



Title	Investigation of Factors Associated with the Long-term Care and Cognitive Decline in Community Dwelling Older People
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The University of Osaka

Abstract of Thesis

Name (Srithumsuk Werayuth)	
Title	Investigation of Factors Associated with the Long-term Care and Cognitive Decline in Community Dwelling Older People (地域在住の高齢者における介護と認知機能低下に関連する要因の検討)
Abstract of Thesis Background: Investigating factors associated with receiving LTC and cognitive decline is important for decreasing LTC burden. The aims of this study were to investigate the factors associated with LTC and cognitive decline in community-dwelling older people. Methods: The methodology in this study was divided into two sections. The first study was to investigate the factors associated with LTC. The participants were 1098 community-dwelling older people. The endpoint was receiving LTC after the baseline survey. The main independent variables were grip strength and walking speed. We calculated the hazard ratio of receiving LTC using the Cox proportional hazard model. Whereas the second study was to investigate the factors associated with cognitive decline. The participants were 1333 community-dwelling older people. The MoCA-J was declined of ≥ 2 points was defined as cognitive decline. Multiple logistic regression analysis was used to investigate the association between risk factors and cognitive decline during a 3-year follow-up. Results: The result of the first study, the physical function revealed that only slow walking speed was significantly correlated with LTC. Additional factors significantly correlated with LTC were lower MoCA-J score, advanced age, and female sex. In the second study found that history of stroke, advanced age, and greater MoCA-J score at the baseline were important risk factors, while the presence of dyslipidemia and a higher educational level were protective factors significantly correlated with cognitive decline. Conclusion: Decreasing LTC burden, we must be focused on the prevention of slow walking speed and cognitive decline, especially in females with advanced age. Moreover, prevention of cognitive decline by paying more attention to the risk factors included a history of stroke, maintaining cognitive stability function in early life of older people are useful to reduce cost of LTC and enhance older people's quality of life.	

論文審査の結果の要旨及び担当者

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論文審査の結果の要旨

Background: Investigating factors associated with received LTC and cognitive decline is important for decreasing LTC burden. The aims of this study were to investigate the factors associated with LTC and cognitive decline in community-dwelling older people.

Methods: The methodology in this study was divided into two sections. The first study was to investigate the factors associated with LTC. The participants were 1098 community-dwelling older people. The endpoint was receiving LTC after the baseline survey. The independent variables were grip strength and walking speed. We calculated the hazard ratio of receiving LTC using the Cox proportional hazard model. Whereas the second study was to investigate the factors associated with cognitive decline. The participants were 1333 community-dwelling older people. The MoCA-J was declined of ≥ 2 points was defined as cognitive decline. Multiple logistic regression analysis was used to investigate the association between stroke and other risk factors with cognitive decline during a 3-year follow-up.

Results: The result of the first study, the physical function revealed that only walking speed was significantly correlated with LTC. Additional factors significantly correlated with LTC were MoCA-J score, advanced age, and female sex. In the second study found that history of stroke, advanced age, and greater MoCA-J score at the baseline were important risk factors, while the presence of dyslipidemia and a higher educational level were protective factors that were significantly correlated with cognitive decline.

Conclusion: We must be focused on the prevention of slow walking speed and cognitive decline, especially in females of advanced age. Moreover, prevention of cognitive decline by paying more attention to the risk factors included a history of stroke, maintaining cognitive stability function in early life in advanced age is may useful to reduce cost of LTC and enhance older people's quality of life.

我が国の喫緊の課題である健康寿命延伸のためには要介護認定者を減らすことが効果的である。本研究は、将来の介護認定に強く関連する要因として、歩行速度や脳血管障害の重要性を示したことで介護予防のターゲットを明らかにした重要な研究と言える。したがって本研究は博士（看護学）の学位授与に値すると判断した。