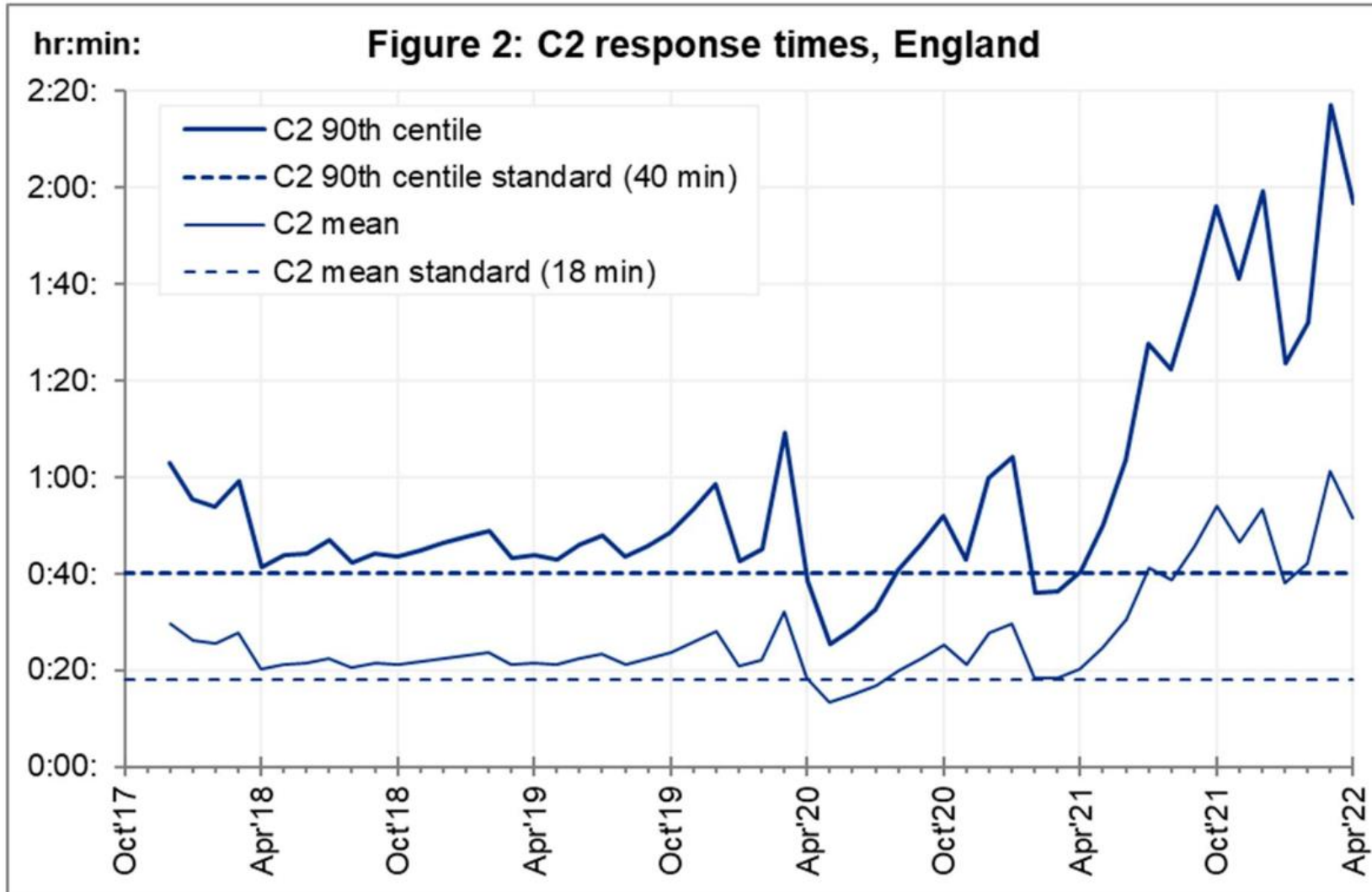


Measuring frailty and its association with key outcomes in the ambulance setting

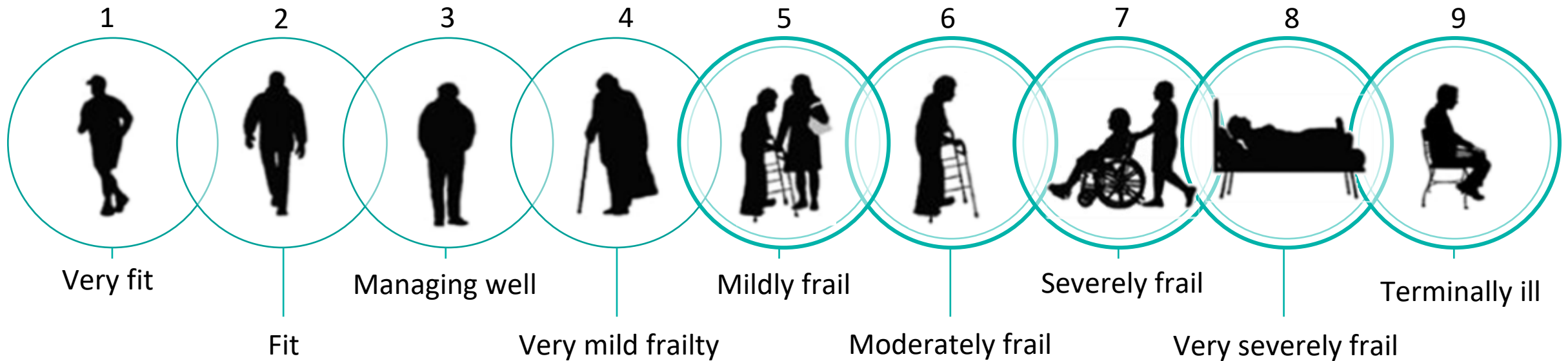
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Emma Burrow – North East Ambulance Service
Barbara Hanratty – Newcastle University
Daniel Stow – Queen Mary University of London

