



RUTGERS
BIOMEDICAL AND
HEALTH SCIENCES

Predictors of Survival after a Diagnosis of Dementia

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“The Comparative Effectiveness of Home
Care for Diverse Elders’ Outcomes”
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“Reflections” Photo Series



Tom Hussey (photographer)
<https://www.tomhussey.com/>



Graduate Research Assistants



Data Sources and Linkages

Publicly Available Data

Area Deprivation Index (ADI)
Census Block Group/Neighborhood Level

Alternative measures of socioeconomic
status and social determinants of health

State policies and programs associated
with upstream or present day care of older
adults and other special populations

CMS (Medicare) – Restricted Data

Beneficiary summary

MedPAR

Chronic conditions

Assessment

Hospice

9-digit zip code history

Death

Dementia Diagnosis

Chronic conditions history

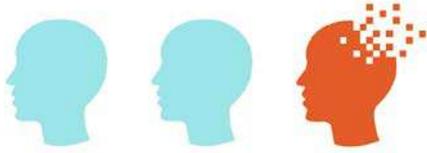
Person-level health care utilization and trajectory of care file:

Health insurance, functional status & caregiver involvement during hospital
swing bed, inpatient rehab, nursing home, home health & hospice stays
+ Historical data on chronic conditions & social determinants of health

Working Towards →

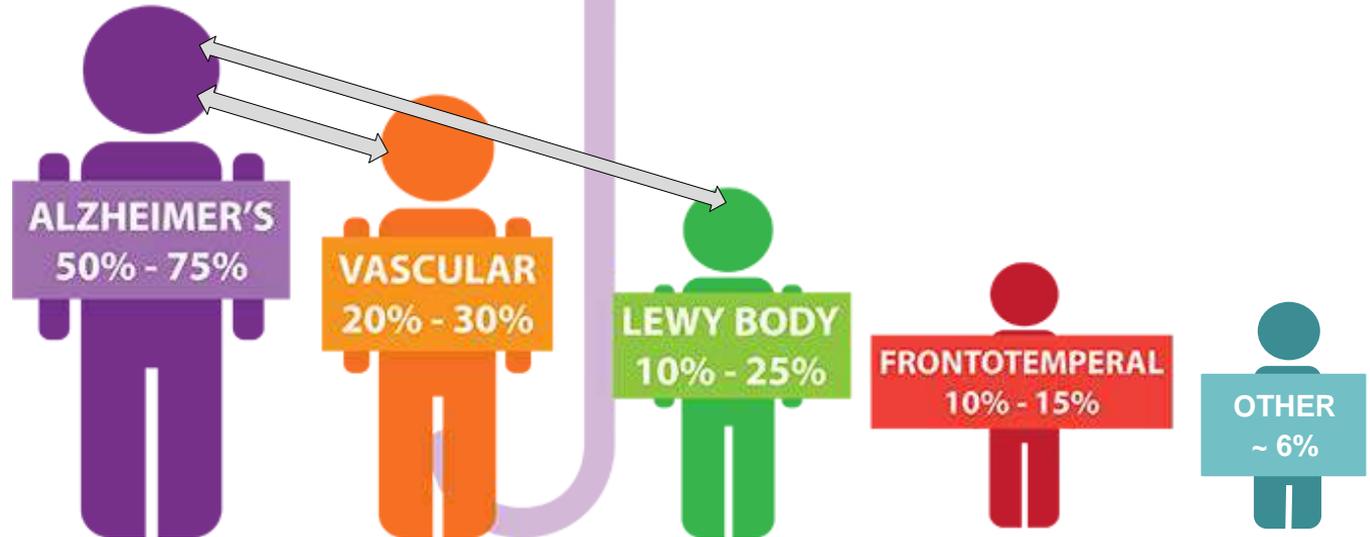
1 IN 3 SENIORS

dies with Alzheimer's or another dementia



DEMENTIA

An "umbrella" term used to describe a range of symptoms associated with cognitive impairment.



