Disability-Free Life Expectancy Trends in Taiwan:

Compression, Expansion or Dynamic Equilibrium

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Outline

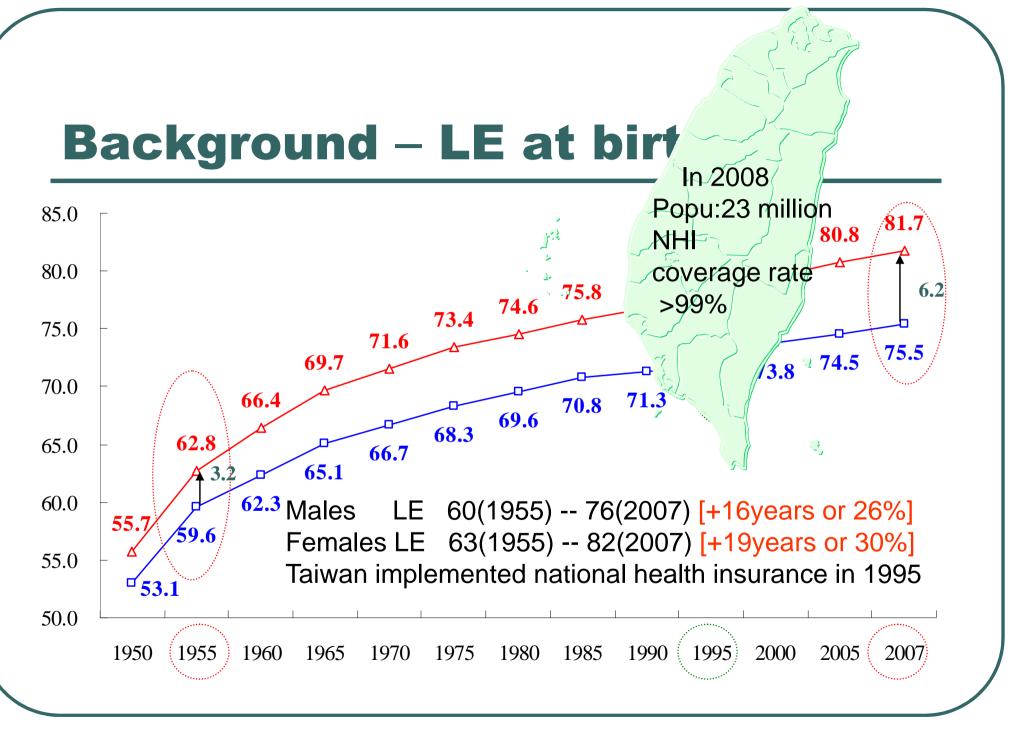
Background

Objectives

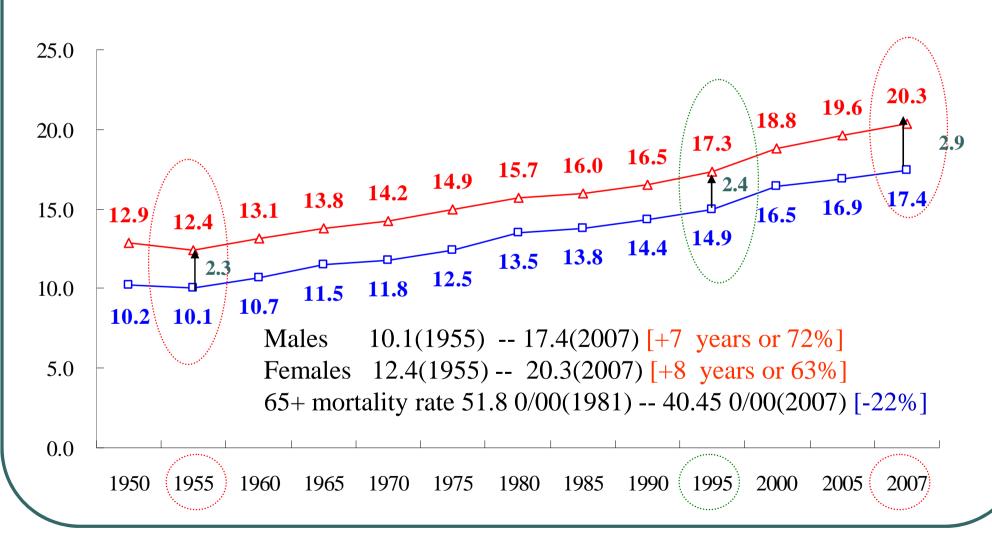
Materials & Methods

Results

Conclusions



Background – LE at age 65



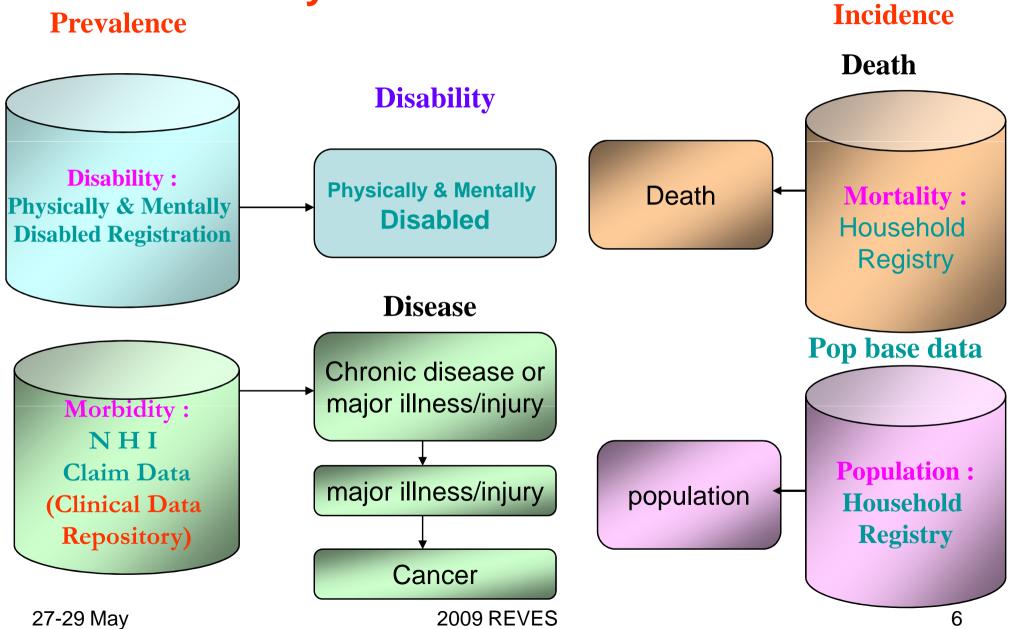
Objectives

To create health life expectancy with administrative data

To examine whether the proportion of life spent in disability or disease is expansion or compression in Taiwan

Materials & Database

by adminisrative data



Methods

We computed health life expectancy --using prevalence-base Sullivan's method
and following EHEMU calculation guide.

