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**POSTER ABSTRACT****Goals of older hospitalized patients with multimorbidity**

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**Background:** The increased prevalence of older patients, often presenting with multimorbidity, challenges the traditional disease-focused approach in hospital care. To improve healthcare for older hospitalized patients with multimorbidity, patient-centered healthcare is recognized by experts as essential. An important aspect of patient-centered care is aligning healthcare to personal goals. From literature, we know that older adults rate life enjoyment, social relations, quality of life, mobility and maintenance of autonomy as most important in daily life. In the hospital setting, however, little is known about goals of older patients. Besides, patients with multimorbidity experience more burden of their disease, functional disabilities, and a reduced quality of life which can lead to prioritizing different goals. These potential differences in goals between patients with and without multimorbidity have not been established so far. Therefore, we aimed to explore goals of older hospitalized patients with multimorbidity and compare their goals to those of older hospitalized patients without multimorbidity.

**Method:** Older hospitalized patients (aged  $\geq 70$  years) were included between February 2017 and March 2020 in a prospective mixed-methods cohort study at the University Medical Centre Groningen, the Netherlands. Multimorbidity was defined as presenting with polypharmacy and two or more diseases scored with the Charlson Comorbidity index. Goals were assessed by a standardized interview, whereafter they were categorized into one of the ten predefined categories and analyzed descriptively. Goal categories were 'wanting to know what the matter is', 'controlling disease', 'staying alive', 'alleviating complaints', 'improving condition' (fitness), 'improving daily functioning', 'improving/maintaining social functioning', 'resuming work/hobbies', 'regain/maintain autonomy' and 'undefinable'

**Results:** Four-hundred-ninety-three older hospitalized patients (mean age  $76.7 \pm 5.5$ , 64% male) were included, of which 223 patients with multimorbidity (45%). Patients were hospitalized for  $7.9 \pm 8.5$  days on average. Patients with multimorbidity experienced more mobility problems (67% vs 52%), physical impairments (66% vs 50%) and rated their health lower (a score of 60.2 vs 67.5 on the EuroQol - Visual Analogue Scale) compared to patients without multimorbidity. The most often mentioned goals were 'controlling disease' (27%) and 'alleviating complaints' (22%). No differences were found in goals mentioned by patients with and without multimorbidity. Forty-one percent of both patients with and without multimorbidity mentioned goals that were disease-unrelated.

**Conclusion:** Our study shows no major differences in goals of older hospitalized patients with and without multimorbidity. However, the large proportion of patients mentioning disease-unrelated goals emphasizes the importance of goal elicitation by healthcare professionals within hospital care to provide optimally integrated care.