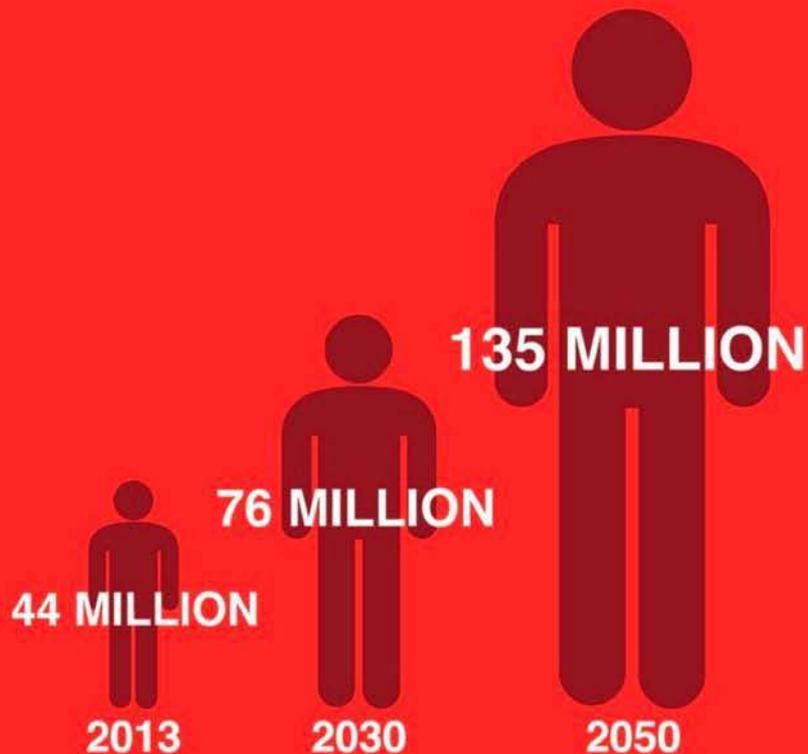


**Alzheimer's Disease
International**
The global voice on dementia



There is a new case of dementia
somewhere in the world every

4 SECONDS

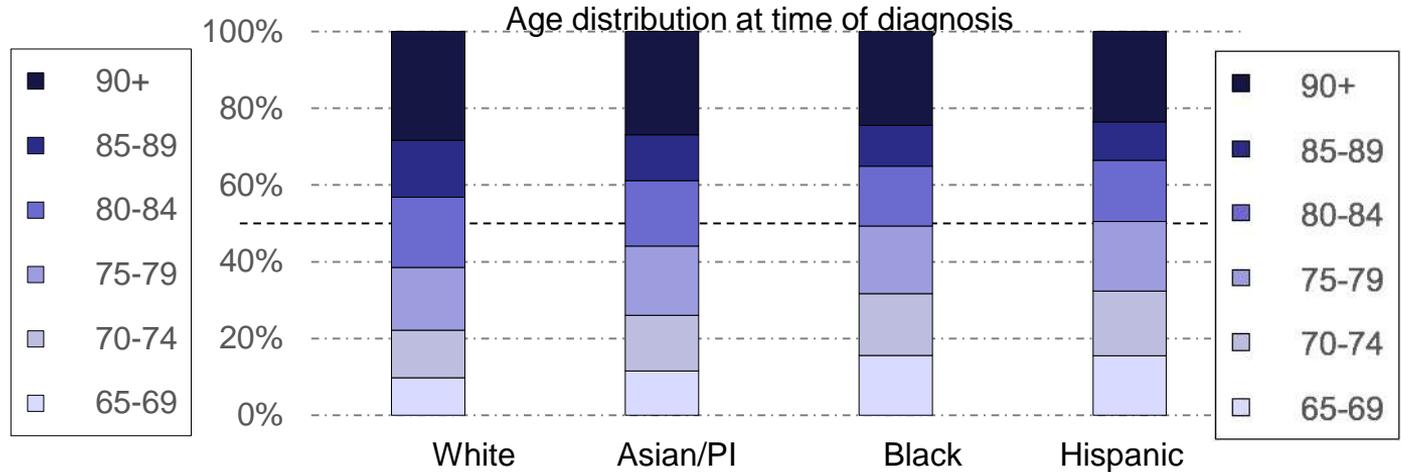


The number of people in the world with
dementia will increase significantly by
2050.

