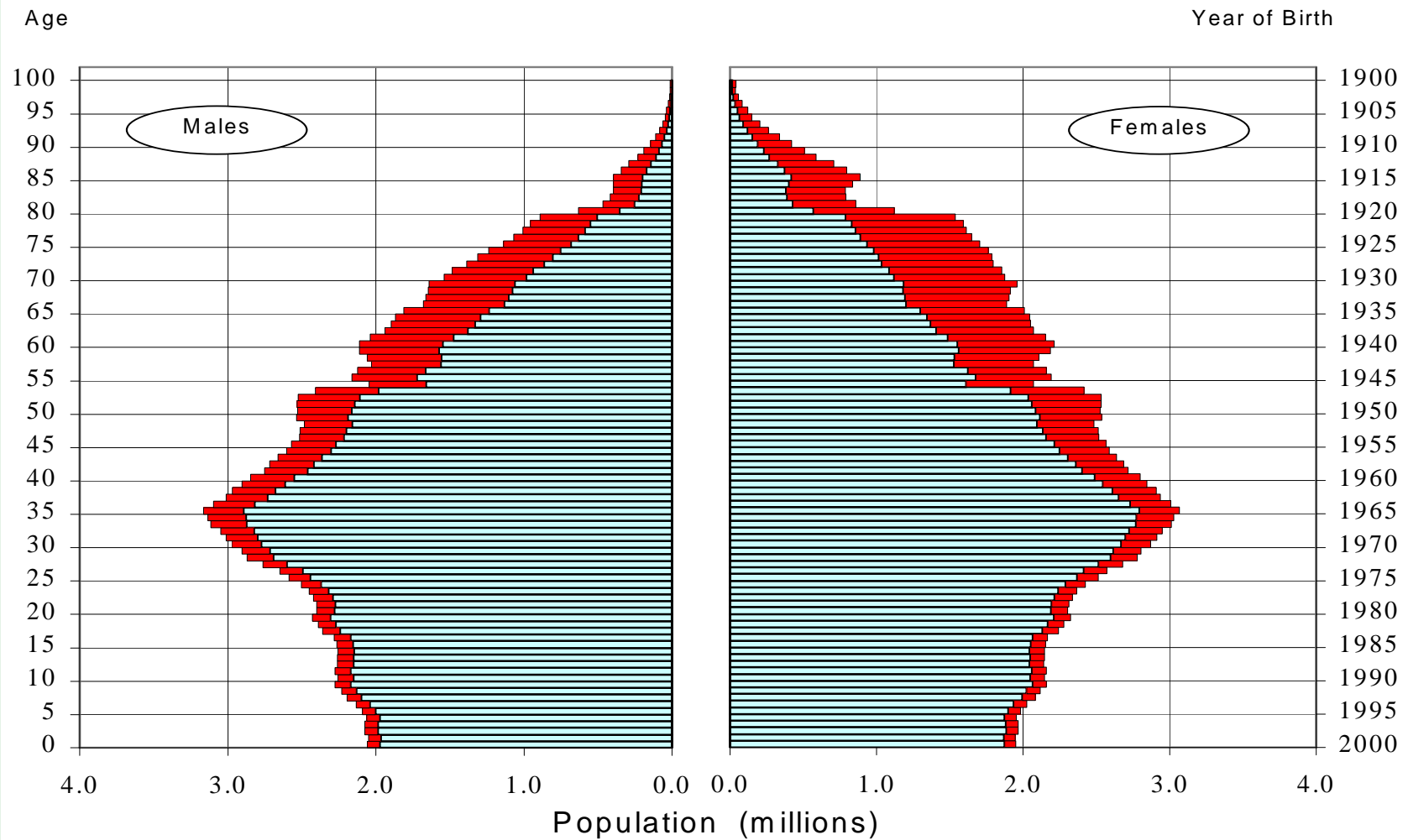
Mieke Reuser,
Luc Bonneux
Frans Willekens

