

Increased rates of hospitalization linked to elder abuse, researchers find

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Older adults who are subject to elder abuse, neglect and exploitation face a greater risk of being hospitalized than other seniors, according to the results of a study published in the April 8 issue of *JAMA Internal Medicine*.

"[Elder abuse](#) is independently associated with increased [mortality risk](#), especially for cardiovascular related mortality. However, the relationship between elder abuse and health services utilization still remains unclear," said Dr. XinQi Dong, a researcher and geriatrician at Rush University Medical Center and the study's lead author. "Despite recent advances in our knowledge of elder abuse, we do not know the rate of [health care services](#) utilization among those who are victimized."

"Hospitalization is a significant contributor to the rapidly increasing cost in our [health care system](#)," said Dong. "Older adult victims may be put often in situations that could threaten their health and safety, which further increase their likelihood to be more frequently admitted into the [hospital](#). However, we are not aware of any population-based study that has examined the prospective association between elder abuse and the rate of hospitalization in a community-dwelling population."

"Our study findings expand on the results of prior studies on elder abuse, but it is the only population-based study to systematically examine the association of elder abuse and rate of hospital services utilization," said Dong.

Of the 6,674 community-dwelling [older adults](#) who participated in the Chicago Health and Aging Project, researchers identified 106 participants who were identified by social services agencies for elder abuse between 1993-2010.

Chicago Health and Aging Project (CHAP) is a community-based [longitudinal study](#) of [risk factors](#) for Alzheimer's disease among older adults aged 65 and over, which began in 1993. Participants include residents of three adjacent neighborhoods on the South side of Chicago and are followed every three years.

The outcome of interest was the annual rate of hospitalization obtained from the Center for Medicare and Medicaid Services.

The study results indicate an unadjusted mean annual rate of hospitalization for those without elder abuse was 0.62 and for with reported elder abuse was 1.97 hospital admissions per year.

After adjusting for socio-demographic, socioeconomic variables, medical co-morbidities, cognitive and physical function, as well as psychological and social well being, reported elder abuse had independent higher rates of hospitalization of a rate ratio of 2.00.

Researchers found that the psychological abuse rate ratio (2.22), financial exploitation (1.75), caregiver neglect (2.43), and two more types of elder abuse (2.59) were independently associated with increased rates of hospitalization.

The mean age of those with reported elder abuse was 72.9 years. Those with reported elder abuse were more likely to be women (72 percent), black older adults (89 percent) and have lower levels of education and income.

"Elder abuse is a serious, common and under-recognized public health and human rights issue," said Dong.

According to Dong, the field of elder abuse is estimated to have lagged more than 20 years behind that of child abuse or intimate partner violence.

It is estimated that one out of 10 older adults experience some forms of elder abuse, neglect and exploitation in the United States each year.

"Given the soaring cost of [health care](#) in this country, the results may help health care providers focus on clinical screening, prevention and intervention of elder abuse cases in order to devise targeted strategies to reduce unnecessary utilization of health services." said Dong.

"With the rapidly growing aged population in this country, problems of elder abuse will likely become even more pervasive, affecting our family, friends and loved ones," Dong said. "We hope our study will help advocate for additional research and resources, as well as national policy initiatives, to improve the health and well-being of this vulnerable population."

Provided by Rush University Medical Center

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