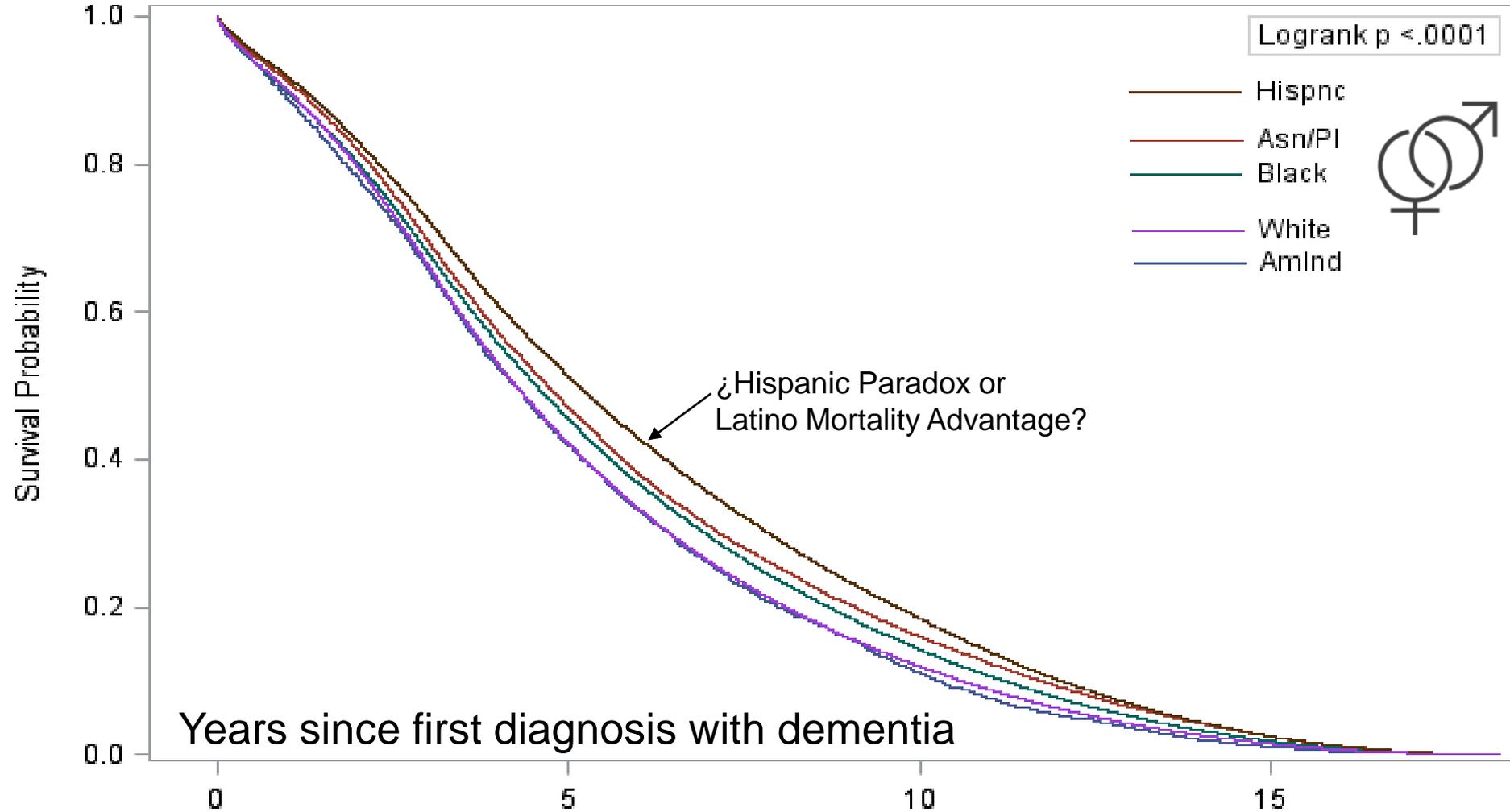
Study Population: U.S. Medicare 2013

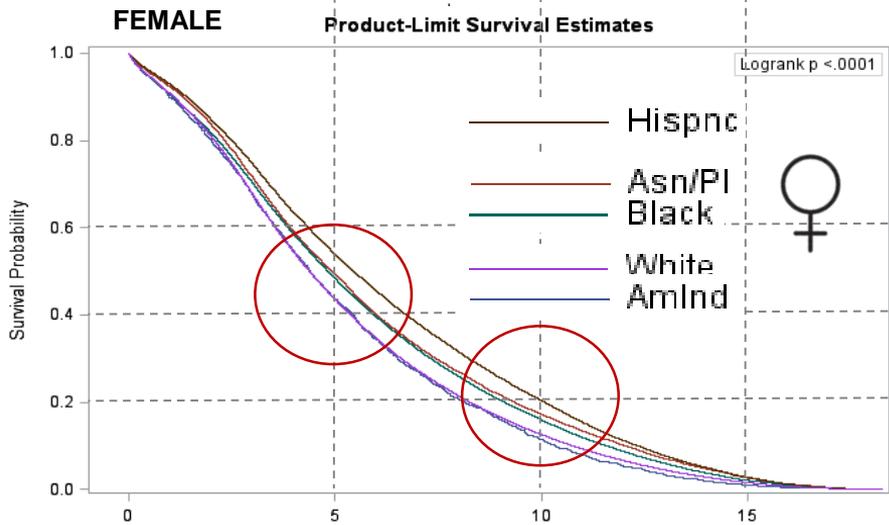
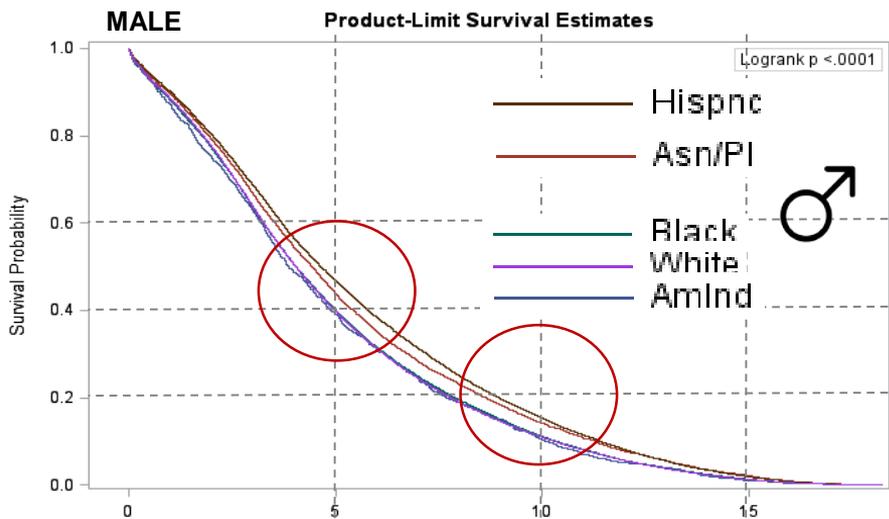
65+ at time of first dementia diagnosis

N = 4,349,565	White	Asian/PI	Black	Hispanic
Number (population)	3,456,373	125,944	442,402	324,846
Female, percent	65.2	64.2	66.8	65.2
Survival, years (\bar{x} , interquartile range)	5.3, 2.4-7.7	5.6, 2.3-7.6	5.7, 2.6-8.4	5.9, 2.7-8.7
Age at diagnosis (\bar{x} , s.d.)	80.0 (7.8)	78.8 (7.7)	77.8 (7.9)	77.5 (7.6)



Survival Probability by Race/Ethnicity (RTI)





