

Disadvantaged older adults face greater risk of function, cognition decline after ICU admission

March 8 2022



Credit: Unsplash/CC0 Public Domain

A retrospective analysis found that socioeconomically disadvantaged older adults face a greater risk of decline in function and cognition after

an intensive care unit (ICU) hospitalization than socioeconomically advantaged older adults. These findings highlight the need to prioritize low-income seniors in rehabilitation and recovery efforts after critical illness. The study is published in *Annals of Internal Medicine*.

Older adults are more vulnerable to experiencing new or worsening impairments in function, cognition, and [mental health](#) after a critical illness, also known as post-intensive care syndrome (PICS). The number of older adults who survive an ICU stay is expected to rise in the [aging population](#) with improving survival after critical illness and the current pandemic. However, equity in patient outcomes after ICU stays has not been examined.

Researchers from Yale School of Medicine compared decline in function, cognition, and mental health between dual-enrolled Medicare and Medicaid recipients and their non-dual-eligible counterparts. Dual-enrolled [older adults](#) are known to have greater chronic disease burden and worse health outcomes for many conditions compared with non-dual-eligible Medicare beneficiaries.

The authors analyzed data of 641 patients drawn from the National Health and Aging Trends Study (NHATS), a longitudinal national survey of Medicare beneficiaries aged 65 and older. After conducting statistical analyses, the authors found that socioeconomic disadvantage was associated with a decline in function and cognition but not with symptoms of depression and anxiety after discharge from an ICU.

After accounting for risk factors including age, frailty, comorbidity, and pre-ICU disability, the authors found that dual-eligible beneficiaries developed a nearly 30% greater burden of disability than their non-dual-eligible counterparts. The authors also found that even after adjusting for confounders, dual-eligible beneficiaries had nearly 10-fold greater odds of cognitive decline after ICU hospitalization than non-dual-eligible

beneficiaries. According to the authors, post-ICU mental health symptoms seemed driven by pre-ICU mental health, although symptoms were worse among dual-enrolled beneficiaries.

More information: Snigdha Jain et al, Association Between Socioeconomic Disadvantage and Decline in Function, Cognition, and Mental Health After Critical Illness Among Older Adults, *Annals of Internal Medicine* (2022). [DOI: 10.7326/M21-3086](https://doi.org/10.7326/M21-3086).
doi.org/10.7326/M21-3086

Provided by American College of Physicians

Citation: Disadvantaged older adults face greater risk of function, cognition decline after ICU admission (2022, March 8) retrieved 5 May 2024 from
<https://medicalxpress.com/news/2022-03-disadvantaged-older-adults-greater-function.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.