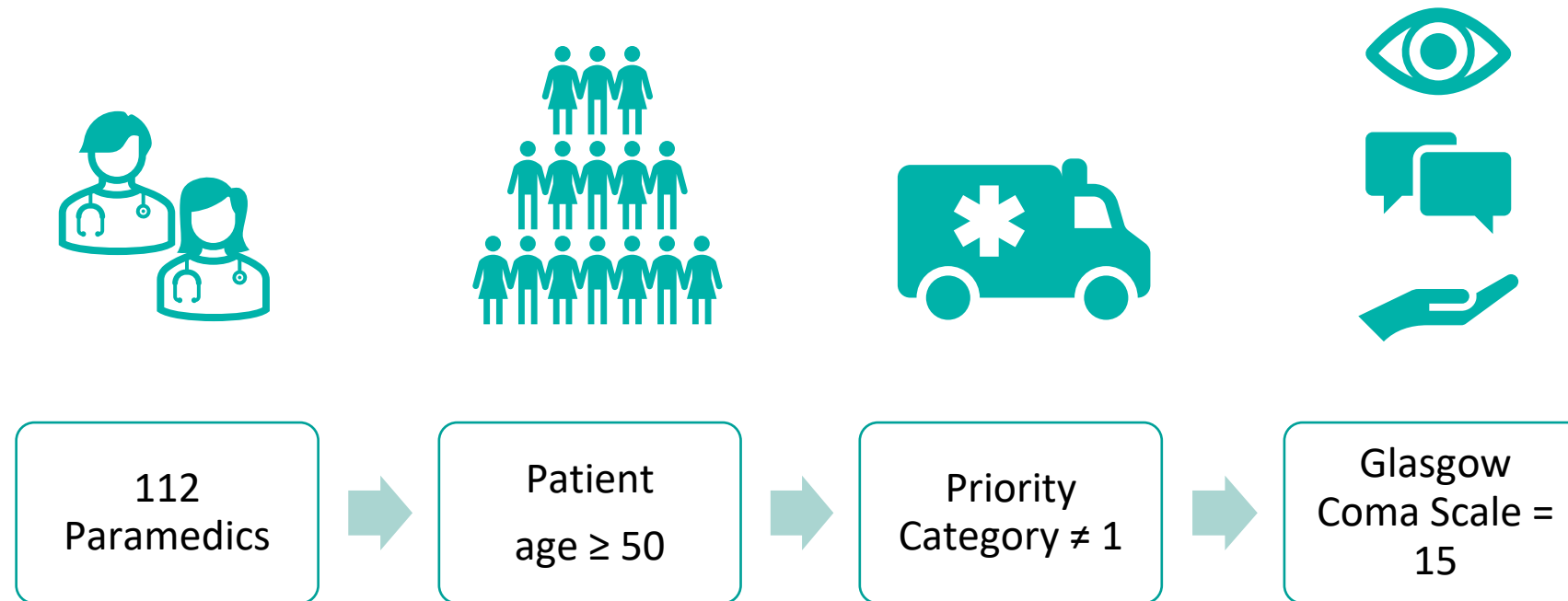




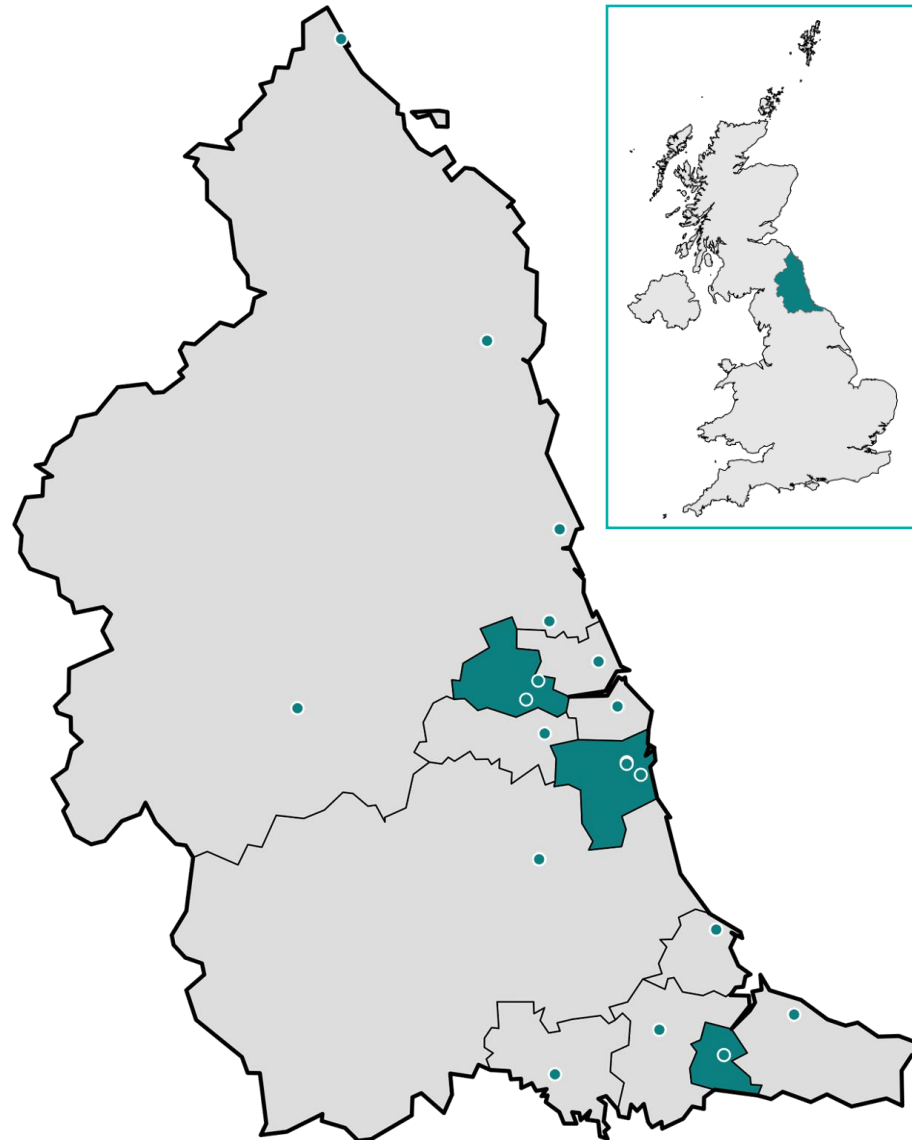
Clinical Frailty Scale



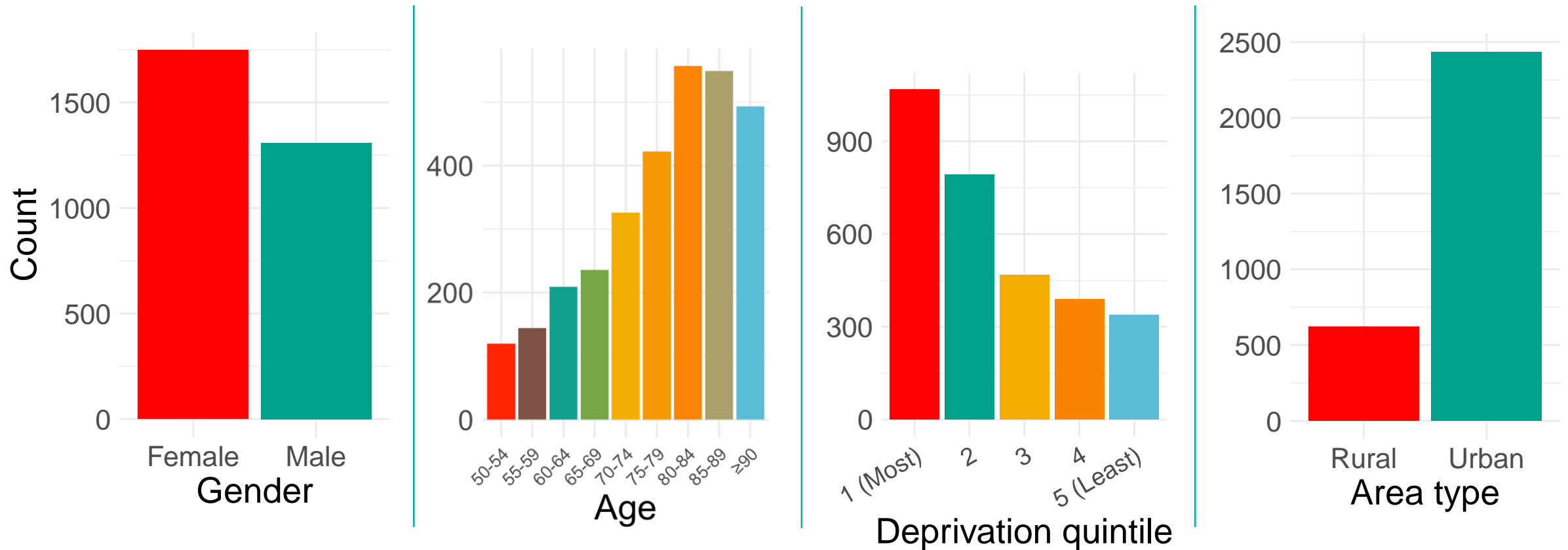
Study design



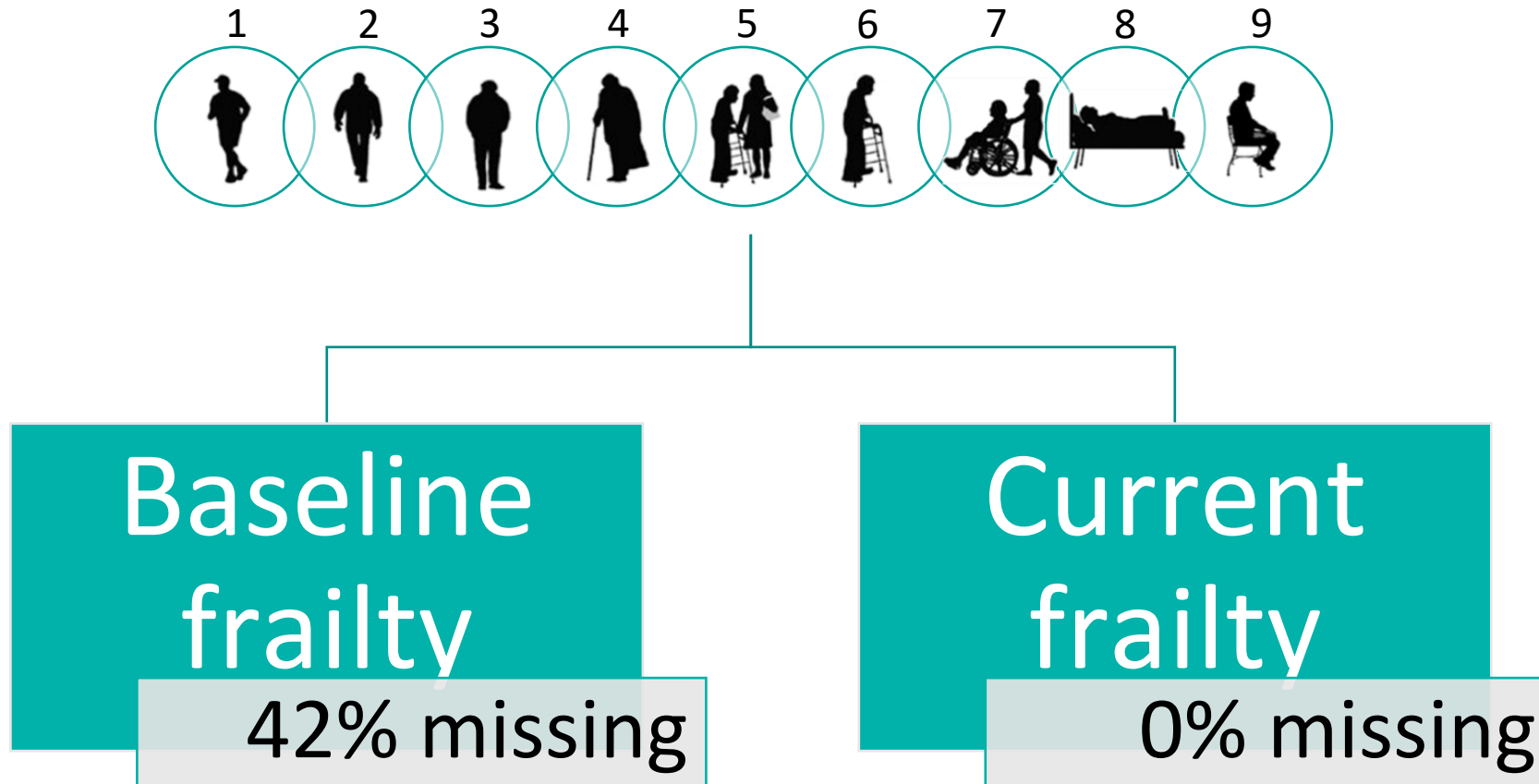