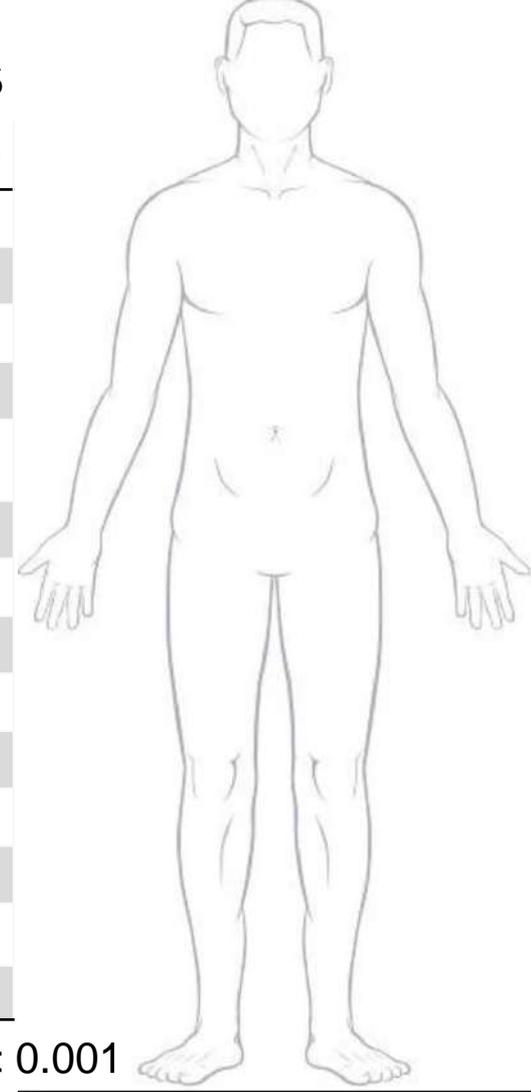
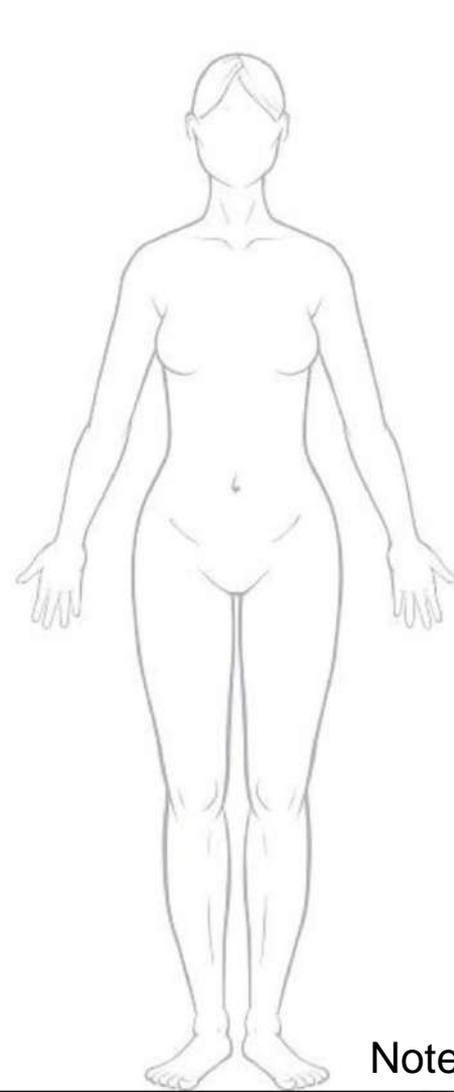
Can you spot the differences?

Hazard Ratios for Comorbidities

Stratified by Sex, Fully Adjusted Models (race, age, State, ADI)

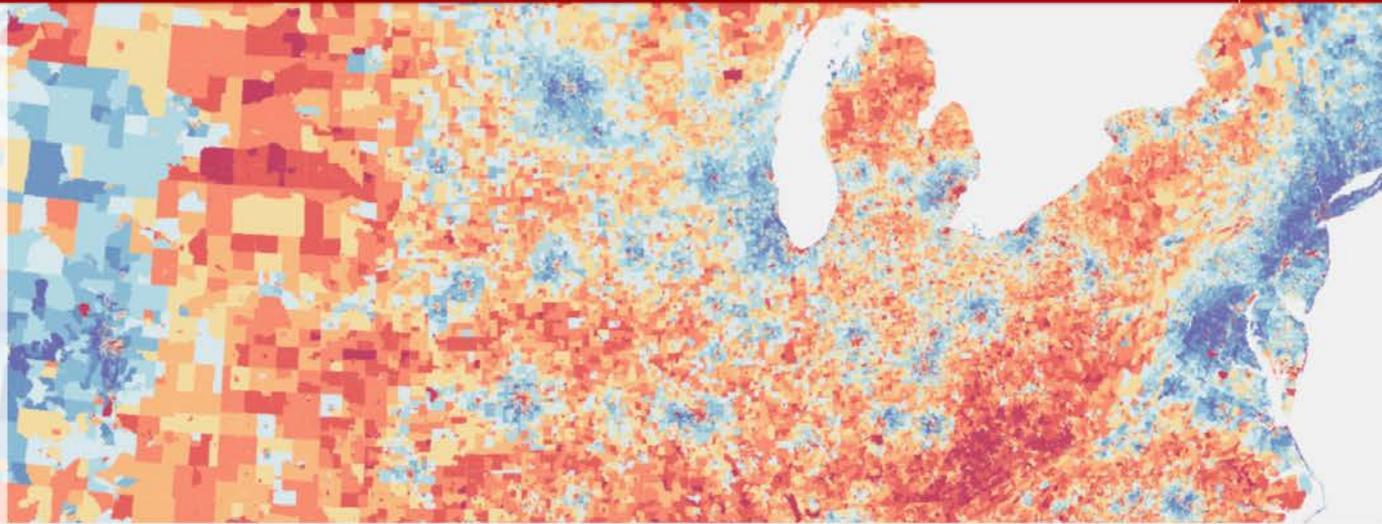
	Stroke/TIA	
	Cataract	
	Hypothyroid	
	Depression	
	Chronic Obstructive Pulmonary Disease	
	Acute Myocardial Infarction	
	Congestive Heart Failure	
	Hypertension	
	Chronic Kidney Disease	
	Anemia	
	Diabetes	
	Hyperlipidemia	
	Obesity	
	Peripheral Vascular Disease	

