Health assessment of older people aged 75 and over in general practice

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The project was completed as part of 6-month medical scholarly selective research project.
Background

Health assessment for people aged 75 years and older

A health assessment of an older person is an in-depth assessment of a patient aged 75 years and over. It provides a structured way of identifying health issues and conditions that are potentially preventable or amenable to interventions in order to improve health and/or quality of life.

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Aims

Aims:
1. Current uptake of 75+HA and factors associated with the uptake
2. Follow-up recommendations made following 75+HA

Justification:
• 75+HA has been funded for 15 years
• Cost $87 million in 2012
• Limited research on its uptake and follow-up recommendations
Methods:
A Retrospective Clinical Audit

Active patients*(n=1430)
Corio=1014
Dianella=416

Patients have ever had 75+HA by Dec 2013*(n=609)
Corio=409, Dianella=200

Patients who have not had 75+HA within specified period *(n=410)
Corio=238; Dianella=61

Patients who have had 75+HA between Dec 2012-Dec 2013 *(n=299)
Corio=238; Dianella=61

Patients who have never had 75+HA by Dec 2013 *(n=821)
Corio=605, Dianella=216
Results
Uptake rates of 75+HA

75+HA uptake (at least once in the past)

- Patients have ever had 75+HA by Dec 2013: 43%
- Patients have never had 75+HA by Dec 2013: 57%

75+HA uptake (within audit period)

- Patients who have had 75+HA between Dec 2012 to Dec 2013: 21%
- Patients who have not had 75+HA between Dec 2012 and Dec 2013: 79%
Comparison of characteristics between patients who had at least one 75+HA in the past and patients who never had one

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Patients who have had 75+HA between Dec 2012-Dec 2013</th>
<th>Patients who have not had 75+HA within specified period</th>
<th>Unadjusted</th>
<th>Adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Median(IQR)</td>
<td>Median(IQR)</td>
<td>Odds Ratio(95%CI)</td>
<td>p</td>
</tr>
<tr>
<td>Age (years)</td>
<td>82(79,85)</td>
<td>79(76,82)</td>
<td>1.12(1.09-1.15)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Gender, Female (%)</td>
<td>60.4</td>
<td>55</td>
<td>0.80(0.65-0.99)</td>
<td>0.038</td>
</tr>
<tr>
<td>BMI, Mean (SD)</td>
<td>29.13(5.26)</td>
<td>29.29(6.14)</td>
<td>1.00(0.97-1.02)</td>
<td>0.781</td>
</tr>
<tr>
<td>Smoker (%)</td>
<td>6.5</td>
<td>10</td>
<td>0.62(0.39-0.99)</td>
<td>0.043</td>
</tr>
<tr>
<td>Number of co-morbidities Median(IQR)</td>
<td>2(1,3)</td>
<td>1(0,3)</td>
<td>1.17(1.10-1.24)</td>
<td>&lt;0.001</td>
</tr>
<tr>
<td>Number of medications Median(IQR)</td>
<td>9(5,12)</td>
<td>7(3,11)</td>
<td>1.07(1.05-1.09)</td>
<td>&lt;0.001</td>
</tr>
</tbody>
</table>
Comparison of characteristics between patients who had one 75+HA within audit period (Dec 2012-Dec 2013) and patients who did not

<table>
<thead>
<tr>
<th>Predictor</th>
<th>Patients who have had 75+HA between Dec 2012-Dec 2013</th>
<th>Patients who have not had 75+HA within specified period</th>
<th>Unadjusted</th>
<th>Adjusted</th>
</tr>
</thead>
<tbody>
<tr>
<td>Age (years) Median(IQR)</td>
<td>81(79,85)</td>
<td>80(77,84)</td>
<td>1.03(1.01-1.06) 0.013</td>
<td>1.05(1.02-1.08) 0.002</td>
</tr>
<tr>
<td>Gender, Female (%)</td>
<td>60.9</td>
<td>56.3</td>
<td>0.83(0.64-1.08) 0.158</td>
<td></td>
</tr>
<tr>
<td>BMI, Mean (SD)</td>
<td>29.46(5.83)</td>
<td>29.08(5.83)</td>
<td>1.01(0.99-1.04) 0.335</td>
<td></td>
</tr>
<tr>
<td>Smoker (%)</td>
<td>4.9</td>
<td>9.3</td>
<td>0.50(0.26,0.96) 0.037</td>
<td>0.50(0.26-0.97) 0.041</td>
</tr>
<tr>
<td>Number of co-morbidities ,Median(IQR)</td>
<td>2(1,3)</td>
<td>2(1,3)</td>
<td>1.06(0.99-1.13) 0.112</td>
<td></td>
</tr>
<tr>
<td>Number of medications ,Median(IQR)</td>
<td>9(6,13)</td>
<td>7(4,11)</td>
<td>1.06(1.03-1.08) &lt;0.001</td>
<td>1.04(1.01-1.06) 0.011</td>
</tr>
</tbody>
</table>
Type and prevalence of problems among patients who had a 75+HA in audit period (n=299)

*including acute medical problems or problems developed from existing medical conditions (e.g. UTI, asthma exacerbation)
Strengths and limitations

- **Strengths**
  - First Australian clinical audit in 10 years to evaluate the uptake and utilisation of 75+HA
  - Large sample size

- **Limitations**
  - Convenience sample
  - Insufficient information documentation
  - Different assessment forms used in two clinics
  - Lack of historical data
Conclusion & Implication

**Conclusion**

- Uptake rate of 75+HA from audited clinics is low
- Uptake of 75+HA appears to be affected by people’s age, smoking status and medication use
- Most identified problems did not result in recorded recommendations

**Implication**

- Development of guidelines to inform follow-up recommendations may be important
Acknowledgements

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• Dianella Community Health Service
• Corio Medical Clinic

For further information about this study:
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