Describing trends in health service use for persons living with dementia in rural and urban areas of Quebec

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Population 65+ in Quebec
1,462,672
Total diagnosed with Dementia
223,969
% women
62.7%
SAC 1
65.46%
SAC 2
3.14%
SAC 3
11.15%
SAC 4
5.07%
SAC 5
10.98%
SAC 6
3.90%

Results
• From 2000-2017, the number of visits to a PCP during the year following diagnosis decreased for urban PWD (SAC1), while visits to a PCP the year following diagnosis for rural PWD (SAC6) remained stable.
• Until 2010, rural PWD had fewer visits to a PCP compared to urban PWD. This difference disappeared thereafter.

Discussion
• Findings provide an initial portrait of secular trends in the dementia population for the access to a primary care physician.
• Characterizing access to primary care for PWD is essential to inform decision-makers for the implementation of adequate policies and promote equity in dementia care.
• The next steps are to analyze remaining indicators and adjust/standardize indicators.

Background
• Patients living with dementia (PWD) receive lower quality care; specifically, late diagnosis, inadequate follow-up, duplicate tests and poor continuity of care leading to higher use of services.
• Rural residents are more likely to face barriers in obtaining access to a primary health care physician (PCP) due to distance and resource distribution.
• Evidence gap: how rurality relates to PWD and access to a PCP is less-known.

Objectives
The aim of this study is to describe the visits to a primary care physician among persons living with dementia in urban and rural contexts.

Methods
Design
Repeated, annual cross-sectional cohort design using administrative databases from the Institut national de santé publique du Québec between 2000 and 2017.

Population
Community-dwelling adults 65+ in Quebec with a new diagnosis of dementia. All incident cases of dementia occurring between April 1st and March 31st for each year were included. Dementia diagnosis was ascertained using a validated algorithm.

Rurality was defined by a Postal Code Conversion File which includes 8 Statistical Area Classification (SAC) types. SAC1 is the most urban, SAC6 is the most rural.

Indicators
The number of visits to a primary care physician is the indicator for health care service utilization that was selected from a previously developed framework.

Analysis
Visual and graphical analysis of indicators adjusted for person-time and standardized for age with added confidence intervals are displayed.

Conclusions & Next Steps
• Findings provide an initial portrait of secular trends in the dementia population for the access to a primary care physician.
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Acknowledgements
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