Health status definition

Disability—physical & mental disabled depend on medical expert valuation based on ADL or IADL

Disease—long-standing illness depend on physician diagnoses

All Disease: include

1.Chronic disease:

Using chronic prescription and days of medicine - given

>= 21 per month

2.Major illness/injury (serious disease)

Physically & Mentally Disabled

Depends on : Protection Act for

Rights and Interests of

Disabled Citizens

Cancer

four possibilities for the evolution of disability-free life expectancy --- Robine and Mathers identified

absolute compression of morbidity: the increase in disability-free life expectancy exceeds the increase in total life expectancy, reducing the years lived with disability.

relative compression of morbidity: disabilityfree life expectancy and years lived with disability both increase, but disability-free life expectancy as a proportion of total life expectancy increases.

four possibilities for the evolution of disability-free life expectancy --- Robine and Mathers identified

relative expansion of morbidity: disability-free life expectancy and years lived with disability both increase, but disability-free life expectancy as a proportion of total life expectancy decreases.

absolute expansion of morbidity: disabilityfree life expectancy decreases and years lived with disability increase.

Limitations

We applied dichotomous valuations to the health status

All health data are derived from administrative data

All health status valuation was conducted by medical experts.

All data base on full population.

RESULT

Disability-Free Life Expectancy
Disease-Free Life Expectancy
Serious Disease-Free Life Expectancy
Cancer-Free Life Expectancy

Partl: **Disability-Free Life Expectancy**

Disability= Physically & Mentally Disabled

Disability is certificated by medical experts and determined on a standardized set of diagnostic criteria, like: person's daily active or functional limitation criteria

Data derived form Physically & Mentally Disabled Registration system

In 2007 no. of disability=1.02 million(4.5%)

Disability

Category Include: (16 kinds)

Vision Disability Hearing Mechanism Disability

Balancing Mechanism Disability Voice or Speech Mechanism Disability

Limbs Disability Mentally Disability

Losing Functions of Primary Organs Suffering Facial Damage

Unconscious Chronically Senile Dementia

Autism Chronic Psychosis

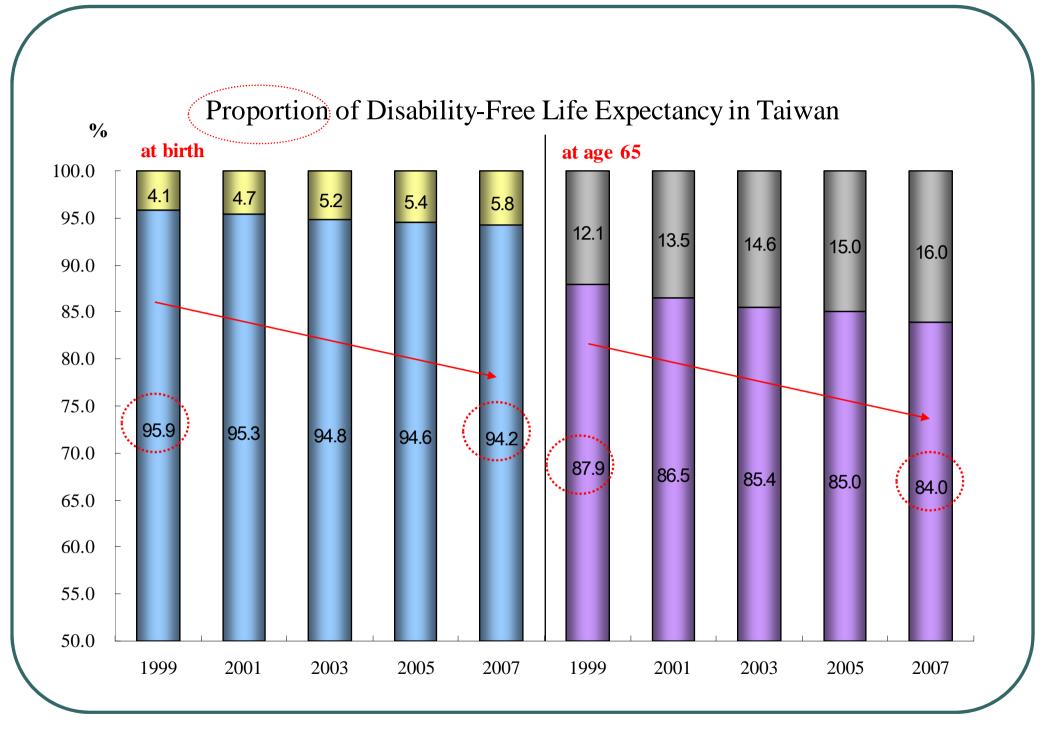
Multi-Disability Caused by Infrequent Disease

