

# Characteristics, service use and mortality of clusters of multimorbid patients in England: a population-based study

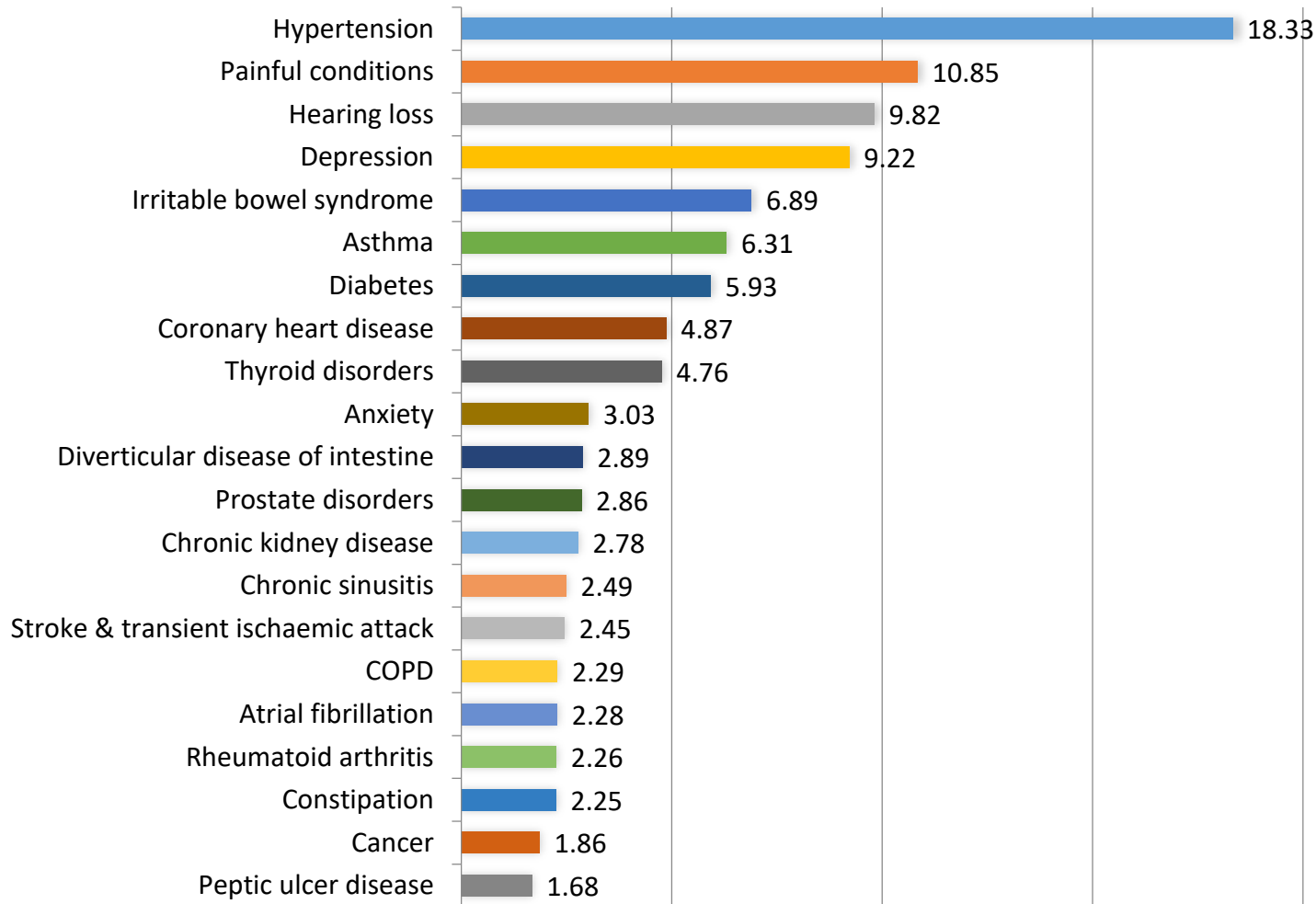
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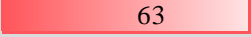
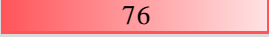
## Data: English primary care electronic health records (CPRD)

- 113,000 multimorbid / 400,000 adult patients
- 4 age groups, 38 chronic conditions