royal dutch
academy of
sciences



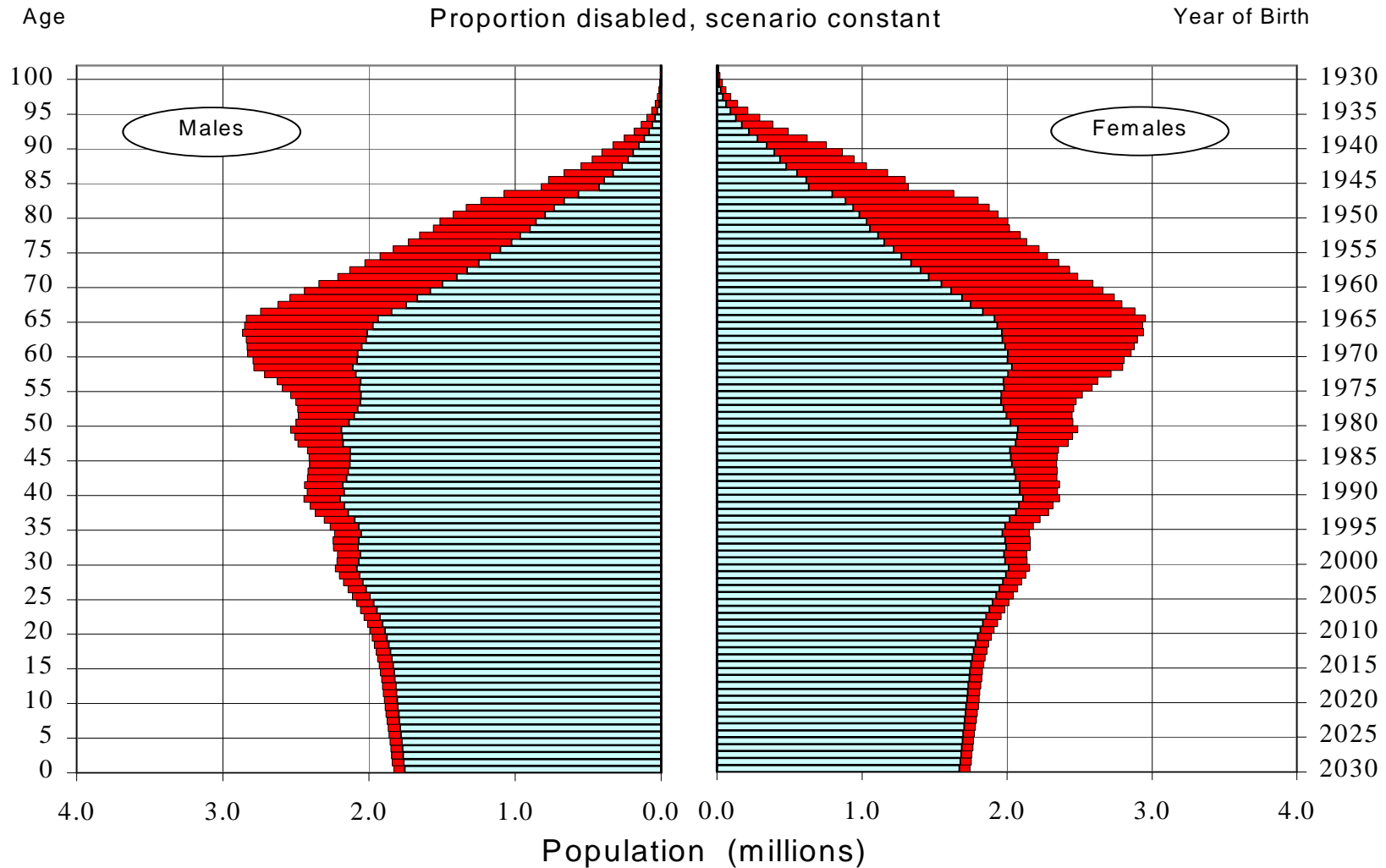


European Union, 2000, Total and Disabled Population



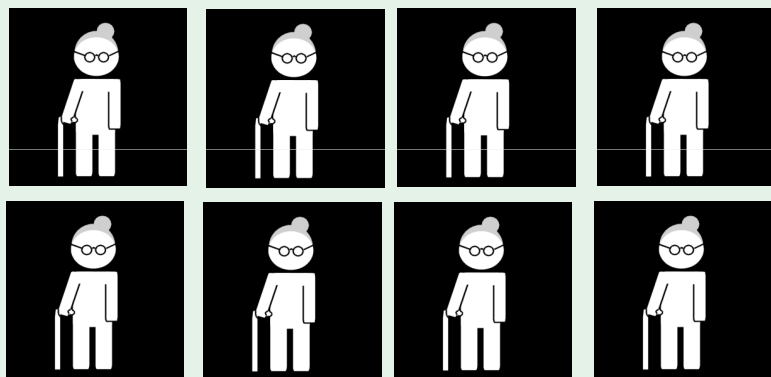
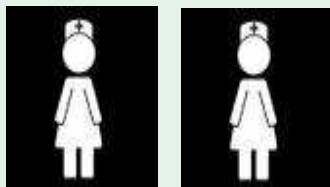


European Union, 2030, Total and Disabled Population

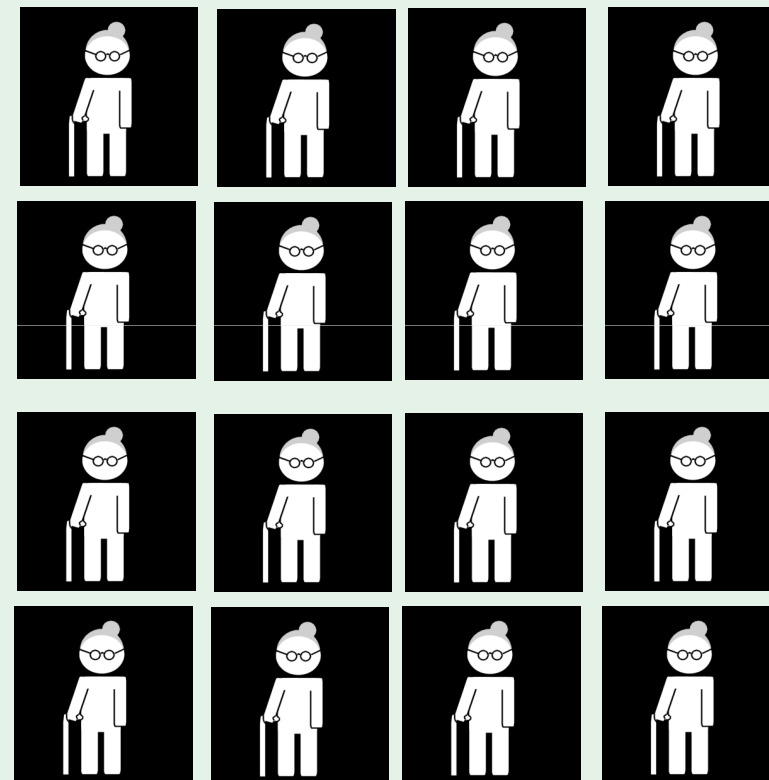
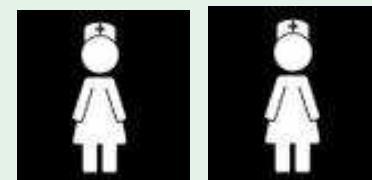




2008



2040



Source: Netherlands Bureau for
economic policy analysis (CPB)



The question

- What is the effect of risk factor change on disability status in the life course?
 - Smoking (never, quit, continuing)
 - BMI (self report)
 - Levels of education
 - (Age)