Note: 2013 national data, 10% random sample; ***p < 0.001





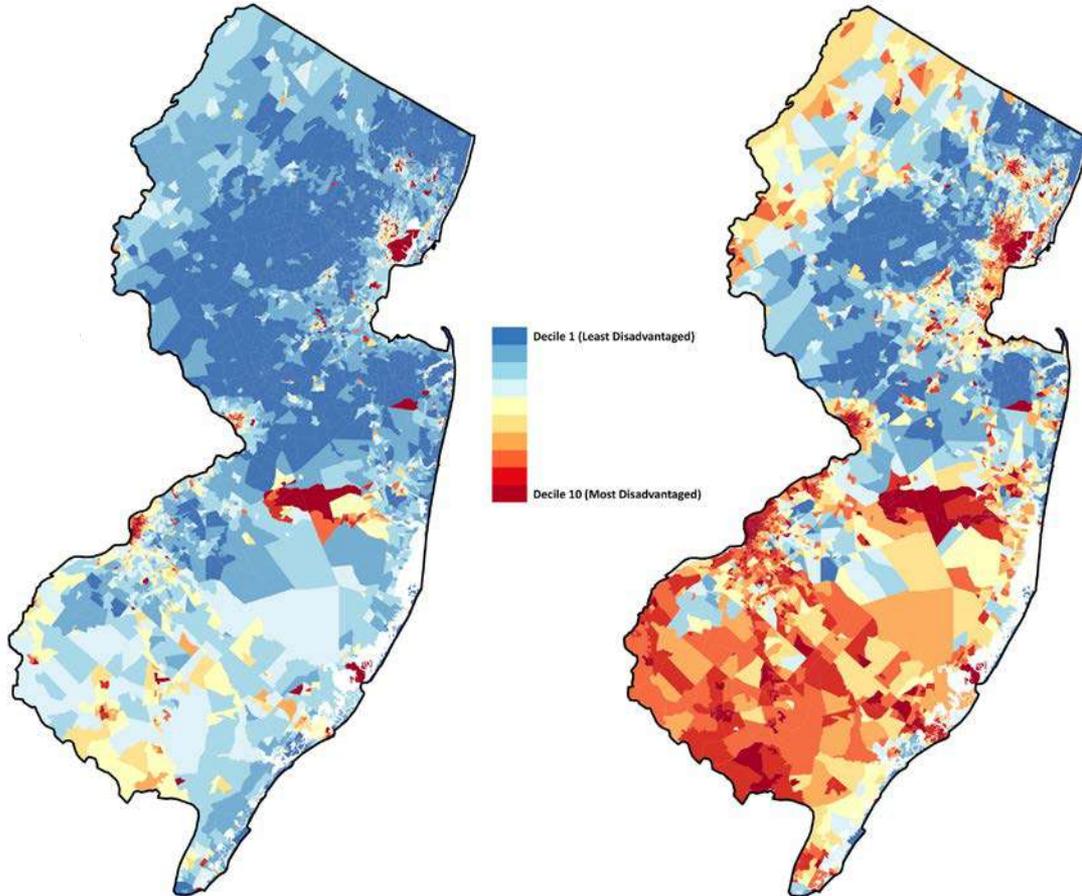
Department of Medicine
UNIVERSITY OF WISCONSIN
SCHOOL OF MEDICINE AND PUBLIC HEALTH



About the 2013 Area Deprivation Index (ADI)