Stubborn (Difficult-to-Cure) Epilepsy Others Disability

Grade by: Severe , Extreme , Moderate, Mild

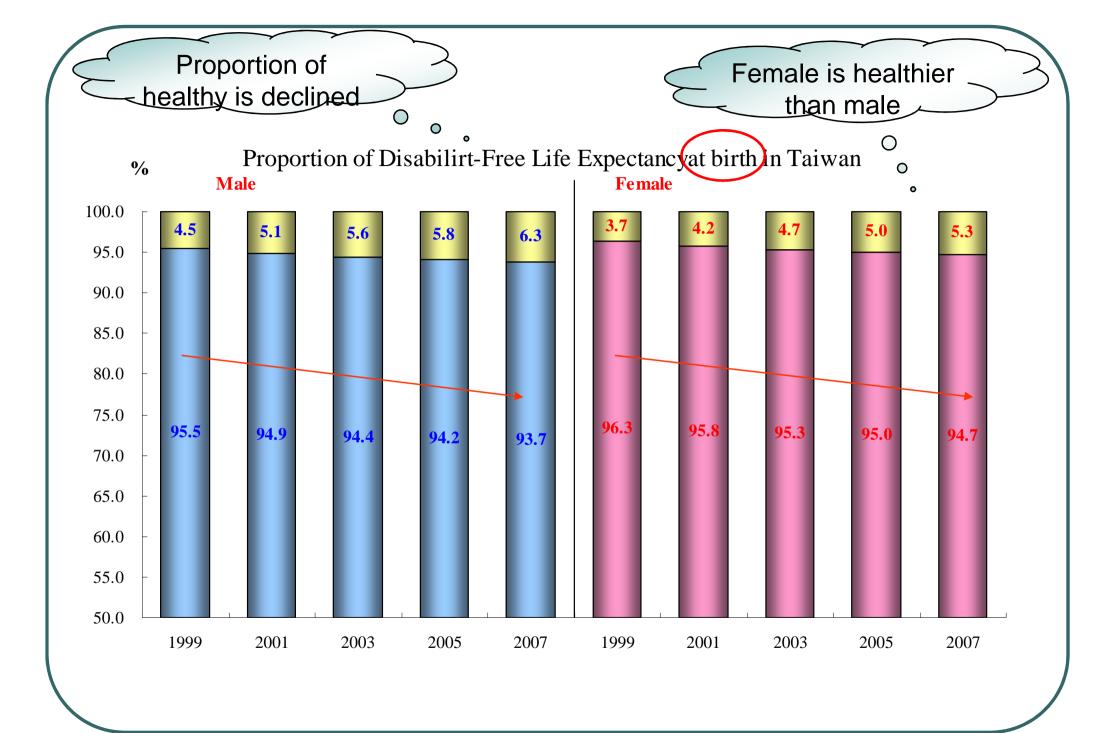
Disability-free Life Expectancy of Taiwanese

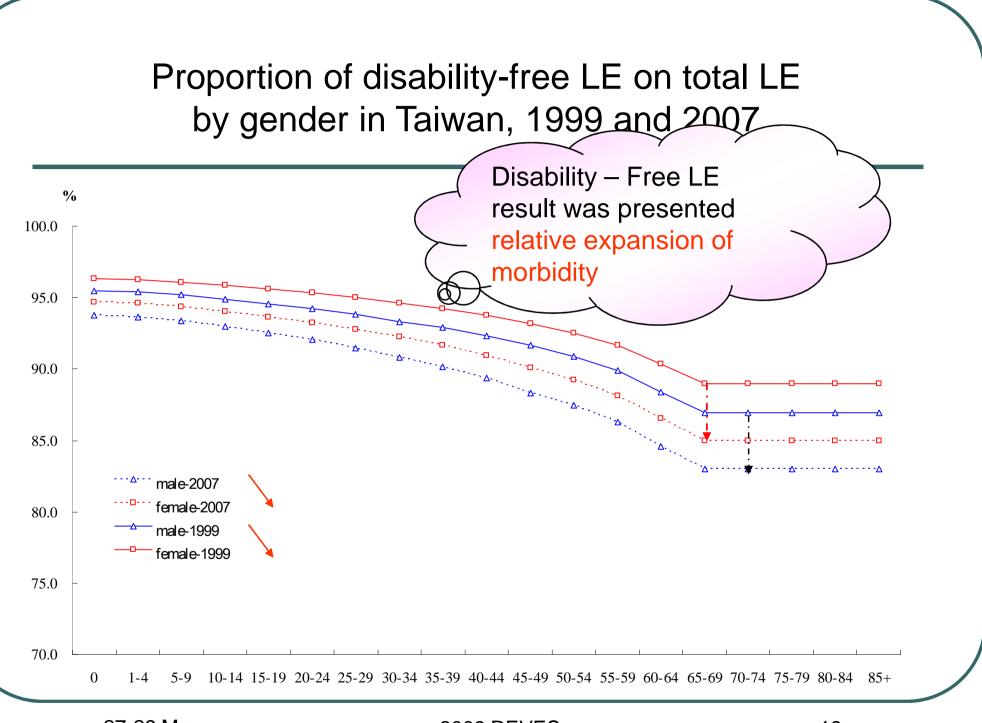
	at Birth			at Age 65			
	L.E	DFLE	DLE	L.E	DFLE	DLE	
1999	75.9	72.8 (95.9%)	3.1	17.1	15.0 (87.9%)	2.1	
2001	76.7	73.1 (95.3%)	† 3.6	17.5	15.1 (86.5%)	2.4	
2003	77.4	73.4 (94.8%)	4.0	17.8	15.2 (85.4%)	2.6	
2005	77.4	73.2 (94.6%)	4.2	18.0	15.3 (85.0%)	2.7	
2007	78.3	73.7 (94.2%)	4.5	18.6	15.6 (84.0%)	3.0	
	+2.4 3.2%	+0.9 4.4%	+1.4 45%	+1.5 8.8%	+0.6 4%	+0.9 49%	



Disability-free Life Expectancy of Taiwanese

	Male			Female		
	L.E	DFLE	DLE	L.E	DFLE	DLE
1999	73.4	70.1 (95.5%)	3.3	78.9	76.0 (96.3%)	2.9
2001	74.1	70.3 (94.9%)	3.8	79.8	76.4 (95.8%)	3.4
2003	74.8	70.6 (94.4%)	4.2	80.3	76.5 (95.3%)	3.8
2005	74.5	70.2 (94.2%)	4.3	80.6	76.6 (95.0%)	4.0
2007	75.4	70.7 (93.7%)	4.7	81.4	77.1 (94.7%)	4.4
	+2.0 2.7%	+0.6 0.9%	+1.4 42%	+2.5 3.2%	+1.1 1.5%	+1.5 52%