Data: Health and Retirement Survey (HRS and AHEAD)

- United States
- Period: 1992-2004, 7 waves
- Ages: 55+
- Selection (16,167 individuals):
 - White, Non-Hispanics
 - Excluding underweight => BMI > 18.5
 - Survey participation >= 3 year





Outcomes

- **Mortality**
- **ADL Disability**
 - defined by Katz basic activities of daily living (ADL)
 - Walking (from bed to chair)
 - Bathing
 - Dressing
 - Toileting
 - Feeding
 - ADL disabled if person answers 'with difficulty' on at least 1 or 2 of ADL (only 1 presented)





Methods

1. Statistical models estimate hazard rates from observed transitions to inactive life and death
2. Multi state life tables (MSLT) translate these hazards in average durations of active and inactive life
3. Continuous time microsimulation estimates the distributions of event biographies that make up these averages
4. All steps are conditioned by risk factor status, gender and age





Cox proportional hazard ratios

	Men		Women	
	Healthy to ADL disabled	ADL disabled to death	Healthy to ADL disabled	ADL disabled to death
BMI 18.5-22.9	1.11	1.42	0.98	1.13
BMI 23-24.9 *	Ref	Ref	Ref	Ref
BMI 25-29.9	1.04	0.98	1.25	0.75
BMI 30-34.9	1.69	1.01	1.66	0.79
BMI 35+	2.54	0.91	2.81	1.07
Never smoked *	Ref	Ref	Ref	Ref
Stopped smoking	1.06	1.12	1.01	1.13
Currently smoking	1.43	1.34	1.60	1.69
Low education	1.69	1.18	1.49	1.31
Medium education	1.32	1.09	1.04	1.11
High education *	Ref	Ref	Ref	Ref