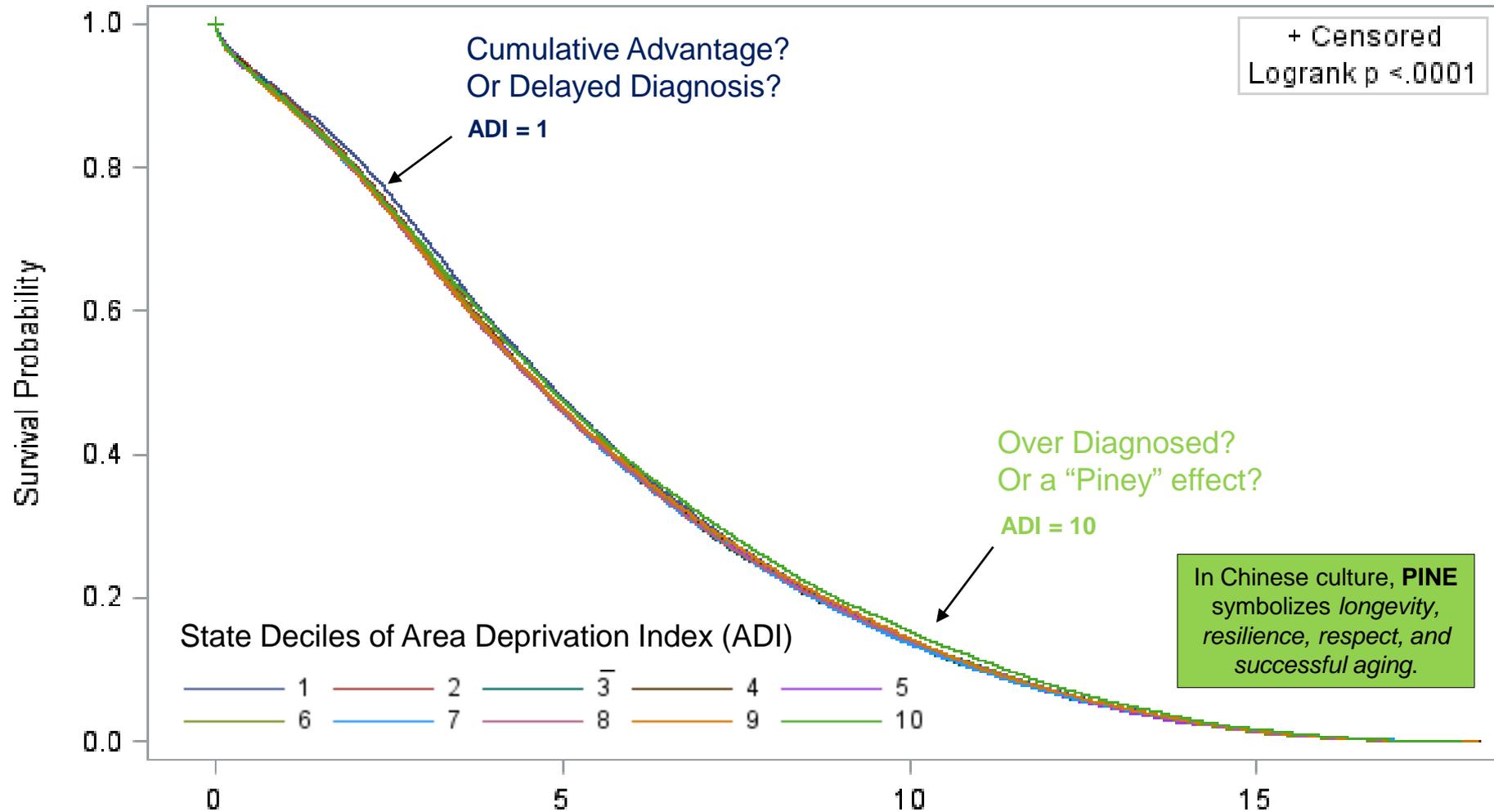
The **Area Deprivation Index (ADI)** is based on a measure created by the Health Resources & Services Administration (HRSA) over two decades ago for primarily county-level use, but **refined, adapted, and validated to the Census block group/neighborhood level** by **Amy Kind, MD, PhD** and her research team at the University of Wisconsin-Madison. It allows for rankings of neighborhoods by socioeconomic status disadvantage in a region of interest (e.g. at the state or national level). It includes factors for the theoretical **domains of income, education, employment, and housing quality**. It can be used to inform health delivery and policy, especially for the most disadvantaged neighborhood groups.

