Aging and schizophrenia

Results are in on one of the first large-scale studies (102,256 adults) to examine the use of medical services and psychiatric services by older persons with schizophrenia, as well as their level of functioning. Investigators studied three age groups (18-44, 45-59, and 60+), examining the relationship between age group, health care utilization, and functioning. Data on utilization was obtained from the VA National Psychosis Registry. Findings show that older adults experienced fewer psychiatric hospitalizations but, when hospitalized had longer stays (averaging 71 days yearly versus 30 days for younger adults). Additionally, older patients had fewer psychiatric outpatient visits than younger patients (averaging 20 visits compared to 29). Not surprisingly, older patients had both more medical outpatient visits and more medical hospitalizations than the younger group because they have more comorbid medical conditions, such as hypertension, diabetes, and heart disease. However, the relatively lower use of outpatient psychiatric care by older patients suggests that there may be barriers to accessing these services. This could be because older patients are more likely to be in nursing homes where they may receive less psychiatric care in general, and may be unlikely to receive structured outpatient care. With less regular follow-up, clinicians may be less likely to recognize symptoms of relapse among these patients and to intervene so that hospitalization might be avoided.

The number of people with schizophrenia who are older than 55 is increasing rapidly, and health costs associated with the treatment of older patients with this disorder are significantly greater. Thus, developing efficient, accessible services for them is very important. In addition, understanding the utilization patterns of older patients with schizophrenia will inform health care planners and policy makers who must make decisions about resource allocation and program development.


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