Mental healthcare and substance abuse treatment 2014-2018



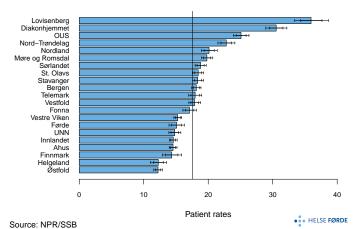
Elderly in outpatient treatment

The most common mental disorders among the elderly are the same as for the younger population and can be treated similarly. In addition, the elderly can have other, age-related challenges. In many European countries 35% of the elderly have had a mental disorder during the last year, and Norwegian studies show an increased prevalence of depression among the elderly. The prevalence of dementia is 5-10% among the elderly. Mental health issues are often complex, and assessment and treatment occurs both in the primary healthcare service as well as in geriatrics, neurology, geriatric psychiatry and general psychiatry and outpatient clinics. These services are organised differently in different parts of Norway.

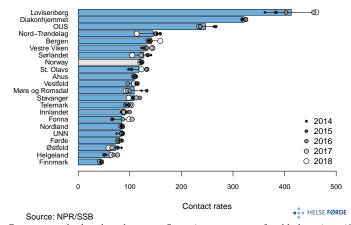
Sample and definitions

Patients at the age of 65 and older who in 2014-2018 had at least one outpatient contact in mental healthcare, interdisciplinary specialised addiction treatment (TSB) or private specialists under public funding contracts are included.

Outpatient contacts are defined as contacts where a patient (or next of kin) was physically present, and was admitted and discharged on the same day (includes both outpatient contacts as well as day care). Indirect outpatient contacts are not included here.



Patient rates for outpatient treatment in mental healthcare and interdisciplinary specialised addiction services: Number of elderly patients (65 years and older) per 1,000 population, broken down by hospital referral area. The bars show the average values per year for the period 2014–2018, with pertaining 95% and 99.8% confidence intervals. The vertical line indicates the average for Norway as a whole. The rates have been adjusted for age and gender.

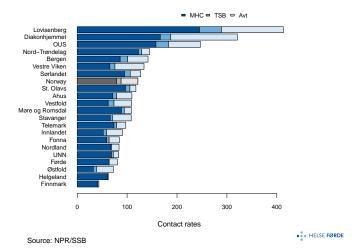


Contact rates, broken down by sector. Outpatient contact rate for elderly patients (65 years and older), broken down by hospital referral area and for Norway as a whole, percentage distribution broken down by the sectors mental healthcare (MHC), interdisciplinary specialised addiction treatment (TSB) and mental healthcare specialists in private practice under public funding contracts (Avt). The bars show average values per year for the period 2014–2018. The rates have been adjusted for age and gender.

Results

Each year 15,000 elderly were admitted for outpatient treatment in mental healthcare, interdisciplinary specialised addiction treatment or mental healthcare specialists – 104,000 outpatient contacts in Norway in total.

The patient rate varied across hospital referral areas from 12 to 36 adults in outpatient treatment per 1,000 population a year. The contact rate varied from 44 to 413 contacts per 1,000 population a year, with an average of 122. Elderly patients had on average 4 outpatient contacts a year, varying from 2 to 12 contacts across hospital referral areas.



Contact rates, broken down by sector. Outpatient contact rate for elderly patients (65 years and older), broken down by hospital referral area and for Norway as a whole, percentage distribution broken down by the sectors mental healthcare (MHC), inter-disciplinary specialised addiction treatment (TSB) and mental healthcare specialists in private practice under public funding contracts (Avt). The bars show average values per year for the period 2014–2018. The rates have been adjusted for age and gender.

Comment

The variation in outpatient treatment is particularly large for elderly patients. The elderly in Norhern Norway have a considerably lower outpatient contact rate than elderly elsewhere, with the highest rate in South-Eastern Norway. The contact rate, patient rate and outpatient contacts per patient is highest in Oslo, where the use of mental healthcare specialists is also high. The contact rate for elderly is lower than for adults, children and adolescents, and the variation across hospital referral areas is higher for the elderly than for other patient groups.

The high variation in outpatient treatment of patients with severe disorders raises concern of underuse of services in parts of the country, and that it is unwarranted as well.

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