

Kathleen Martin is an attorney with O'Donnell, Weiss & Mattei, P.C., and a newspaper columnist for The Mercury, which gave permission for this article to be reprinted.

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## **Listen to your doctor and you'll be healthy longer**

There have been two opposing theories regarding whether Americans, who are living longer, will be healthier longer, or will be sicker longer. The first theory, formulated in 1980, has Americans living longer in a relatively healthy state, with chronic, irreversible illness being compressed into a shorter period of time before death. On the other hand, in the mid-1970's, the expansion theorists postulated that longer life would be associated with a prolonged period of disability, leaving us sicker longer.

Tim Takacs, Esquire, in the February 26, 2007 issue of *Elder Law Fax*, ([www.tn-elderlaw.com](http://www.tn-elderlaw.com)) reports on a number of recent studies that point to evidence that the "compression theory" is being proven by the facts. In other words, chronic disability among Americans has dropped dramatically, even as the average age of older Americans increases. Furthermore, the rate of decline in chronic disability among people 65 years old and older had accelerated.

The prevalence of chronic disability among older Americans has fallen from 26.5 percent in 1982 to 19 percent in 2004/2005, according to an analysis of data from the National Long-Term Care Survey (NLTC). The proportion of people without disabilities increased the most in the oldest age group (also the fastest growing age group), rising by 32.6 percent among those 85 years and older. Researchers have noted that environmental modifications, assistive technologies, and biomedical advances may be factors in the decline of severe impairments.

The data showing improvement in chronic disability is directly linked to a decrease in health care spending. For instance, the percentage of Medicare enrollees who lived in institutions such as nursing homes dropped from 7.5 percent to 4.0 from 1982 to 2004/2005. Improved rehabilitation services, changes in Medicare reimbursement policies, and the emergence of assisted living options may have fueled this change. The downward trend in chronic disability rates could help bolster the Medicare program's fiscal health.

Americans have an excellent opportunity to prevent age-related illnesses from becoming disabling. In an unrelated study, 40 percent of seniors responding to a survey prepared by a research team, led by Ira B. Wilson, M.D., of Tufts-New England Medical Center reported not adhering to their doctor's orders regarding their medication regimes. Every year, many of thousands of Americans are hospitalized simply because they did not take their medications prescribed by their doctor. For those people with multiple chronic conditions, 54 percent had two or more prescribing physicians, and 36 percent use more than one pharmacy. Therefore, there is no guarantee that any one doctor is coordinating that person's medication regime.

Seniors who reported cost as a factor for not complying with their medication regime, many did not talk with their physician about the cost factor, even though there were less expensive alternatives available. Additionally, 27 percent of respondents who skipped doses, stopped taking the medication due to side effects, or simply decided not to take the medication any longer did not inform their doctors.

Communication with one's physician is an important quality and safety issue. If the decline in chronic disability is to continue, and as we strive to stay healthier longer, we need to use all of the tools at our disposal to insure this outcome.