PartII:

Disease-Free Life Expectancy

Diseases = "chronic disease" or "major illness/injury (serious disease)" are certified by physician diagnoses

In Taiwan chronic disease patient can take medicine >= 21 days per month on each medical visit

Serious illness patient have free-copayment in each medical care visit

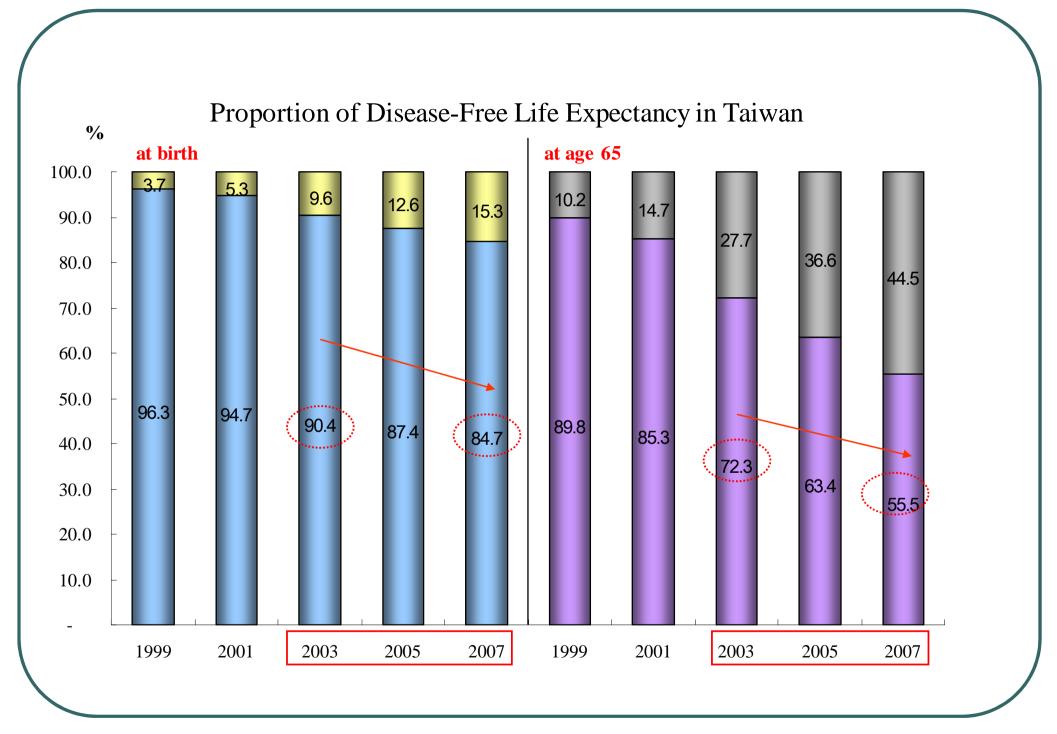
Data derived form National Health Insurance Claim Database

Clinical Data Repository—count by person not by physician visits

In 2007 no. of disease=2.5 million (11%)

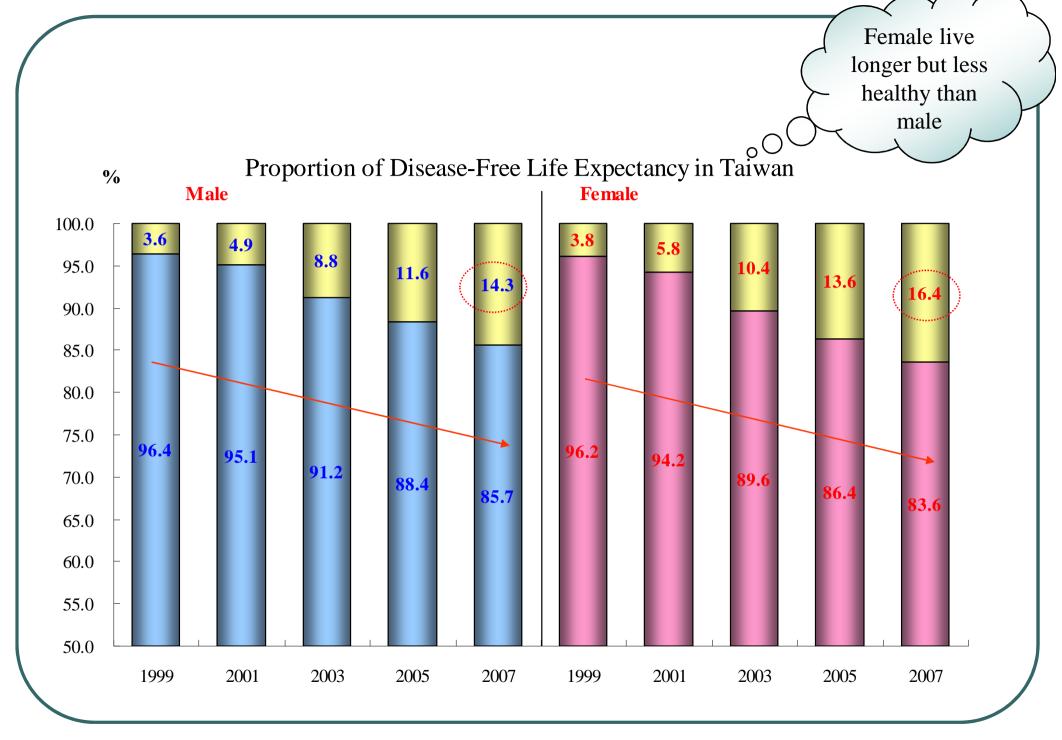
Disease-Free Life Expectancy of Taiwanese