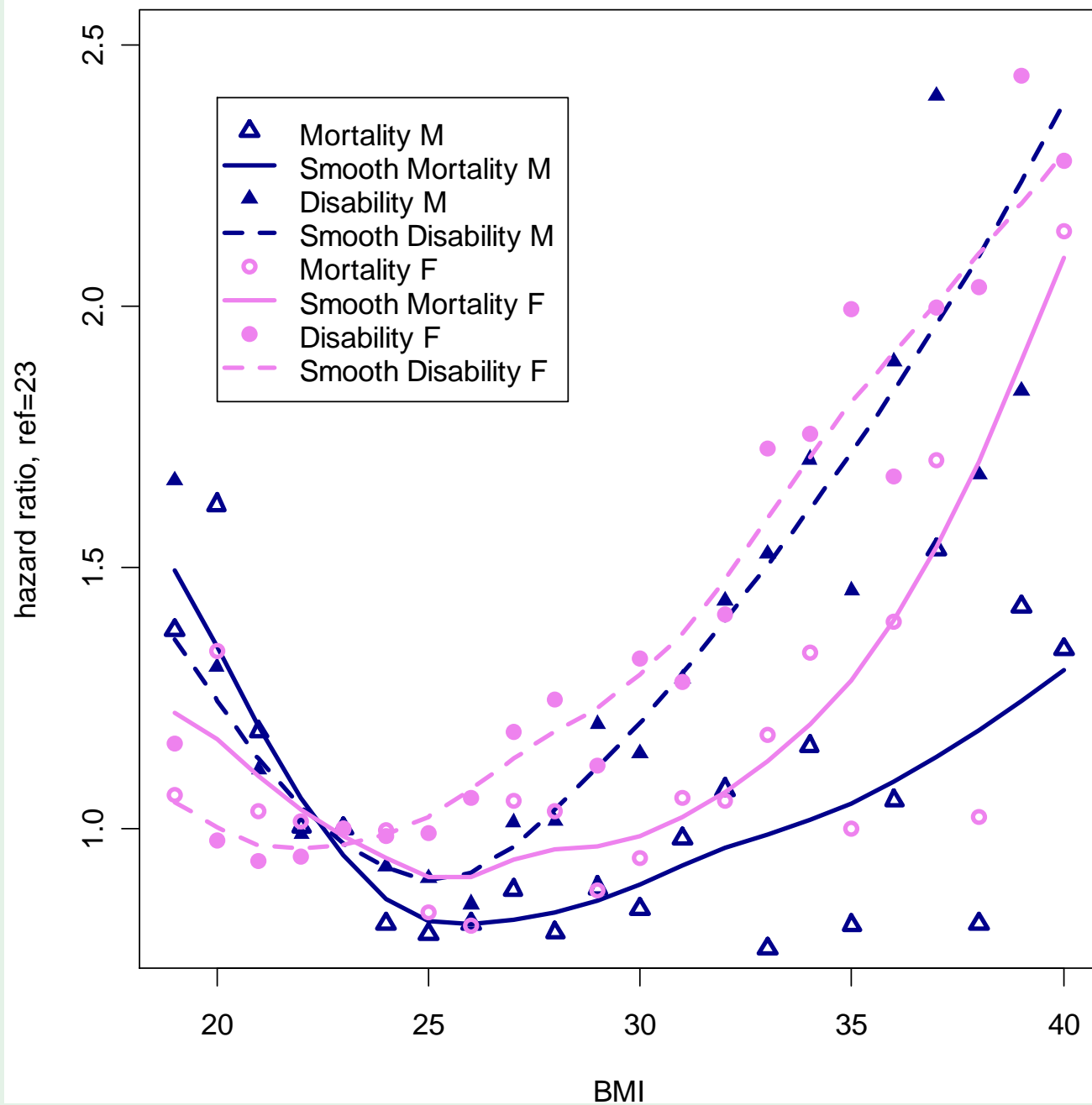


Loss or gains in life years	Mannen			Vrouwen		
	Total	Active	ADL disab	Total	Active	ADL disab
BMI 18.5-22.9	-1.8	-1.1	-0.7	0.4	0.1	-0.5
BMI 23-24.9 *	24.5	19.5	5.1	28.7	21.8	6.9
BMI 25-29.9	0.6	0.2	0.4	0.6	-1.5	+2.1
BMI 30-34.9	-0.6	-2.7	+2.0	-0.4	-3.6	+3.2
Never smoked *	27.6	21.4	6.2	30.4	22.0	8.4
Stopped smoking	-2.8	-1.9	-0.9	-1.6	-0.7	-0.9
Currently smoking	-7.7	-6.4	-1.3	-6.6	-5.2	-1.4
Low education	-2.8	-3.6	0.7	-3.2	-3.3	0.0
Medium education	-1.7	-2.1	0.4	-1.0	-0.4	-0.6
High education *	26.2	21.1	5.1	30.1	21.9	8.2
All (excl. severely obese)	24.6	19.1	5.5	28.7	20.8	7.9