2013 Area Deprivation Index (ADI) National vs. State Versions

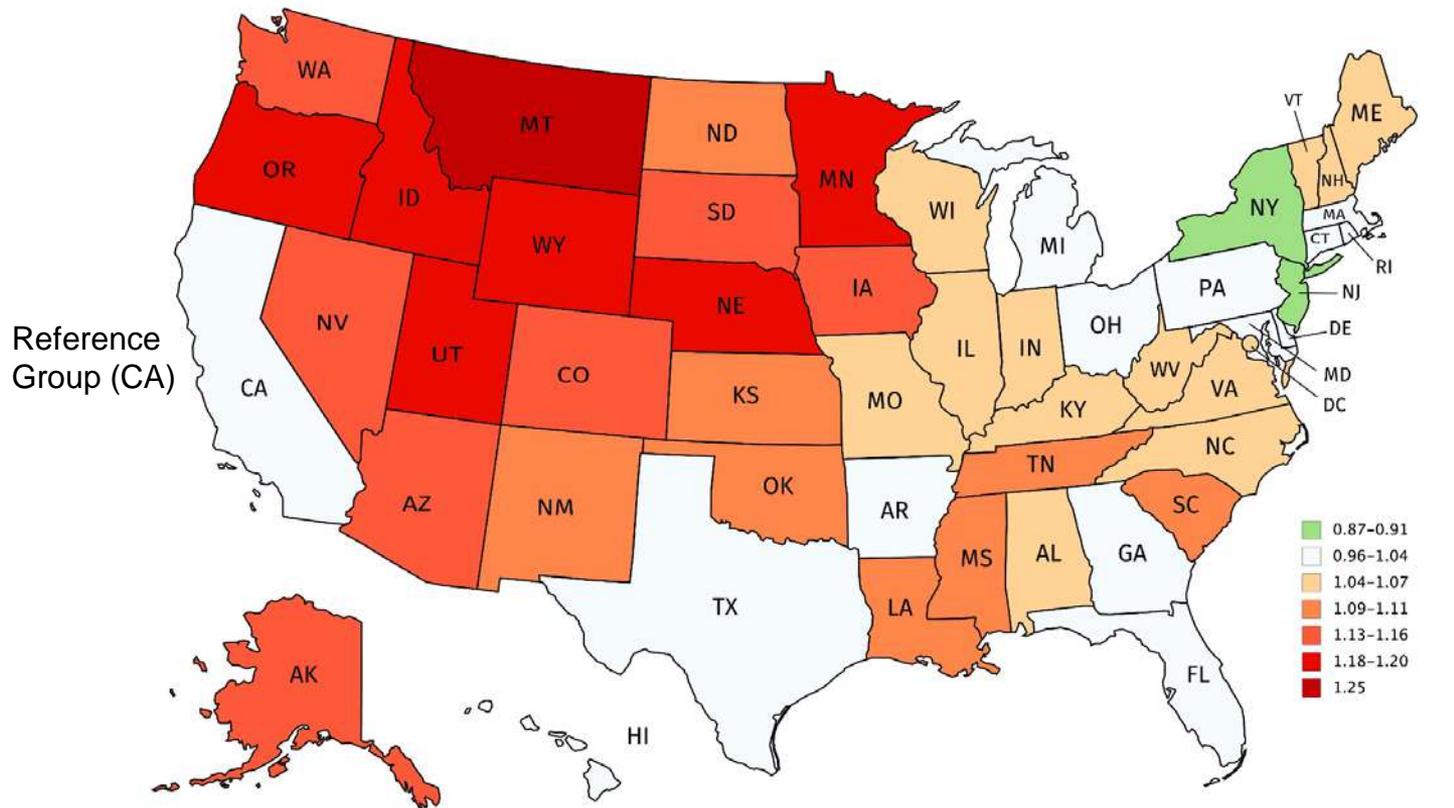


Is Central Jersey
a Real Place?

Survival Probability across SES at time of Dementia Diagnosis



Hazard Ratios for State Effects – Fully Adjusted Models



Variation in Survival across Race & Ethnicity (RTI)

Hazard Ratios, Fully Adjusted Models (demographics, comorbidities, ADI, State)

	Race	+Sex, Age	+CCW	+ADI ²	+State
Black	0.90***	0.94***	0.92***	0.92***	0.92***
Hispanic	0.86***	0.89***	0.83***	0.83***	0.83***
Asian	0.91***	0.90***	0.91***	0.91***	0.91***
Male		1.27***	1.24***	1.24***	1.24***

AIC (Model Fit)

Note: 2013 national data, 10% random sample; *p < 0.05, **p < 0.01, ***p < 0.001

Variation in Survival across Sex, Race & Ethnicity (RTI) Stratified by Age at Diagnosis with Dementia

Hazard Ratios, Fully Adjusted Models (comorbidities, State, ADI)					
Age	Male	White	Black	Hispanic	Asian
65-69	1.20***	(ref)	1.00	0.925*	1.02
70-74	1.28***	(ref)	1.05*	0.908***	0.91
75-79	1.32***	(ref)	1.02	0.919***	0.95
80-84	1.34***	(ref)	0.95**	0.967	0.92*
85-89	1.35***	(ref)	0.85***	0.896***	0.92*
90+	1.14***	(ref)	0.87***	0.839***	0.92**

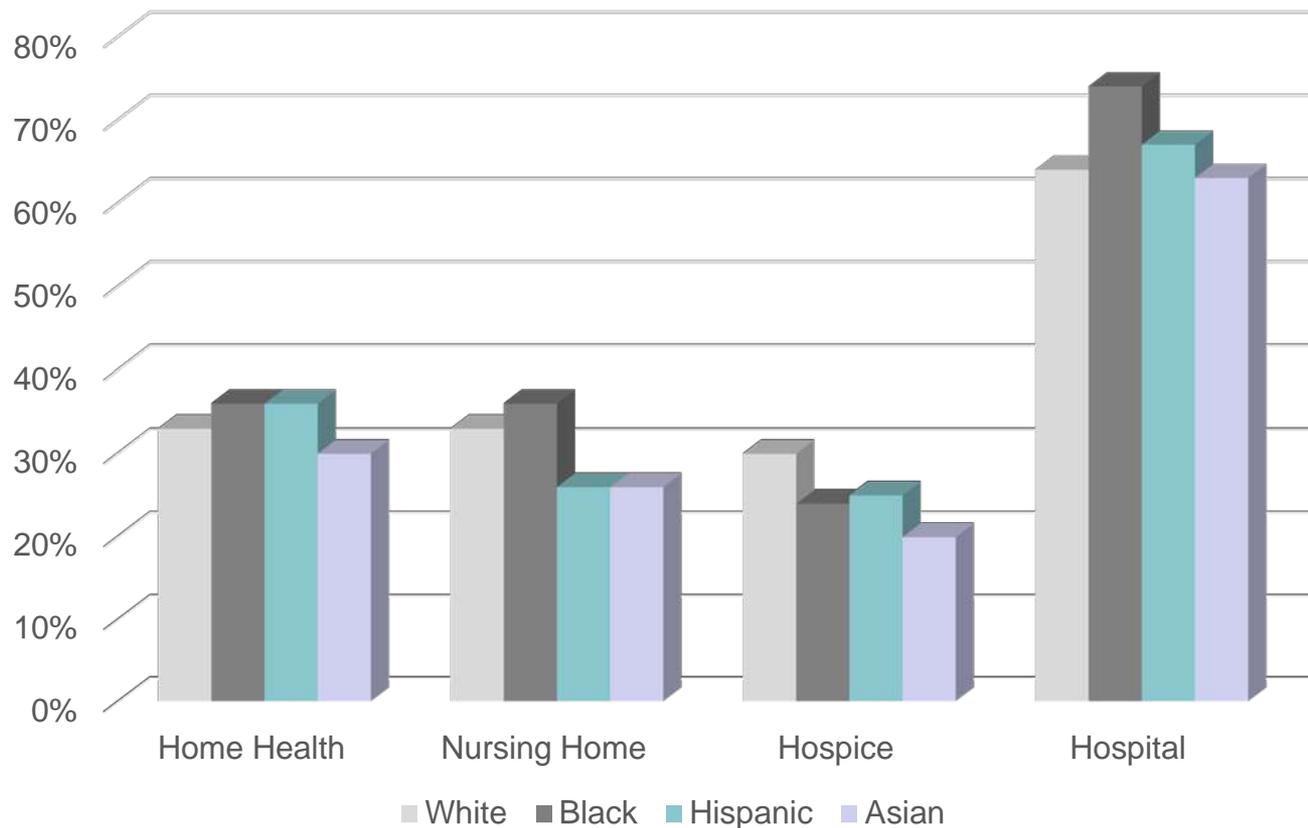
Note: 2013 national data, 10% random sample; *p < 0.05, **p < 0.01, ***p < 0.001

