# CHANGE IN THE MULTIDIMENSIONAL PROGNOSTIC INDEX SCORE BASED ON A STANDARD COMPREHENSIVE GERIATRIC ASSESSMENT DURING HOSPITALIZATION IN ELDERLY PATIENTS

## ABSTRACT

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**AIMS & OBJECTIVES:**

1. To find the change in MPI score based on a standard CGA between admission and discharge in hospitalised elderly patients
2. To study the use of MPI score based on standard CGA in assessing the patient's health status and in tracking and monitoring the progress of hospitalized elderly patients

**METHODOLOGY**

**STUDY CENTRE:** Geriatric Medicine Ward – Male & Female Wards

Rajiv Gandhi Government General Hospital, Chennai – 3.

**STUDY DESIGN**: Cross Sectional Study

**PERIOD OF STUDY:** 6 months (March 2017-August 2017)

**SAMPLE SIZE:** 200 patients

**INCLUSION CRITERIA:** Persons aged above 60 years

- Admitted directly to geriatric ward with acute or acute on chronic problems, willing for study

**EXCLUSION CRITERIA:** Persons aged above 60 years

- Admitted in geriatric ward with acute or acute on chronic problems, not willing for study
- Transferred in from medicine ward with acute or acute on chronic problems
- Admitted in moribund state

## PROCEDURE:

Patients will be selected as per above said inclusion & exclusion criteria. Patients will be evaluated with multidimensional prognostic tool which is based on 8 domains of Comprehensive Geriatric Assessment inclusive of 63 items on the day of admission. Patients will be divided into low risk, moderate risk and severe risk of mortality on the basis of previously established cut-offs. The MPI score evaluation will be repeated at the time of discharge of the patients. Variation of MPI scores will be analysed for difference of values at the time of admission and discharge.

## RESULTS:

Overall MPI score tended to decline between admission and discharge suggesting an improvement in health status during hospitalization (t value 17.566 $p<0.001$). The individual tools used in MPI has been studied and it is found that all the tools used in MPI except the cohabitation status has declined significantly ($p<0.001$). Both the admission MPI score and discharge MPI score did not vary significantly between male and female patients ($p=0.400$ & $p=0.677$). Patients with mild risk of mortality had decreased length of hospital stay and patients with severe risk had an increased length of hospital stay.

## CONCLUSION:

The study determines that MPI, a validated prognostic tool, based on a standard CGA, is also very sensitive to change during hospitalization in elderly patients. It can be used to track clinical evolution of patients in the hospital and predict the length of hospital stay to an extent. These results can serve as a beginning for using CGA based tools in monitoring the hospitalised patients and guiding physicians in decision making and thereby improving the quality of life of the elderly. Further studies are needed to formally demonstrate the clinical efficacy of CGA.

## KEYWORDS:

CGA, Hospitalization, Elderly, MPI, Geriatric Assessment