

Association between multiple chronic conditions and hospitalizations among recipients of long-term services and supports

November 18 2016, by Christopher James

Long-term services and supports are provided to disabled persons who live in nursing homes, in assisted living facilities, and in their own homes to help maintain quality of life and independence. In the United States (US), long-term services and supports are provided to 12 million people.

With the aging of the US population, the number of persons needing long-term services and supports will increase substantially over the next several decades.

Many of the older persons receiving long-term services and supports live with multiple chronic [conditions](#). These persons are at risk for hospitalizations that can have serious consequences, such as falls and decline in function.

A recent study published in *Nursing Research* journal by New York University Rory Meyers College of Nursing (NYU Meyers) Assistant Professor Janet H. Van Cleave, PhD, RN and her study team examines the association between combinations of multiple chronic conditions and hospitalization by older adults who receive long-term services and supports.

To conduct this study, Dr. Van Cleave and her team used existing data from a National Institute on Aging and National Institute of *Nursing Research* funded study entitled "Health - Related Quality of Life: Elders

in Long-Term Care (HrQoL), R01AG025524. The researchers also used a sophisticated analysis, Latent Class Analysis, to identify subgroups of persons with specific combinations of multiple chronic conditions that likely occurred together within individuals. The identified subgroups were combinations of cardiopulmonary conditions (i.e. cardiopulmonary [class](#)), cerebrovascular/paralysis conditions (i.e. cerebrovascular class), and all other conditions (i.e. all other conditions class).

In analyzing the data, the researchers found that persons with a high probability of being in the "cardiopulmonary" class had statistically greater number of hospitalizations compared to persons with high probability of being in the "all other conditions" class. The researchers also found that persons most likely to be in the "cardiopulmonary class" or "cerebrovascular/paralysis class" were more likely to be male, Black/Other race, and reside in a nursing home. Medicaid patients were overrepresented in the "cardiopulmonary class" compared to the "cerebrovascular disease/paralysis class" or the "all other conditions class"

Dr. Van Cleave and her study team concluded that effective care management strategies are needed for early identification and intervention to prevent hospitalizations in chronically ill [older adults](#), especially those with multiple cardiopulmonary conditions. These strategies include the use of sophisticated analyses, such as latent class analysis, for early identification and intervention in populations at risk for hospitalization. Interventions that need further exploration include prevention and management of polypharmacy and transitional care from hospital to residence within services provided by medical homes.

"Ultimately, new care management strategies are needed to meet the desires and needs of persons living with multiple [chronic conditions](#) that limit their capacity for self-care," said Dr. Van Cleave.

More information: Janet H. Van Cleave et al. Multiple Chronic Conditions and Hospitalizations Among Recipients of Long-Term Services and Supports, *Nursing Research* (2016). [DOI: 10.1097/NNR.0000000000000185](https://doi.org/10.1097/NNR.0000000000000185)

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