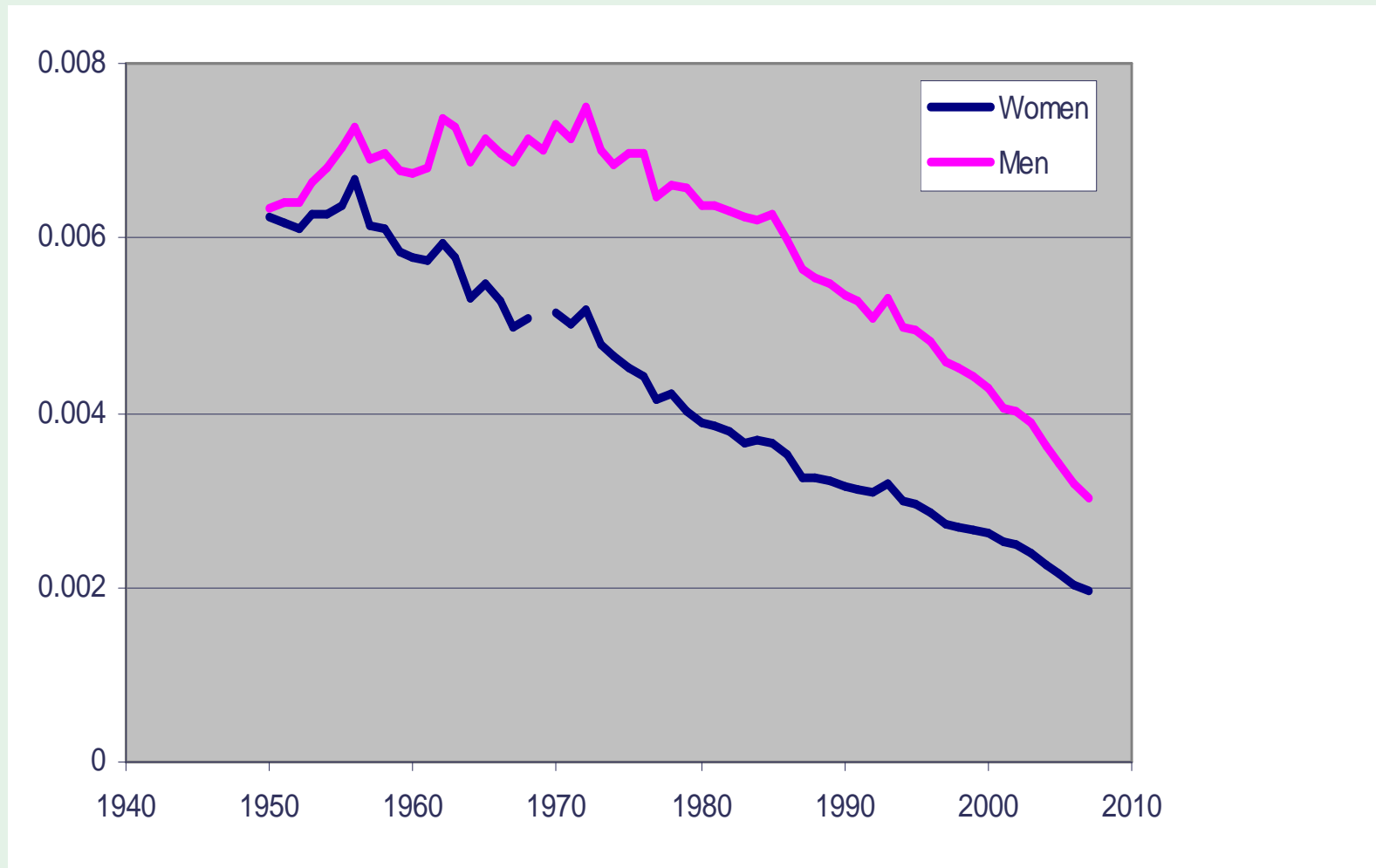


Risk of disability and mortality by BMI





Age standardised cardiovascular mortality rate (Netherlands)





