

Rural patients with Alzheimer disease have shorter survival

October 26 2020



(HealthDay)—Rural Medicare beneficiaries with Alzheimer disease and



related dementia (ADRD) spend more time in nursing homes, receive less home health care, and have shorter survival than their urban counterparts, according to a study published online Oct. 22 in *JAMA Network Open*.

Momotazur Rahman, Ph.D., from the Brown University School of Public Health in Providence, Rhode Island, and colleagues examined linked Medicare claims (2009 through 2016) with nursing home and home health assessment data from all U.S. counties. The authors sought to assess survival and trajectories of hospital, hospice, nursing home, and home health care use among rural and urban Medicare beneficiaries with ADRD in the six years after diagnosis.

The researchers identified 555,333 Medicare fee-for-service beneficiaries newly diagnosed with ADRD in 2010. Rural and micropolitan county residents survived approximately 1.5 months less than metropolitan residents, after adjusting for individual demographic and clinical characteristics. The share of survived days spent in nursing homes was 5.7 percentage points higher for rural versus metropolitan residents in an adjusted analysis. The adjusted share of days in hospitals was 0.7 percentage points lower and the share of days in the community without home health care was 4.6 percentage points lower for rural versus metropolitan county residents. The differences in home health or hospice use were not statistically significant. While the magnitude of the differences was smaller, similar patterns were found for micropolitan versus metropolitan residents. With further time from diagnosis, differences in time spent in the community and nursing homes between rural and metropolitan beneficiaries were more pronounced.

"Initiatives to improve the supply of primary care providers in <u>rural</u> <u>areas</u>, including removing scope of practice restrictions for <u>nurse</u> <u>practitioners</u> and physician assistants, may also help to improve access to care for <u>older adults</u> with ADRD to receive timely diagnoses and



referrals to appropriate support services," the authors write.

More information: <u>Abstract/Full Text</u>

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Citation: Rural patients with Alzheimer disease have shorter survival (2020, October 26) retrieved 7 May 2024 from https://medicalxpress.com/news/2020-10-rural-patients-alzheimer-disease-shorter.html

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