Variation in Survival across Race & Ethnicity, Stratified by Sex

Hazard Ratios, Stepped Models (demographics, +++)				
	+Comorbidities	+ADI ²	+State	
Black Male	0.97*	0.97*	0.97*	
Black Female	0.90***	0.90***	0.91***	
Hispanic Male	0.91***	0.91***	0.91***	
Hispanic Female	0.88***	0.88***	0.88***	
Asian Male	0.89***	0.89***	0.89***	
Asian Female	0.86*	0.96*	0.96*	

Note: 2013 national data, 10% random sample; *p < 0.05, **p < 0.01, ***p < 0.001

Variation in Health Services Utilization, Last Year of Life by Race/Ethnicity for People Living with Dementia



Variation in Survival across Use of Home Health, Stratified by Sex

	+Comorbidities	+ADI ²	+State	+Home Health
Black Male	0.97*	0.97*	0.97*	
Black Female	0.90***	0.90***	0.91***	
Hispanic Male	0.91***	0.91***	0.91***	
Hispanic Female	0.88***	0.88***	0.88***	
Asian Male	0.89***	0.89***	0.89***	
Asian Female	0.86*	0.96*	0.96*	
Home Health (Males)				
Home Health (Females)				

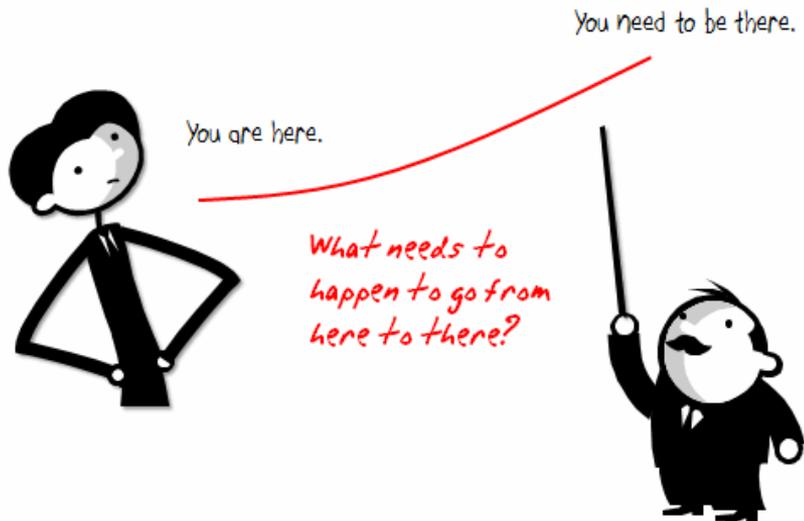
Note: 2013 national data, 10% random sample; *p < 0.05, **p < 0.01, ***p < 0.001

Variation in Survival across Sex & Age at time of Diagnosis, Stratified by Race & Use of Home Health Care

Hazard Ratios, Fully Adjusted Models (comorbidities, State, ADI) (+ Home Health)

	White	+HH	Black	+HH	Hispanic	+HH	Asian	+HH
Male	1.29***		1.36***		1.29***		1.17***	
70-74	0.88***		0.91***		0.89***		0.85***	
75-79	0.96***		0.97***		1.00		0.90***	
80-84	1.21***		1.14***		1.26***		1.13***	
85-89	1.66***		1.47***		1.70***		1.59***	
90+	1.63***		1.36***		1.48***		1.51***	

Next Steps



1. Build person-level trajectory files of health service utilization over multiple years for people living with dementia
2. Complete supplemental work to build state health policy library database related to healthy aging (data enrichment at state level)
3. Complete supplemental work to impute ethnicity detail based on residential history & self-reported race (data enrichment at person level)
4. Complete supplemental work on social determinants of health (contextual data enrichment at person level)

Next Leaps – Seeking Collaborators

Adding focus on people living with dementia and HIV/AIDS (long time survivors and people diagnosed after age 65) *team forming now

Your Ideas - What else could we do?
(with you!)

Wish List

1. Assessments to complete trajectory file (Hospital Swing Beds & Inpatient Rehabilitation) (\$10K/yr x 4 years = **\$40K**)
2. National Death Index Data (\$10K/yr x 10 years = **\$100K**)
3. Funding for Trajectories of Dementia Care Project (\$750K/yr x 4 years = **\$3M**)
4. Funding for Trajectories of Care Center *Multi-Project* (\$3M/yr x 5 years = **\$15M**)

Thank you!

Follow Olga Jarrín Montaner and
the Community Health and Aging
Outcomes Laboratory on Twitter

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