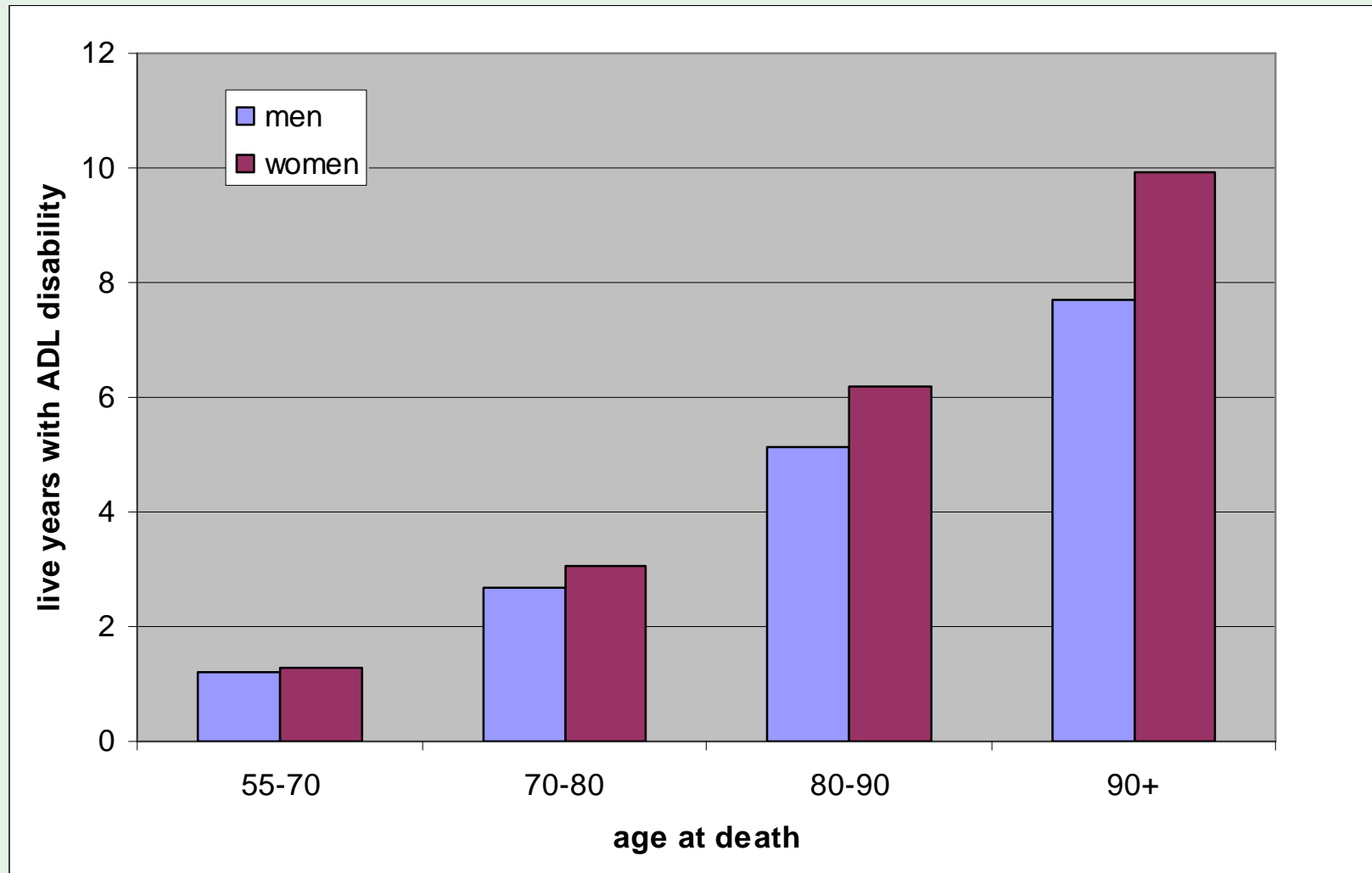
Trajectories

	men		women	
	age at death	probability	age at death	probability
Never disabled	75.5	42.6%	77.9	26.6%
Ever disabled	84.0	57.4%	88.0	73.4%
Ever recovery	86.7	27.6%	90.6	36.7%
Never recovery	81.4	29.8%	85.4	36.8%