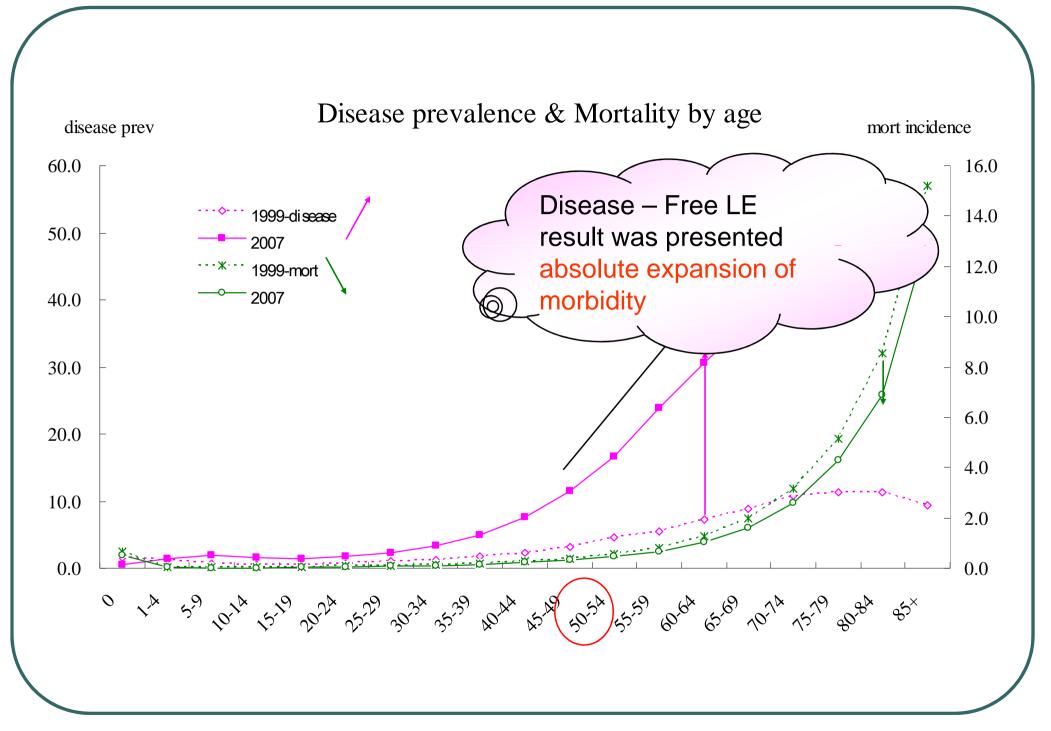
	at Birth			at Age 65:		
	L.E	DFLE	DLE	L.E	DFLE	DLE
1999	75.9	73.1 (96.3%)	2.8	17.1	15.3 (89.8%)	1.7
2001	76.7	72.6 (94.7%)	4.1	17.5	14.9 (85.3%)	2.6
2003	77.4	69.9 (90.4%)	↑ 7.4	17.8	12.9 (72.3%)	4.9
2005	77.4	67.7 (87.4%)	9.7	18.0	11.4 (63.4%)	6.6
2007	78.3	66.3 (84.7%)	12.0	18.6	10.3 (55.5%)	8.3
		-3.6 -5.2%	+4.6		-2.6 -20%	+3.4



Disease-Free Life Expectancy of Taiwanese

	Male			Female		
	L.E	DFLE	DLE	L.E	DFLE	DLE
1999	73.4	70.8 (96.4%)	2.6	78.9	75.8 (96.2%)	3.0
2001	74.1	70.5 (95.1%)	3.6	79.8	75.2 (94.2%)	4.6
2003	74.8	68.2 (91.2%)	6.6	80.3	71.9 (89.6%)	8.3
2005	74.5	65.9 (88.4%)	8.7	80.6	69.7 (86.4%)	11.0
2007	75.4	64.6 (85.7%)	10.8	81.4	68.1 (83.6%)	13.3
	+0.6 0.8%	-3.6 -5.3%	+8.2	+1.1 1.4%	-3.8 -5.3%	+10.3





PartIII: Serious Disease-Free Life Expectancy

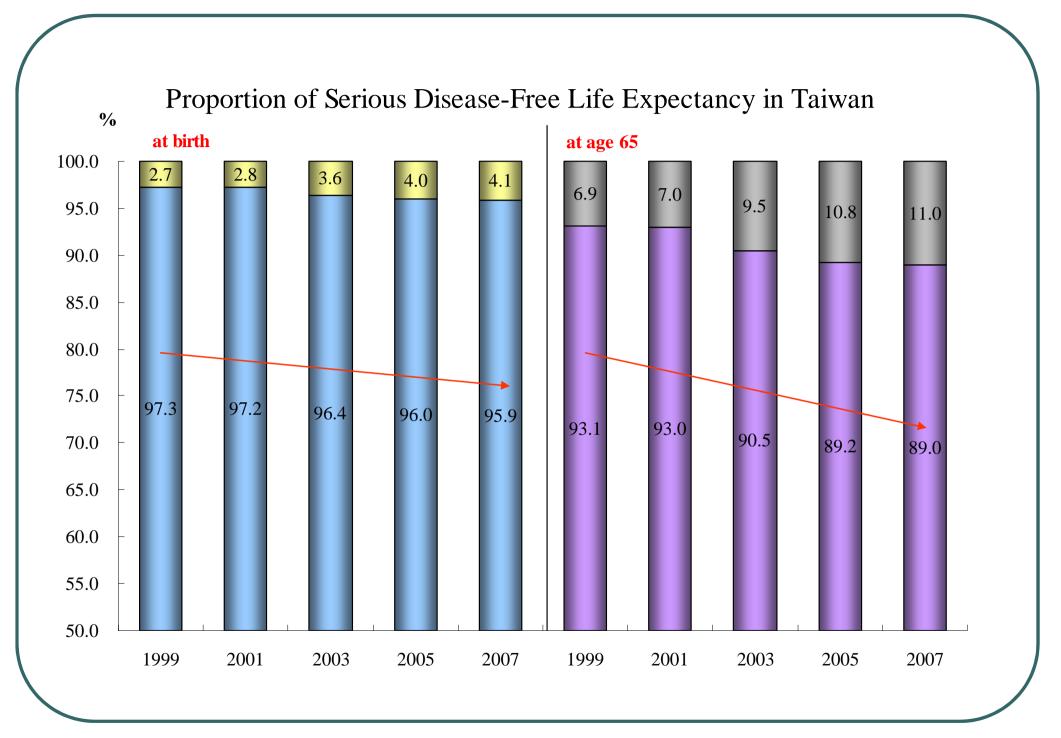
Serious Disease= "major illness/injury"
In Taiwan, Serious Disease have 30 category,
like: cancer; ESRD; chronic psychotic
disorder; respirator-dependent patient;
cirrhosis of liver.... etc.