Study area



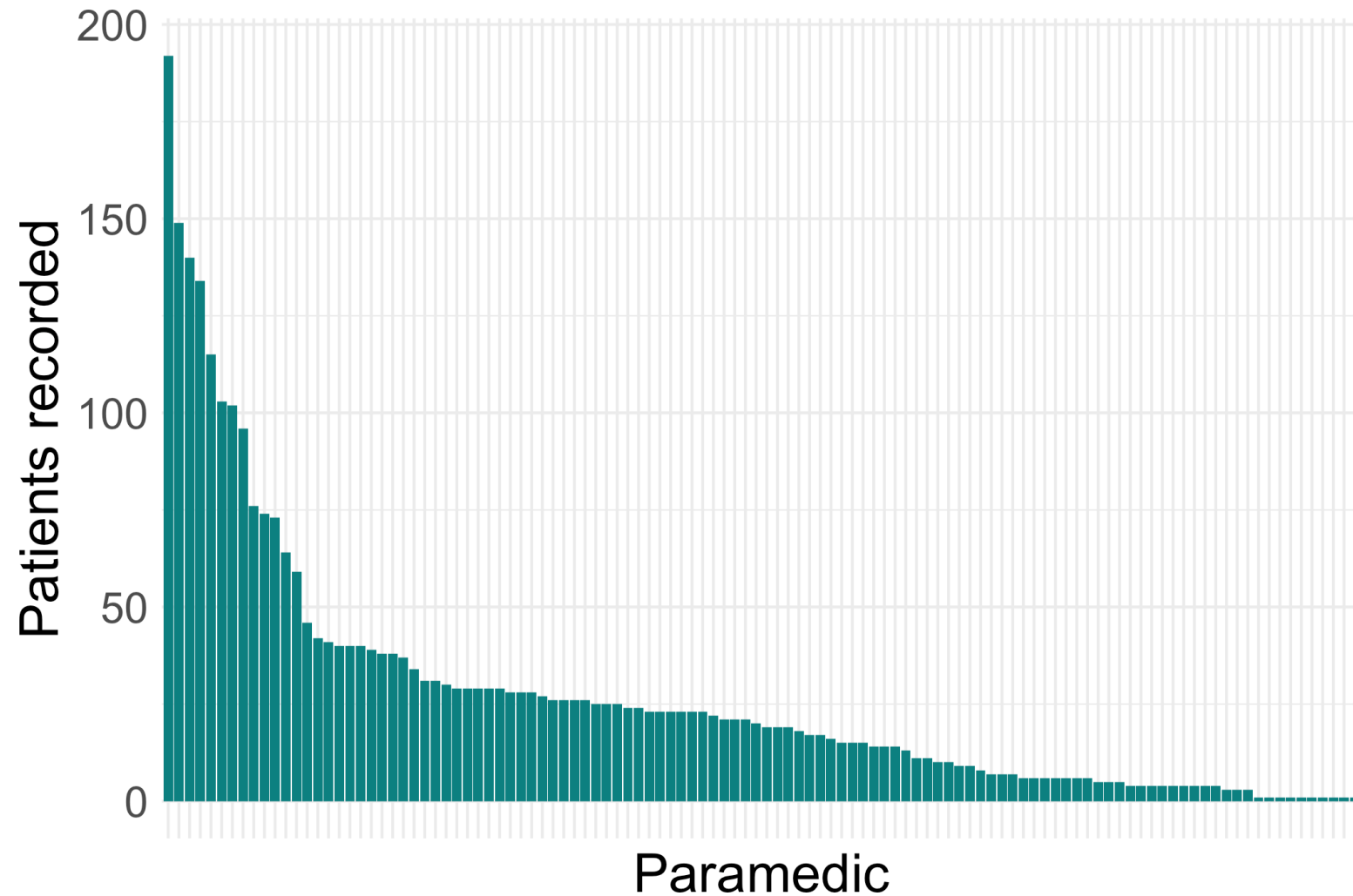
Patient characteristics



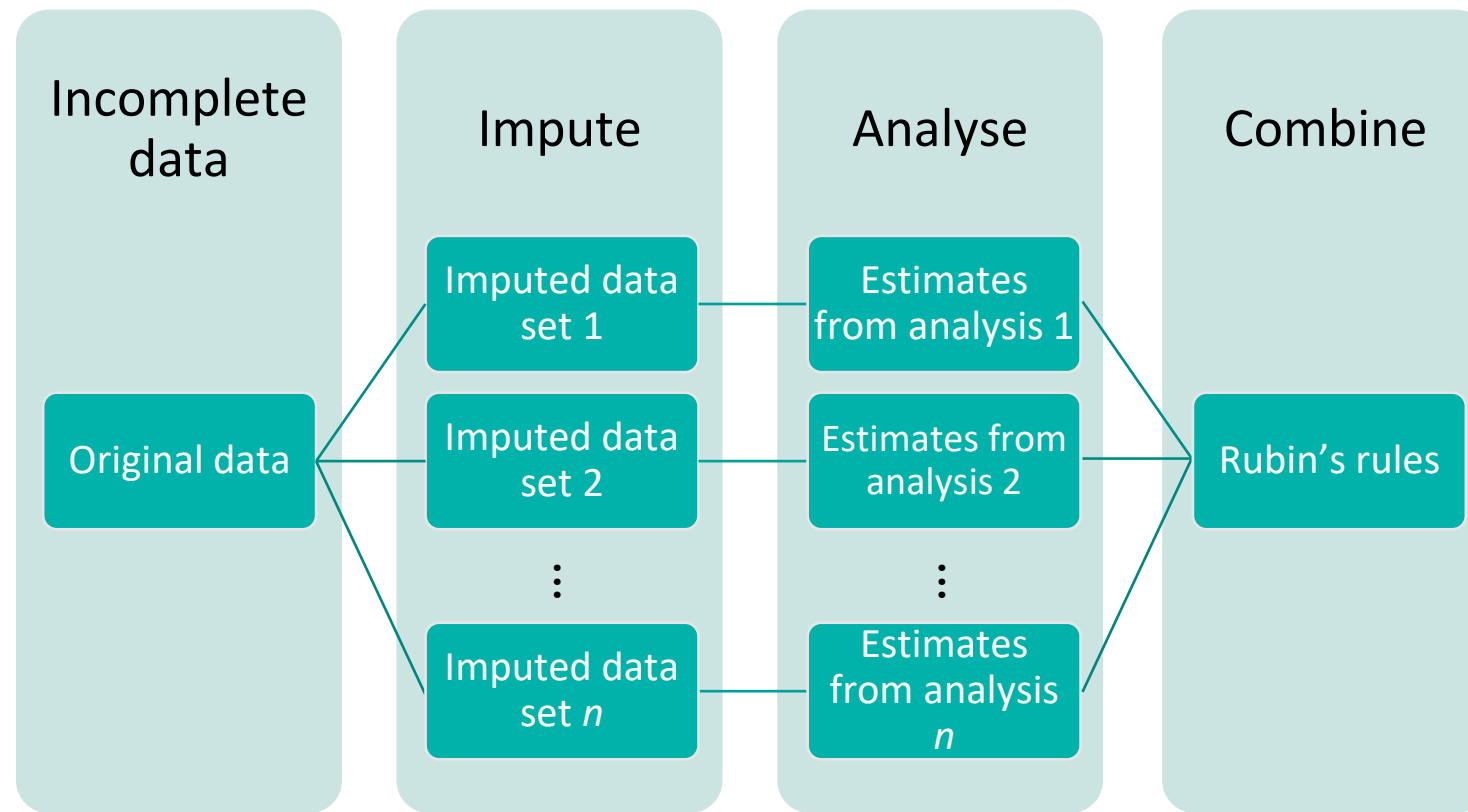
Problem 1



Problem 2



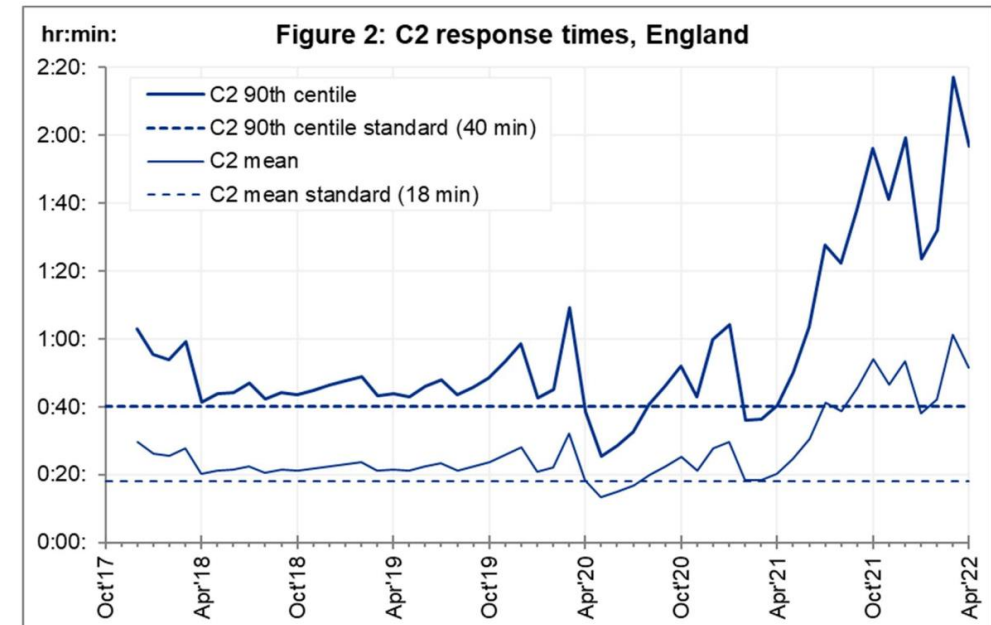
