

# Elder self-neglect and abuse associated with increased risk of death

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Elderly individuals who have a report of self-neglect or abuse submitted to a social service agency have an associated increased risk of death, according to a study in the August 5 issue of *JAMA*, a theme issue on violence and human rights.

Elder self-neglect and abuse are serious, common and underrecognized public health issues in the U.S., and a 2000 survey from social service agencies suggests that these cases are increasing, according to background information in the article. But the association of either elder self-neglect or abuse with an increased risk of [death](#) has been unclear.

XinQi Dong, M.D., of Rush University Medical Center, Chicago, and colleagues investigated the risk of death associated with reported elder self-neglect or abuse in a large and sociodemographically diverse group and across different levels of cognitive and physical function. The study included residents living in three adjacent neighborhoods in Chicago who were participating in the Chicago Healthy and Aging Project (CHAP; a population-based, epidemiological study of residents age 65 years or older). A subset of these participants had suspected elder self-neglect or abuse reported to social services agencies.

The 9,318 CHAP participants had an average age of 73 years. About 40 percent were men, 63 percent were black, and the average education was 12.2 years. The 1,544 cases reported as elder self-neglect and the 113 cases reported as elder abuse tended to be older, female, black, and have a lower income and education. There were 4,306 deaths (46 percent)

during the 14 years of follow-up.

In the fully adjusted analysis, reported self-neglect was associated with a significantly increased risk of death within 1 year. The mortality risk for reported and confirmed cases after 1 year was lower, but remained increased (nearly twice the risk). White participants and men had a higher risk of death relative to others.

"This mortality risk is especially alarming during the first year after the report of elder self-neglect. These findings may have direct implications for health care professionals and social services agencies to promote early identification of elder self-neglect and prompt interventions after the discovery of self-neglect," the authors write.

Analysis also indicated that reported elder abuse was significantly associated with increased risk of overall mortality (about 40 percent). Confirmed elder abuse was associated with about a two times higher risk of death.

Increased mortality risks associated with either elder self-neglect or abuse were not restricted to those with the lowest levels of cognitive or physical function.

"... this study is the first, to our knowledge, to demonstrate increased [mortality risk](#) for reported and confirmed elder self-neglect across different levels of cognitive and physical function, challenging a belief that self-neglect and the potential for adverse health outcomes are confined to those with the most impaired cognitive and physical function. Rather, our findings suggest that even among those individuals with milder levels of cognitive and physical functional impairment, elder self-neglect is associated with substantially increased risk of death."

"These results may be useful not only in informing future research

efforts into elder self-neglect and abuse, but also to inform relevant clinical, social, and policy guidelines developed to treat and prevent elder self-neglect and abuse on a national level," the researchers conclude.

More information: *JAMA*. 2009;302[5]:517-526.

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