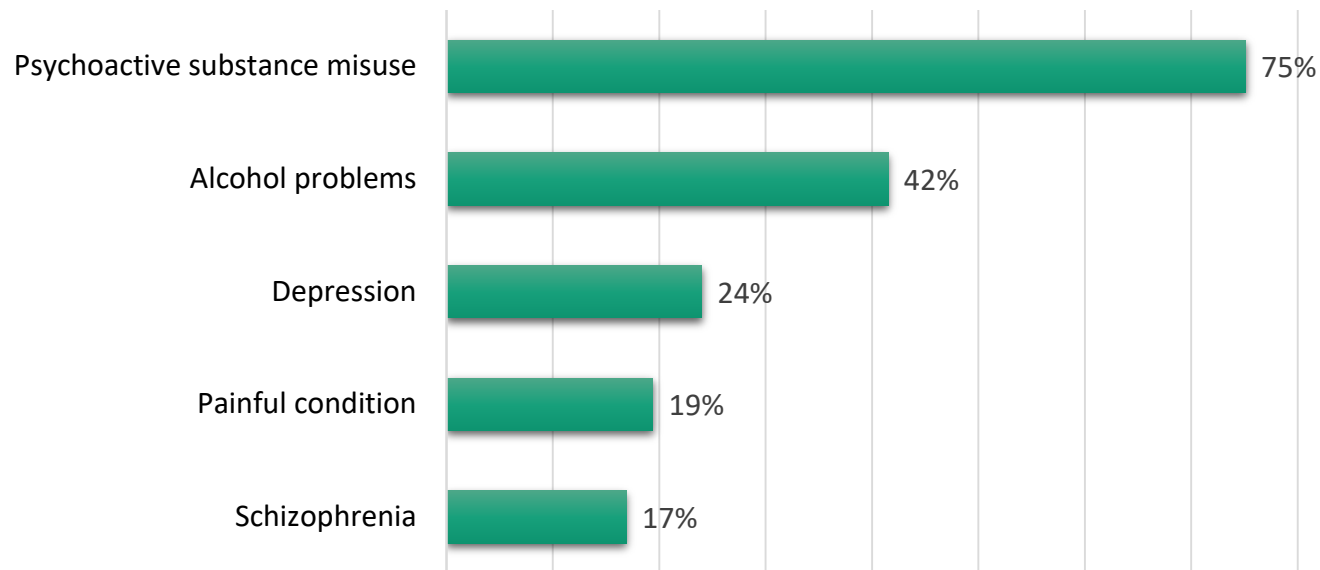


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# 18 – 44 year olds

Lead condition	Multimorbid patients	Greater deprivation	Current smokers	5-year mortality	# GP contacts in a year
(%)	(%)	(%)	(%)	(%)	(Median [Q1-Q3])
<b>Non-multimorbid</b>				<b>0.2</b>	<b>1 [0-5]</b>
Depression (100%)	 32	 50	 46	1.8	12 [5-20]
Pain (36%)	 23	 46	 27	2.7	9 [3-17]
Asthma (100%)	 20	 41	 29	0.6	9 [4-16]
IBS (100%)	 18	 37	 28	0.4	8 [3-15]
PSM (75%)	 7	 63	 76	3.9	7 [1-16]

## Most prevalent 5 conditions in the **highest** mortality cluster

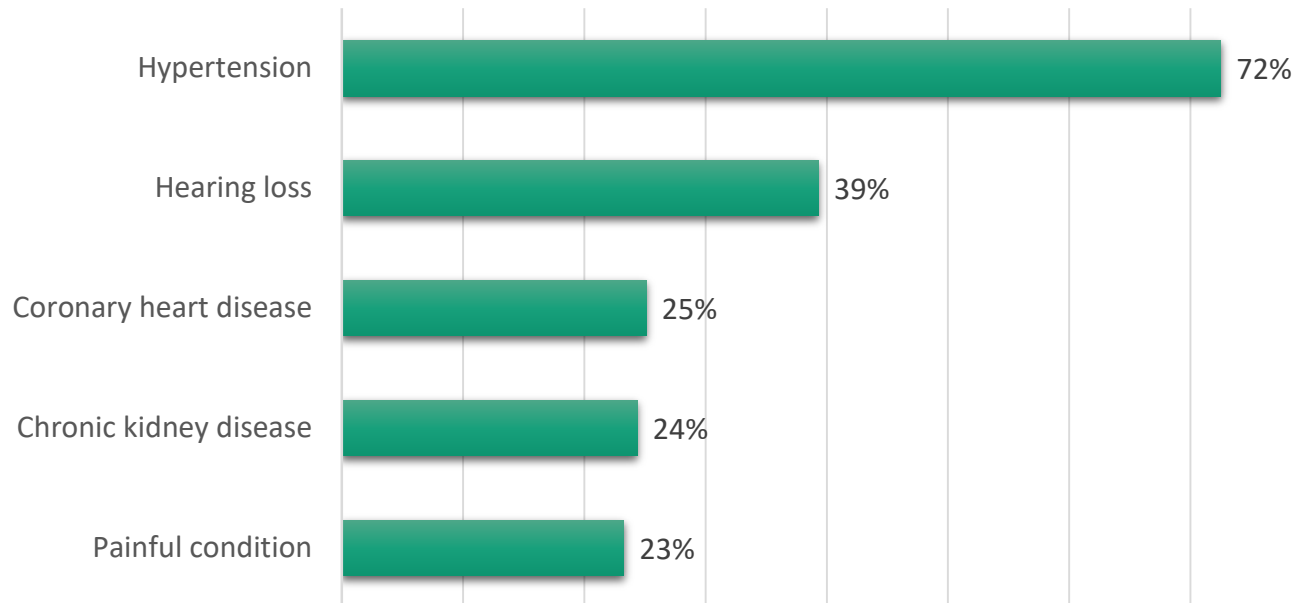


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# 85+ year olds

Lead condition	Multimorbid patients	Greater deprivation	Current smokers	5-year mortality	# GP contacts in a year
(%)	(%)	(%)	(%)	(%)	(Median [Q1-Q3])
<b>Non-multimorbid</b>				<b>36.0</b>	<b>0 [0-2]</b>
Hypertension (72%)	58	30	5	49.5	4 [0-6]
Pain (64%)	23	30	5	62.9	7 [4-10]
CHD (61%)	11	30	4	70.8	8 [5-11]
Asthma (48%)	8	30	8	56.5	7 [4-10]

Most prevalent 5 conditions in the **lowest** mortality cluster



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# Evidence-based policy implications

- Unmet need to improve outcomes for **younger multimorbid patients with psychoactive substance misuse** given that risk factors (drug use, smoking, deprivation) are amenable to intervention
- We show that the **majority of 85+ year old multimorbid patients belong to a cluster with relatively low service use and mortality** for that age group
- Supports the need for **parity of physical and mental health** within the healthcare system

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