Solution 1: statistical methods



Solution 2: focus results

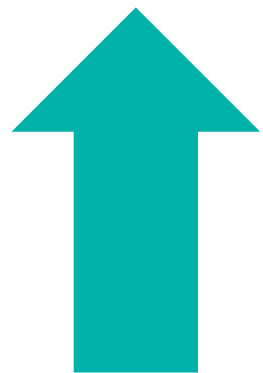
- > 3000 patients
- Frailty on day on incident
- Associated demographic and clinical information

- How can this help with understanding the demands on the ambulance service?



Results: who is frail?

- High prevalence: 59% of patients



Frailty prevalence increases with:

- Age
- Deprivation
- Urban areas



No change:

- Gender

Results: treatment



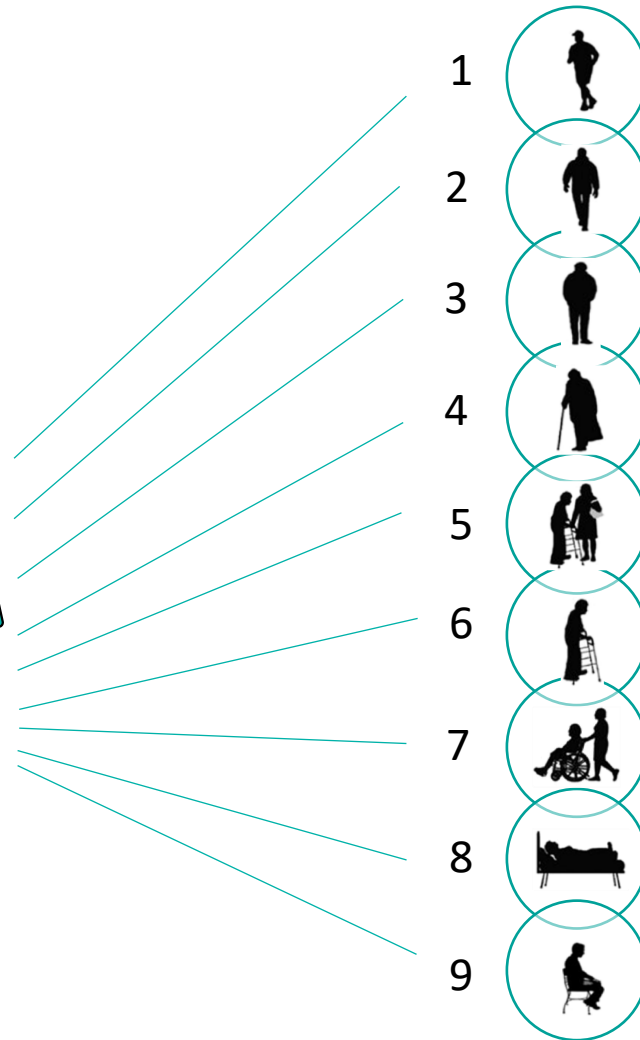
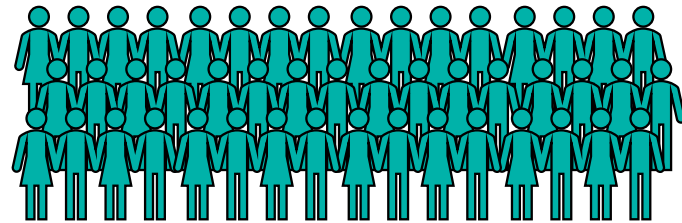
Frailty increases time on scene:
+8 [5-11] mins (+21%)



Decreases conveyance to
hospital rate

Odds ratio: 0.75 [0.60-0.94]

Future research



Conclusions

- **Frailty prevalence high among ambulance patients >50**
- **Frail patients require more treatment at scene but are less likely to be conveyed to hospital**
- **Baseline frailty is difficult to measure in the ambulance setting**