

When older adults stop driving, they may experience health declines

January 19 2016

For older adults, driving a car is an important aspect of having control over one's life. While 81 percent of the 29.5 million U.S. adults aged 65 and over continue to hold a license and get behind the wheel, age-related declines in cognition and physical function make driving more difficult, and many seniors reduce or eventually stop driving altogether.

Researchers at Columbia University's Mailman School of Public Health examined the health and well-being of older adults after they stopped driving and found that their health worsened in a variety of ways. In particular, driving cessation nearly doubled the risk of depressive symptoms, while also contributing to diminished cognitive abilities and physical functioning. Findings are published online in the *Journal of the American Geriatrics Society*.

"For many older adults, driving is more than a privilege; it is instrumental to their daily living and is a strong indicator of self-control, personal freedom, and independence," said Guohua Li, MD, DrPH, Mailman School professor of Epidemiology, the founding director of the Center for Injury Epidemiology and Prevention at Columbia, and senior author. "Unfortunately, it is almost inevitable to face the decision to stop driving during the process of aging as cognitive and physical functions continue to decline."

Dr. Li and a team of researchers reviewed and analyzed quantitative health-related data for drivers aged 55 and older from 16 studies that met eligibility criteria and compared results with data from current drivers. The study updates and expands on earlier findings with more

than 10 additional years of empirical research.

Data showed that older adults experienced faster declines in cognitive function and physical health after stopping driving. Driving cessation was also associated with a 51-percent reduction in the size of social networks of friends and relatives—something the researchers say can constrain the social lives of seniors and their ability to engage with others. Decline in social health after driving cessation appeared greater in women than in men.

Former drivers were also nearly five times as likely as current drivers to be admitted to a nursing home, assisted living community, or retirement home, after adjusting for marital status or co-residence.

"As older ex-drivers begin substituting outside activities with indoor activities around the home, these activities may not be as beneficial to physical functioning as working or volunteering on the outside," said Thelma Mielenz, PhD, assistant professor of Epidemiology at the Mailman School and co-author. "When time comes to stop driving, it is important to make personalized plans to maintain mobility and social functions."

The researchers note that merely making alternative transportation available to older adults does not necessarily offset the adverse health effects of driving cessation. "What we need most of all are effective programs that can ensure and prolong an older adult's mobility, physical, and social functioning," said Li.

More information: Stanford Chihuri et al. Driving Cessation and Health Outcomes in Older Adults, *Journal of the American Geriatrics Society* (2016). [DOI: 10.1111/jgs.13931](https://doi.org/10.1111/jgs.13931)

Provided by Wiley

Citation: When older adults stop driving, they may experience health declines (2016, January 19)
retrieved 3 May 2024 from

<https://medicalxpress.com/news/2016-01-older-adults-health-declines.html>

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