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## Better primary care for elderly could reduce hospitalisation by 50%

31 March 2008

An efficient response in primary care would reduce hospitalisation of people over 60 by more than 50%, for cases caused by three of the most common illnesses in the older population: diabetic ketoacidosis, digestive haemorrhage and chronic bronchitis.

This is the startling result of a study carried out by researchers from the Department of Preventive Medicine and Public Health at the University of Granada, Spain.

In Spain the percentage of the Spanish population that reaches an elderly age has risen from 26% at the beginning of the 20th century to 86% today. The elderly population makes up between 40-45% of the hospitalisations, occupies 40-50% of doctors working in primary care, and is the recipient of more than 50% of the medicines prescribed in hospitals.

The researchers interviewed all the family doctors from seven different hospitals in Granada and asked them the main reasons for hospitalisations in patients over 60 as well as to what extent these hospitalisations, caused by the problems described above, could be prevented.

The interviewed professionals answered that a more efficient response in primary healthcare would reduce in more than 50% the hospitalisations caused by three pathologies: diabetic ketoacidosis, digestive haemorrhage and chronic bronchitis. However, in patients suffering from cancer and acute coronary syndrome enhanced primary care would only reduce the hospitalisations by 25%.

The researchers analysed six health problems, three chronic diseases (acute coronary syndrome, chronic bronchitis and diabetes) and three acute ones (pneumonia, transient ischemic attack and digestive haemorrhage) to find the connection between primary care effectiveness and the prevention of hospitalisations caused by these health problems. 717 patients over 60 were taken for the study, with an average age of 75.65 years, 59.97% of whom were men.

### Twice the risk

Each new chronic disease suffered by a patient means twice the risk of hospitalisation by any of the six studied pathologies, which means that anyone suffering five or more diseases would present a probability of hospitalisation 61 times higher than a healthy person. Moreover, each new medicine prescribed increases the risk of hospitalisation. Those patients who have been taking five or more different medications for the last six months have a 4.84 times increase in their risk of hospitalisation for these pathologies.

In short, the number of pathologies suffered by individual as well as past hospitalisations for causes different to those studied was considered as a risk factor for hospitalisation, although more significantly for severe cases. The amount of medicines consumed and the number of visits to the hospital were related to a higher frequency of hospitalisation, especially in chronic cases.

Part of the results from this study has been published in the journal *Atención Primaria*. Further papers will be studied in specialist journals.

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