Brief Introduction to the National Health and Aging Trends Study (NHATS)

Donovan T. Maust, MD, MS
University of Michigan
Brief Introduction to the National Health and Aging Trends Study (NHATS)

Donovan T. Maust, MD, MS

Support
This work was supported by National Institute on Aging of the National Institutes of Health (award No. P30 AG066582).

Disclaimer
The content is solely the responsibility of the presenter and does not necessarily represent the official views of the National Institutes of Health or the University of Michigan.
Outline
• What is NHATS?
• How do you identify dementia in NHATS?
• Example papers
• Where do you find the data?

National Health & Aging Trends Study (NHATS)
• NIA-funded, nationally representative sample of Medicare beneficiaries ≥65 years of age
• “Annual, in-person interviews collect detailed information on the disablement process and its consequences.”
• Started in 2011
What’s in it?
• A lot.
  − Physical / cognitive / functional capacity
  − Assistance to help with daily activities
  − Technological environment
  − Living arrangements
  − Economic status
  − Last month of life interview administered to informants of respondents who die between rounds

Physical / cognitive / functional capacity
• Functional capacity
  – Mobility (e.g., going outside of one’s home)
  – Self-care (e.g., eating)
  – Household Activities (e.g., doing laundry or shopping)
  – Medical care activities (e.g., handle prescription medications)
What’s in it?
• A lot.
  - Physical / cognitive / functional capacity
  - Assistance to help with daily activities
  - Technological environment
  - Living arrangements
  - Economic status
  - Last month of life interview administered to informants of respondents who die between rounds

Assistance to help with daily activities
  - People?
  - Devices?
  - Home modifications?

What’s in it?
• A lot.
  - Physical / cognitive / functional capacity
  - Assistance to help with daily activities
  - Technological environment
  - Living arrangements
  - Economic status
  - Last month of life interview administered to informants of respondents who die between rounds

Technological environment
  - Cell phone?
  - Computer?
  - Use tech to do tasks like shopping, bill paying, contact medical providers
What’s in it?
• A lot.
  − Physical / cognitive / functional capacity
  − Assistance to help with daily activities
  − Technological environment
  − Living arrangements
  − Economic status
  − Last month of life interview administered to informants of respondents who die between rounds

Living arrangements
− Type of residence
− Features of home environment, incl environmental modifications (e.g., shower grab bar)
− Household information incl spouse/partner, who lives with respondent

What’s in it?
• A lot.
  − Physical / cognitive / functional capacity
  − Assistance to help with daily activities
  − Technological environment
  − Living arrangements
  − Economic status
  − Last month of life interview administered to informants of respondents who die between rounds

Economic status
− Insurance plans
− Labor force participation
− Home ownership
− Income and assets
− Car ownership
− Economic well-being
What’s in it?
- A lot.
  - Physical / cognitive / functional capacity
  - Assistance to help with daily activities
  - Technological environment
  - Living arrangements
  - Economic status
  - Last month of life interview administered to informants of respondents who die between rounds

Last month of life
- Whether respondent experienced pain, breathing troubles, anxiety/sadness
- Surrogate input into decisions re: care/treatment, whether respondent's personal care needs were met
- Interaction with doctors and medical professionals, including attention to religious beliefs.

NHATS Add-ons:
- Medicare claims
  - As part of consent, respondents agree to Medicare linkage
- NSOC (National Study of Caregiving)
  - A survey of caregivers of NHATS respondents, where respondents indicated receiving help on mobility, self-care, or household activities
How is dementia identified?

- Probable dementia based on 3 data pieces:
  - **Cognitive instruments:**
    memory, orientation, name of POTUS/VP
  - **Self- (or proxy-) report** of doctor’s diagnosis
  - **AD8** administered to proxy respondent, e.g.:
    o Difficulty remember the month or year?
    o Repeating questions, stories, or statements?
    o Difficulty remembering appointments?

- Technical paper + stata code available here: https://nhats.org/researcher/nhats/methods-documentation?id=technical-papers
NHATS + NSOC

The Disproportionate Impact Of Dementia On Family And Unpaid Caregiving To Older Adults

By Judith D. Kasper, Vicki A. Freedman, Brenda C. Spillman, and Jennifer L. Wolff

Exhibit 1: Assistance With Activities Received By Adults Ages Sixty-Five And Older Not Residing In A Nursing Home, By Dementia Status, 2011

<table>
<thead>
<tr>
<th>All Older Adults</th>
<th>Dementia</th>
<th>No dementia</th>
<th>All</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number (millions)</td>
<td>36</td>
<td>33.4</td>
<td>37.0</td>
</tr>
<tr>
<td>Percent</td>
<td>9.7%</td>
<td>90.3%</td>
<td>100.0%</td>
</tr>
<tr>
<td>Type of assistance</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Any self-care activities</td>
<td>53.1%</td>
<td>10.7%***</td>
<td>14.9%</td>
</tr>
<tr>
<td>Any household activities</td>
<td>73.9</td>
<td>17.0***</td>
<td>22.7</td>
</tr>
<tr>
<td>Self-care or household activities</td>
<td>77.2</td>
<td>20.3***</td>
<td>25.1</td>
</tr>
</tbody>
</table>

Exhibit 4: Hours Of Assistance Per Month From Family And Unpaid Caregivers To Adults Ages Sixty-Five And Older Not Residing In A Nursing Home, By Dementia Status, 2011

<table>
<thead>
<tr>
<th>Caregiving hours</th>
<th>Total hours</th>
<th>Mean hours per caregiver</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dementia</td>
<td>49.9%</td>
<td>59.1%</td>
</tr>
<tr>
<td>No dementia</td>
<td>81.7%</td>
<td>81.7%</td>
</tr>
</tbody>
</table>

NHATS + Medicare

Do Caregiving Factors Affect Hospitalization Risk Among Disabled Older Adults?

Halima Awidi, MD, MPH,*'† John Mukasy, MSPH,‡' Judith D. Kasper, PhD,*’ Julia Burgdorf, PhD,** David L. Roth, PhD,*† Ken Covinsky, MD, MPH,* and Jennifer L. Wolff, PhD‡" DOI: 10.1111/jgs.16817

Caregiver Characteristic

Support group use

Respite care use

Financial strain

Emotional strain

Physical strain

(B) Hazard Ratio

0.25 0.5 0.75 1.0 1.25 1.5 1.75 2.0
Go to the source:
https://nhats.org/researcher/nhats/videos

Work with us!

_center to Accelerate Population Research in Alzheimer’s_

https://capra.med.umich.edu/
Thanks.