Data derived form National Health Insurance Claim Data

In 2007 no. of serious disease=0.7 million (3.1%)

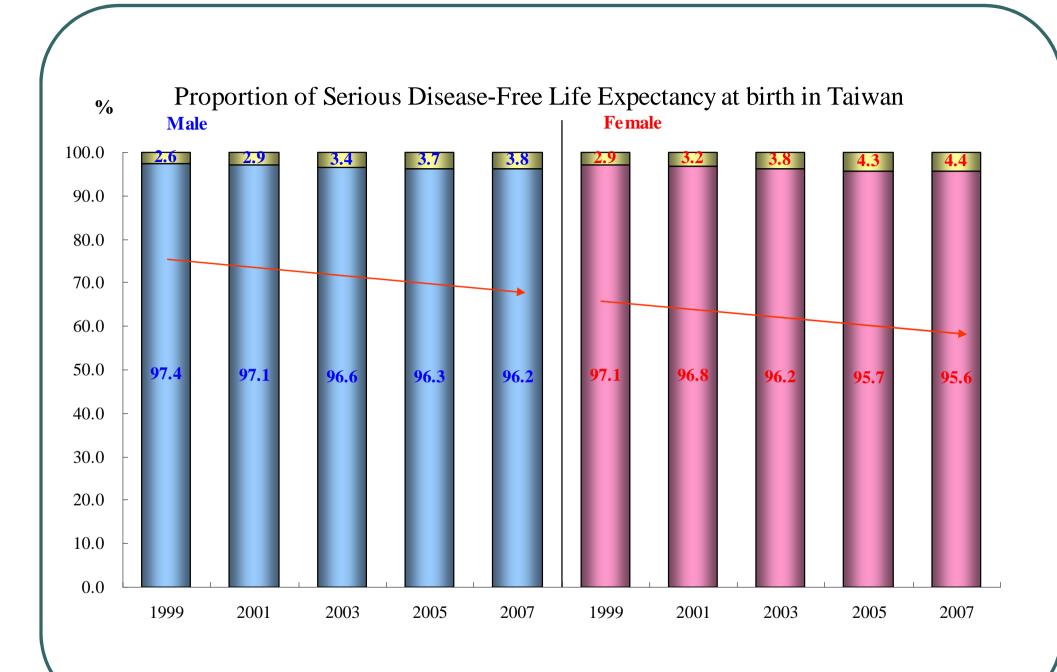
Serious Disease-Free Life Expectancy

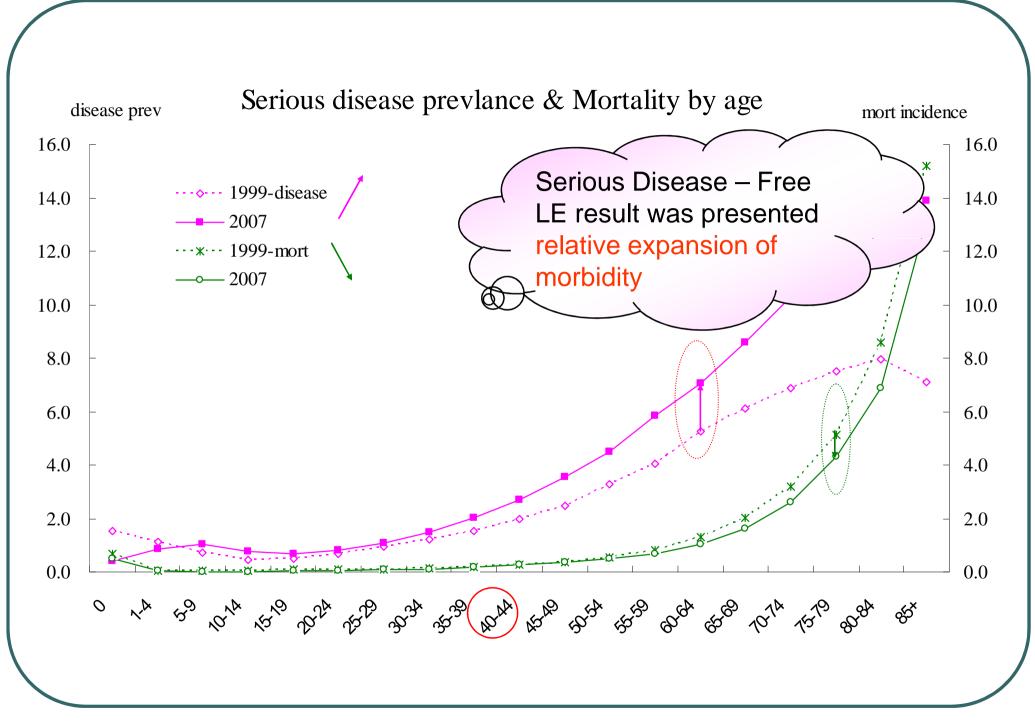
	at Birth			at Age 65		
	L.E	DFLE	DLE	L.E	DFLE	DLE
1999	75.9	73.8 (97.3%)	2.1	17.1	15.9 (93.1%)	1.2
2001	76.7	74.6 (97.2%)	2.1	17.5	16.3 (93.0%)	1.2
2003	77.4	74.6 (96.4%)	2.8	17.8	16.1 (90.5%)	1.7
2005	77.4	74.3 (96.0%)	3.1	18.0	16.1 (89.2%)	1.9
2007	78.3	75.0 (95.9%)	3.2	18.6	16.5 (89.0%)	2.0
		+1.2 1.6%	+1.1 52%		+0.6 3.8%	+0.8 67%



