Poster presentations

DETERMINANTS IN OLDER ADULTS WHO FREQUENTLY ATTEND THE EMERGENCY DEPARTMENT

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Background: Patients who repeatedly use the services of the Emergency Department (ED) over a long period, have previously been shown to account for approximately 7% of all ED patients, but account for up to 28% of all ED visits. Although older age is frequently cited as a contributing factor to frequent attendance to the ED, there are few quantitative studies which specifically consider this population making it difficult to draw conclusion about how attendances can be diverted or prevented.

Methods: All presentations over a 12 month period by those aged 65 and over were identified (n = 8,028). Using postcodes, Deprivation Indices were assigned to the sample. Using patient identifiers, multiple admissions were identified and linked. Frequent attenders (i.e. admissions ≥ 4) were matched one-to-one to non-frequent attenders using age and gender. Further information as extracted from paper records on polypharmacy, comorbidity, residential status, dependency and use of care services were studied. Logistic regressions examined predictors of frequent attenders (within both full and matched samples) and Odd Ratios (OR) estimated change in the likelihood of attending frequently.

Results: A total of 578 (7.2%) individual older adults were identified as having 4 or more attendances. Deprivation was the most significant predictor (p < 0.001) with most deprived groups having greatest likelihood of presenting frequently (OR IMD = 1 = 4.55, p = 0.04). After controlling for deprivation level, dependency (OR Dependant = 2.23, p = 0.02), number of chronic conditions (OR = 1.14, p < 0.001) and polypharmacy (OR = 0.66, p = 0.02) were also associated with frequent attendance.

Conclusion: Social determinants (e.g. deprivation and dependency) and medical factors (comorbidity, polypharmacy) were predictive of frequent attendance in the ED.

The purpose of this study was to explore characteristics of older adults who present frequently to the ED, and to examine determinants of repeated attendance.

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