

Title	Predicting 1#year mortality in older hospitalized patients: external validation of the HOMR Model
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Sex	Points	ED visits	Points	Home O ₂	Points	Admitting service	Points
Female	0	Female	0	No	0	Medicine	
Male	1	Male	1	Yes	1	General medicine	10
Admission directly to ICU	Points	Admissions by ambulance	Points	Sex	Points	Cardiology	8
No	0	0	0	No	0	Gastroenterology/ nephrology/ neurology	9
Yes	1	1	3	Yes	1	Palliative care	28
		2	4			Heamatology/ oncology	14
		≥3	5			Gynecology	7
Diagnostic Risk Score						Surgery	
See Appendix						General surgery	8
						Cardiovascular surgery	9
						Neurosurgery	10
						Orthopedic/ plastic surgery	7
						Thoracic/ transplant surgery	7
						Trauma	8
						Urology	6
Charlson Comorbidity Index score							
Diagnosis	Points	Diagnosis	Points				
Myocardial infarction	1	Diabetes with chronic complications	2				
Heart failure	2	Hemi- or paraplegia	1				
Peripheral vascular disease	1	Renal disease	3				
Cerebrovascular disease	1	Nonmetastatic cancer	2				
Dementia	3	Moderate to severe liver disease	4				
Chronic respiratory disease	2	Metastatic cancer	6				
Mild liver disease	2	HIV infection	4				
Diabetes without complications	1	Total comorbidity score					
Charlson Comorbidity Index score: Age x comorbidity							
Age, yr	0	1	2	3	4	5	≥6
20-24.9	0	3	5	7	8	9	10
25-29.9	2	5	7	9	10	11	11
30-34.9	4	7	9	11	12	12	13
35-39.9	7	9	11	12	13	14	15
40-44.9	8	11	13	14	15	15	16
45-49.9	10	13	14	15	16	17	17
50-54.9	12	14	16	17	17	18	18
55-59.9	14	16	17	18	19	19	17
60-64.9	15	17	18	19	20	20	18
65-69.9	17	19	20	21	21	22	20
70-74.9	18	20	21	22	22	23	21
75-79.9	20	21	22	23	23	24	22
80-84.9	21	23	23	24	24	25	25
85-89.9	23	24	25	25	25	26	26
90-94.9	24	25	26	26	26	27	27
≥95	25	26	27	27	27	28	28
Living status/ admission urgency x admissions by ambulance							
No. of admissions by ambulance							
	0	1	2	≥3			
Living status							
Home, independent	0	0	0	0			
Rehabilitation facility	3	3	2	2			
Home with home care	4	3	3	3			
Nursing home	4	4	4	3			
Chronic care hospital	8	6	5	5			
Admission urgency							
Elective	0	0	0	0			
ED, no ambulance	3	1	0	0			
ED, ambulance	5	2	1	0			
Covariate							
Total points							
Sex							
ED visits							
Home O ₂							
Diagnostic Risk Score							
Admission to ICU							
Admissions by ambulance							
Urgent readmission							
Admitting service							
Age x comorbidity							
Living status x admissions by ambulance							
Admission urgency x admissions by ambulance							
Total HOMR score							

Supplementary appendix S1: The original HOMR model. Covariates used to calculate a patient's Hospital-patient One-year Mortality Risk (HOMR) score. ED = emergency department. ICU = intensive care department.

