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Frailty indicators and preventive GP home visits to elderly patients. Result of an audit in Danish general practice

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Background: in Denmark, GPs have provided preventive home visits to frail elderly patients since 2006.

Aim: To investigate associations between elderly patients' frailty and reception of preventive home visits.

Methods: Identical audits were carried out by GPs in three areas of Denmark. During a four-week study period, the GPs filled in a questionnaire for each patient aged 75 years or older, who came to the clinic or received a home visit.

Results: 73 GPs and 41 members of staff (3.72 % of the eligible practices) recorded a total of 3133 patients. Within one year before their audit date, a preventive home visit had been provided to 332 patients (10.7 %). Reception of a preventive home visit was associated with old age, reduced walking distance, fall within one year (adjusted odds ratio (aOR) 1.68: 95% CI 1.18, 2.39), hospitalisation within one year (aOR 1.69: 95% CI 1.23, 2.32), home care (aOR 3.37: 95% CI 2.42, 4.69), dementia, depression, diabetes, COPD, and prescription of pain killers. It was negatively associated with polypharmacy (aOR 0.5: 95% CI 0.47, 0.88). Patients more often had received a preventive home visit if their GP provided preventive visits to a high proportion of his other patients recorded in the audit. Hearing and visual impairment, feeling lonely, living alone, antidepressive and anxiolytic medication were not associated with having a preventive visit.

Conclusions: Impaired mobility and chronic diseases are associated with preventive home visits. Home visits may prevent overmedication. GP home visit tendency vary considerably.