Rheumato-Geriatric Day

Years Lived with Disability of Dorsopathies in Monastir-Tunisia, 2002–2013

Chelly S

Hajjaj M

Kacem M

Dhouib W

Klai W

Missaoui H

Ben Fredi M

Abroug H

Zemni I

Green A

Djobbi A

Bouannene I,

El Mhamdi S

Belghuith Sriha A

Department of Preventive Medicine and Epidemiology of Monastir

Please cite this article as: Chelly S. et al. Years Lived with Disability of Dorsopathies in Monastir-Tunisia, 2002–2013. Middle East Journal of Age and Ageing. 15(3):59. DOI: 10.5742MEJAA.2018.93571

ABSTRACT

Background: As the most common form of joint disease, dorsopathies are associated with an extremely high economic burden. This burden is largely attributable to the effects of disability, recidivism and the treatment. We aimed to determine the years lived with disability of hospitalized cases of dorsopathies in the region of Monastir over 12 years.

Methods: We have included all hospitalizations for dorsopathies (using ICD-10) at the university hospital of Monastir between 2002 and 2013. Enrolled patients were residents of Monastir. Data were collected from the regional register of hospital morbidity and mortality implemented at the Department of Preventive Medicine and Epidemiology. The burden is measured in Disability Adjusted Life Years (DALYs) which is the sum of YLDs (years lived with disability) and YLLs (years of life lost).

Results: A total of 462 hospitalizations for dorsopathies were notified from 2002 to 2013. About three quarters are under 75 years old (76.4%) with female predominance. The median length of stay was 10 days. The estimation of YLDs was 5.4/100,000 inhabitants. YLDs was 4.89/100,000 inhabitants for men against 5.86/100,000 inhabitants in women. No lethality was noted.

Conclusion: This burden can be underestimated since we include in this study only severe cases who required hospitalization. Exercise may be an effective strategy for preventing disability and, consequently, may prolong older persons' autonomy.