Serious Disease-Free Life Expectancy

	Male			Female		
	L.E	DFLE	DLE	L.E	DFLE	DLE
1999	73.4	71.5 (97.4%)	1.9	78.9	76.6 (97.1%)	2.3
2001	74.1	72.0 (97.1%)	2.1	79.8	77.2 (96.8%)	2.6
2003	74.8	72.3 (96.6%)	2.5	80.3	77.2 (96.2%)	3.1
2005	74.5	71.7 (96.3%)	2.8	80.6	77.2 (95.7%)	3.4
2007	75.4	72.5 (96.2%)	2.9	81.4	77.8 (95.6%)	3.6
		+1.0 1.4%	+1.0 53%		+1.2 1.6%	+1.3 57%





Part IV: Cancer-Free Life Expectancy

Disease = specified disease--" cancer" is a kind of serious disease also a kind of chronic disease

Base on medical examination

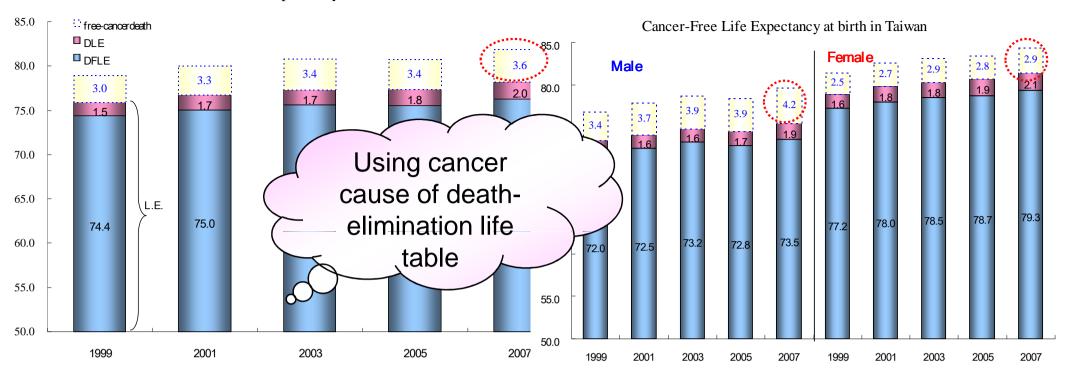
Data derived form National Health Insurance Claim Data

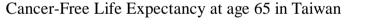
In 2007 no. of cancer disease=0.4 million (1.9%)

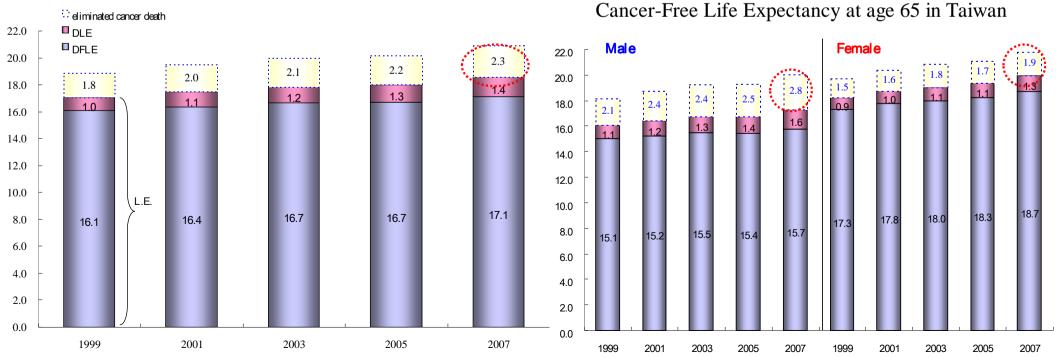
Cancer-Free Life Expectancy of Taiwanese

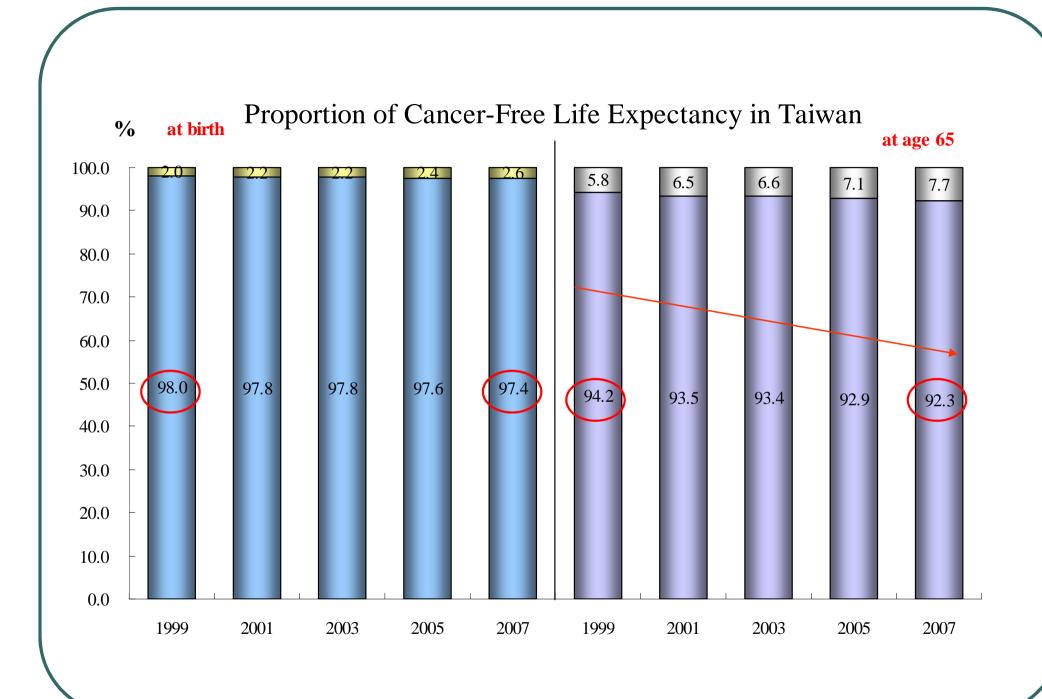
	at Birth			at Age 65			
	L.E	cancer FLE	cancer LE	L.E	cancer FLE	cancer LE	
1999	75.9	74.4 (98.0%)	1.5	17.1	16.1 (94.2%)	1.0	
2001	76.7	75.0 (97.8%)	1.7	17.5	16.4 (93.5%)	1.1	
2003	77.4	75.6 (97.8%)	1.7	17.8	16.7 (93.4%)	1.2	
2005	77.4	75.5 (97.6%)	1.8	18.0	16.7 (92.9%)	1.3	
2007	78.3	76.2 (97.4%)	2.0	18.6	17.1 (92.3%)	1.4	
		+1.8 2.4%	+0.5 33%		+1.0 6.2%	+0.4 40%	

