

# 15 Conclusion

This is the first study to comprehensively examine older patients attending general practice in Australia. Issues such as risk factors for ill health, changes that have occurred in the general practice management of older patients over the last decade and the impact of chronic conditions in this population have also been investigated.

GPs clearly play a significant role in the care and management of the health of older patients, with approximately 90% of older people attending a GP at least once per year and these accounting for approximately one-quarter of total general practice consultations.

Older people have many health conditions requiring management by the GP. They present to the GP with more RFEs than the overall population, and have more problems managed during the consultation. Chronic conditions are managed at the majority of encounters, reflecting the high prevalence of the most common chronic conditions in this patient population. Relatively high rates of co-morbidity are also apparent. This study has also provided a comprehensive national overview of encounters of EPC items recorded by GPs, a program designed to assist GPs in the management of patients with chronic and complex care issues.

Treatments provided to older patients differ considerably from those given in the overall BEACH sample. Both medication rates and rates of provision of non-pharmacological treatments (such as advice and counselling) are higher than those of the total patient sample. GPs have been encouraged to promote healthy ageing strategies to their older patients, in terms of minimising the impact of risk factors for chronic conditions, including weight management, smoking cessation and responsible alcohol consumption. The current study has provided evidence that GPs have accepted this role by providing many older patients with advice regarding weight and nutrition. The proportions of older patients who either smoke or consume at-risk levels of alcohol are relatively low. In terms of body mass, GPs should be vigilant for both obesity and underweight in their older patients, as both may be regarded as risk factors for poor health and increased risk of mortality.

Many changes have occurred in the last decade, both in the conditions experienced by older patients and in the methods used to manage those conditions. All types of treatment have increased in management rates, reflecting both the increase in medications available for health conditions prevalent in this age group and the increased use by GPs of advice and counselling.

While previously published studies of the older population have focused on injuries resulting in hospital admissions or death, this study has examined for the first time injuries managed at general practice encounters with older patients. This has shown that GPs are more likely to treat falls resulting in minor injuries such as cuts and bruises. However, evidence that minor falls increase the risk of falling again suggests that GPs are in an ideal position to recognise this risk, and recommend methods to reduce the risk of falling.

Previous research has often been criticised for treating older people as a single homogenous group. This study examined the overall population aged 65 years or more, and then compared aspects of care for those aged from 65 to 74 years, and those aged 75 years or more. This has demonstrated that there are many differences between these two groups, both in terms of the health conditions experienced, and in the management techniques used to treat them.

While many aspects of encounters with older patients in general practice have been discussed in this study, there are a number of areas that provide potential for future research. Nutritional intake, self-rated health and severity of illness are three areas of particular interest in the older population that could be examined using BEACH. Detailed investigation of patient encounters covered by the DVA may determine differences in aspects of health of this patient group compared with the overall older population. It may also be useful to examine the characteristics of home visits and visits in aged care facilities to determine whether different types of problems are managed at these encounters.

Research surrounding issues related to the ageing of the population has been encouraged in the National Strategy for an Ageing Australia.<sup>15</sup> This report has addressed this issue and has provided a baseline measure of the management of older patients in general practice. With an increased focus on population ageing, and its associated economic and social impacts, it will be interesting to compare the current findings with future studies. In particular, changes to the funding structures of general practice, and advances in investigation and treatment options may impact on the future management of older patients in general practice.