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MEDIA RELEASE

MORTALITY RATES FOR FRAIL ELDERLY IN INTENSIVE CARE

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FRAIL patients – those with a multidimensional syndrome characterised by “reduced capacity to deal with external stressors” – make up almost 40% of people aged 80 years or over in Australian intensive care units, and they are more than twice as likely to die as non-frail patients, according to the authors of research published today in the *Medical Journal of Australia*.

Frail patients were also found to be more frequently discharged to a new nursing home or chronic care admission than non-frail patients.

The findings have implications for the Australian health care system going forward, according to the authors, led by Dr Jai Darvall, an anaesthetist and intensive care specialist from Royal Melbourne Hospital and the University of Melbourne’s Centre for Integrated Critical Care.

“We found that frailty is prevalent among critically ill patients aged 80 years or more in Australia and New Zealand, and that it is associated with higher rates of in-hospital mortality and discharge to residential care,” Darvall and colleagues wrote.

“That the risk of new residential care admission is 1.6 times as high for frail as for non-frail very old patients suggests that post-recovery impairment is greater for frail patients, a finding with major implications for health care and community resource planning for frail survivors of critical illness.

“We estimate that 9000 frail patients aged 80 years or more are admitted to participating ICUs in Australia and New Zealand each year, of whom 1600 die in hospital and 450 are discharged to new nursing home or chronic care.

“These findings have important public health implications.

“Routine screening of older ICU patients for frailty could improve outcome prediction and inform intensive care and community health care planning on discharge.”

Darvall and colleagues from the Australian and New Zealand Intensive Care Society analysed data from 15 613 patients aged 80 years or older who were admitted to 178 intensive care units across Australia and New Zealand between 1 January 2017 and 31 December 2018. Of these patients, 6203 (39.7%) were deemed to be frail. A smaller proportion of frail than of non-frail patients were men (47% v 57%), the mean illness severity scores of frail patients were slightly higher than those of non-frail patients, and they were more frequently admitted from the emergency department (28% v 21%) or with sepsis (12% v 7%) or respiratory complications (16% v 12%). In-hospital mortality was higher for frail patients (17.6% v 8.2%). Median lengths of ICU and hospital stay were slightly longer for frail patients, and they were more frequently discharged to a new nursing home or chronic care facility (4.9% v 2.8%).

“Intensive care and community health care planning needs to take into account that by 2030 more than one-quarter of patients in Australian ICUs will be aged 80 years or more,” Darvall and colleagues concluded.

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