Cancer-Free Life Expectancy at birth in Taiwan



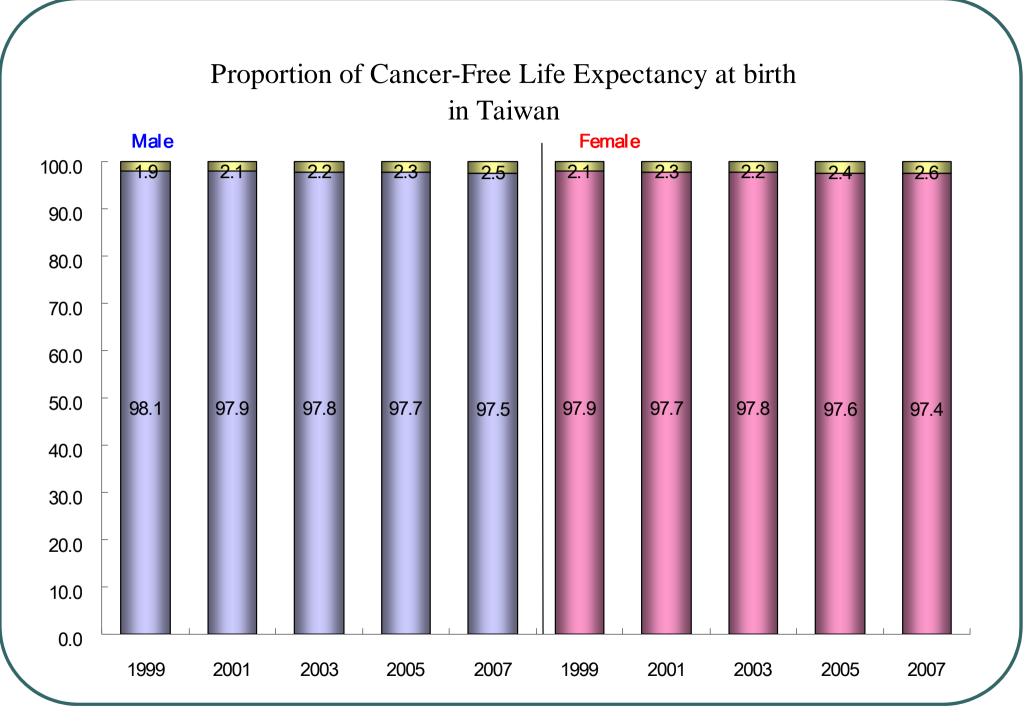




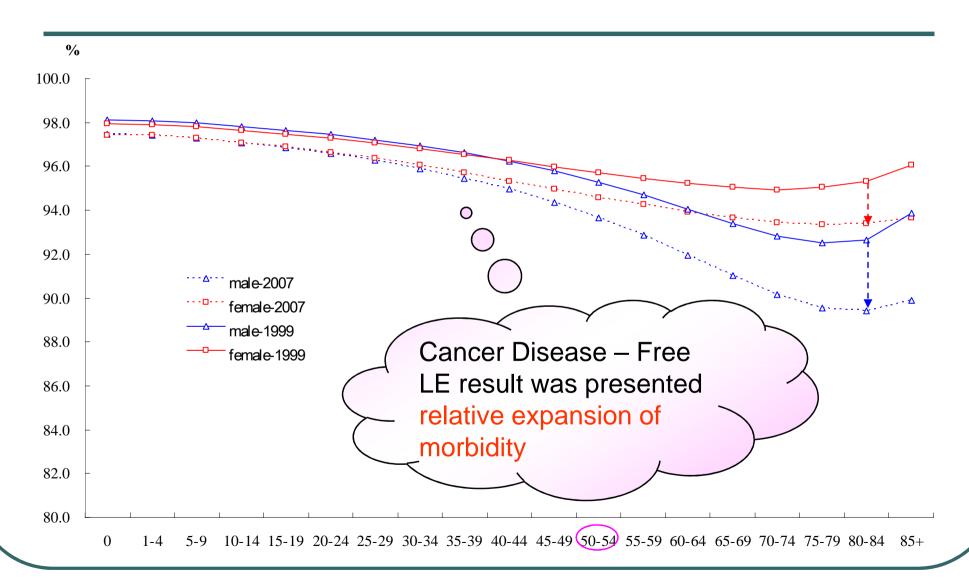


Cancer-Free Life Expectancy' at birth

	Male			Female		
	L.E	cancer FLE	cancer LE	L.E	cancer FLE	cancer LE
1999	73.4	72.0 (98.1%)	1.4	78.9	77.2 (97.9%)	1.6
2001	74.1	72.5 (97.9%)	1.6	79.8	78.0 (97.7%)	1.8
2003	74.8	73.2 (97.8%)	1.6	80.3	78.5 (97.8%)	1.8
2005	74.5	72.8 (97.7%)	1.7	80.6	78.7 (97.6%)	1.9
2007	75.4	73.5 (97.5%)	1.9	81.4	79.3 (97.4%)	2.1
		+1.5 2.1%	+0.5 36%		+2.1 2.7%	+0.5 31%



Proportion of cancer-free LE on total LE by gender in Taiwan, 1999 and 2007



Conclusions

Taiwanese life expectancy will continue to increase.

The increasing life expectancy seems to be driven mainly by the continuing postponement of deaths from degenerative disease.

Taiwan perhaps exists an **Expansion of Morbidity**, which may be related to the improved access to health care service and preventive health screenings.

It also related to the successful implementation of the national health insurance.



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