<i>Dependent variable:</i>	
1 year post-hospitalization mortality	
DRS	0.11 (0.07, 0.15)
sqrt(Age)	1.45 (0.60, 2.30)
Male (vs Female)	0.44 (0.12, 0.77)
Rehab	0.82 (-1.75, 3.38)
Homecare	1.16 (-0.24, 2.56)
Nursing Home	1.56 (0.13, 2.99)
log(CCI)	2.78 (-2.76, 8.33)
sqrt(Ed visits in the previous year + 1)	0.16 (-1.23, 1.55)
1/(Admissions by ambulance in previous year +1)	-2.03 (-4.75, 0.70)
Other (vs General Medicine)	-0.68 (-1.58, 0.22)
ED w/o Ambulance	-0.83 (-3.16, 1.49)
ED w/Ambulance	-1.21 (-3.41, 0.98)
Urgent readmission	0.60 (0.07, 1.12)
Sqrt(Age) log(CCI)	-0.23 (-0.84, 0.38)
Rehab 1/(Admissions by ambulance in previous year +1)	-0.15 (-3.66, 3.36)
Homecare 1/(Admissions by ambulance in previous year +1)	0.31 (-1.23, 1.85)
Nursing Home 1/(Admissions by ambulance in previous year +1)	-0.20 (-1.91, 1.52)
ED w/o Ambulance 1/(Admissions by ambulance in previous year +1)	1.04 (-1.73, 3.81)
ED w/Ambulance 1/(Admissions by ambulance in previous year +1)	1.91 (-0.71, 4.53)
Intercept	-14.79 (-22.86, -6.72)
Observations	1,409
Log Likelihood	-523.28
Akaike Inf. Crit.	1,086.55
<p>Note: Admitting service recoded to General Medicine vs Other, due to small call sizes. ICU admission from the model was omitted as there were only 3 cases of this happening. Home O2 was omitted from the model since no patients in our sample were using it.</p>	

Supplementary Appendix S2: Re-estimated HOMR model with regression coefficients. CCI = Charlson Comorbidity Index; ED = emergency department; ICU = Intensive care unit.

Model	Description	C-Statistic: Derivation	Validation	Independent validation
HELP, 2000 ²⁸	Patients ≥80 years, emergency admissions	C= 0.73 (N=1266)	C=0.74 (N=150)	-
Walter et al, 2001 ²⁹	Patients ≥70 years, discharged from general medicine service	C=0.75 (N=1495)	C=0.79 (N=1427)	C=0.72 ²⁵ (N=100; patients ≥75; 1 year mortality prediction)
BISEP, 2003 ³⁰	Patients ≥70 years, admitted under general medicine service	C=0.83 (N=525)	C=0.77 (N=1246)	C=0.72 ²⁵ (N=100; patients ≥75; 1 year mortality prediction)
CARING, 2006 ³¹	Adult patients admitted under general medicine service	C=0.82 (N=435)	C=0.79 (N=1064)	C=0.63 ²⁵ (N=100; patients ≥75; 1 year mortality prediction)
Levine et al, 2007 ³²	Patients ≥65 years discharged from general medicine service	C=0.67 (N=2739)	C=0.65 (N=3643)	C=0.64 ²⁵ (N=100; patients ≥75; 1 year mortality prediction)
MPI, 2008 ³³	Patients ≥65 years admitted to geriatric unit	C=0.75	C=0.75 ³⁴	-
SAFES, 2008 ³⁵	Patients ≥75 admitted through the emergency department	C=0.72 (N=870)	C=0.71 (N=436)	-
Silver Code, 2010 ³⁶	Patients ≥75 admitted through the emergency department	C=0.66 (N=5457)	C=0.64 (N=5456)	0.51 ²⁵ (N=100; patients ≥75; 1 year mortality prediction)
HOMR, 2014 ⁵	Adult patients of all ages admitted under non-psychiatric hospital services	C=0.92 (N=319 531)	C=0.89 - 0.92 ⁶ (N= 2 862 996)	C=0.78 (N=1409; patients ≥65 years discharged from geriatric service; model re-calibrated for validation sample)

Supplementary Appendix S3: Summary of prognostic models used to predict mortality in hospitalized older patients.

Legend: BISEP = Burden of Illness Score for Elderly Persons; CARING = cancer, ≥2 admissions, residence in a nursing home, intensive care unit admission with multiorgan failure, ≥2 noncancer hospice guidelines; HELP = Hospitalized Elderly Longitudinal Project; HOMR = Hospital patient One year Mortality Risk; MPI = Multidimensional Prognostic Index; SAFES = Sujet Agé Fragile—Evaluation et Suivi (Frail Elderly Subject – Assessment Follow-up).