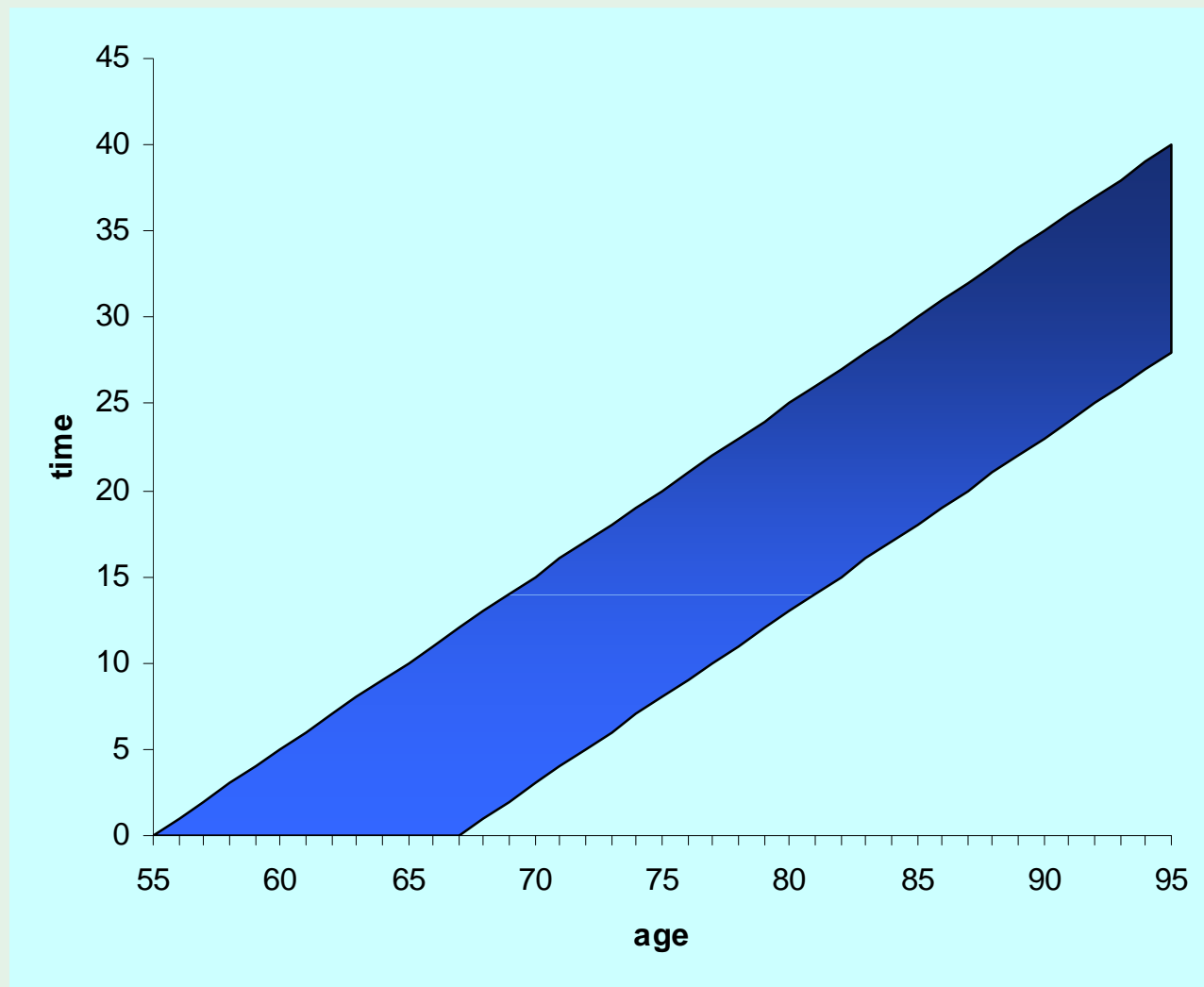


Duration of ADL disability by age at death





Age/period of information





Ageing

- Defined as increasing probability of disease, disability and death with increasing age
- Determined by underlying “rate of ageing”
- Slower rate of ageing
 - Longer life
 - Longer life free of disability
 - Longer life with disability
 - Extension of care needs





Conclusion

- Longer life without disability goes together with longer life with disability
- Smoking compresses disability, by killing
- Obesity expands disability, partly by not killing anymore
- A higher education increases active life expectancy, without increasing inactive life expectancy

