POSTER ABSTRACT

What happens to patients after their first diagnosis of dementia?

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Introduction: The aging of societies accompanies with an increase in age-related chronic conditions like dementia which is the most common mental disease in higher age groups and a main reason for care dependency. Due to restricted mobility as well as a restricted ability to express health problems in advanced stages of dementia patients bear a high-risk of being treated insufficiently. Multidisciplinary teams in integrated care systems offer good circumstances to take good care of this patient group but first of all they need to know what exactly changes for patients after they are diagnosed with dementia and what makes this population so special.

Methods: By analysing claims data of a big national health and care insurance company in Germany DAK Gesundheit patients with dementia were identified by the ICD-Codes F00.-F03. and G30. ~ 100,000 patients per year. An incident case was assumed if a patient had no prior dementia diagnosis in a period of four quarters. As dementia is a chronic and care-intensive condition and 96% of already diagnosed patients regularly see a physician at least once a quarter, the real incidence should at best be only slightly over-estimated by this methodology. After determining the time of the first diagnosis relative time-periods of 364 days each were calculated for 17,450 patients with dementia which then were comparatively analysed before and after diagnosis.

Results: Over 70% of the patients with dementia were women who were on an average older than man at the time of their first diagnosis 84,0 vs. 80,7 years. About half of the patients with dementia was at the latest one year after their first diagnosis in inpatient care whereby women had a higher relative risk of inpatient care compared to men. Service utilization rose in nearly all of the different sectors already in the four quarters prior to the first dementia diagnosis and then escalated afterwards. Especially care services were utilised more frequently and more patients went to hospital. Over 75% of all patients with dementia had at least one hospital stay in the year after their first diagnosis and they were significantly more often treated because of dehydration, fractures femur, lumbar spine, pelvis, …, delirious conditions and pneumonia than before. After their first dementia diagnosis patients significantly more often got prescriptions for antidementives but also for antipsychotics, hypnotics and sedatives which are partly used in care homes to tranquilize patients.
Conclusion: Patients with dementia belong to the most expensive and most care-intensive groups of patients. The analysis reveals some fields where care could be better organized e.g. to reduce ambulatory care-sensitive conditions or to improve drug therapy. By bringing together nursing specialists, inpatient and outpatient physicians, pharmacologists and maybe even relatives care could be improved so that the above mentioned problems are reduced and a better life with dementia is possible.

Keywords: dementia; cohort study; population health; claims data analysis