

## Associations of activities of daily living disability and instrumental activities of daily living disability with all-cause mortality: Evidence from Five Major Longitudinal Studies

### The Study

#### Design:

Population based, multi-prospective cohorts study.

#### Participants:

Adults aged 50 years or older across regions in the North America, Europe, and Asia, represented in five longitudinal studies (ELSA, HRS, SHARE, MHAS, and CHARLS).

#### Exposures:

Activities of daily living (ADL) and instrumental activities of daily living (IADL) disability.

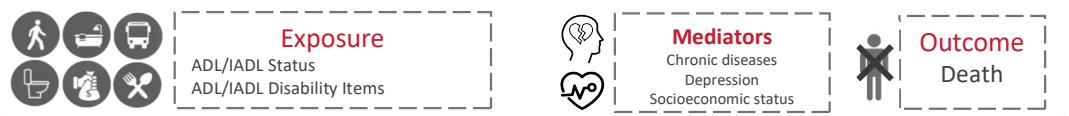
#### Outcomes:

Single and pooled risk for all-cause mortality

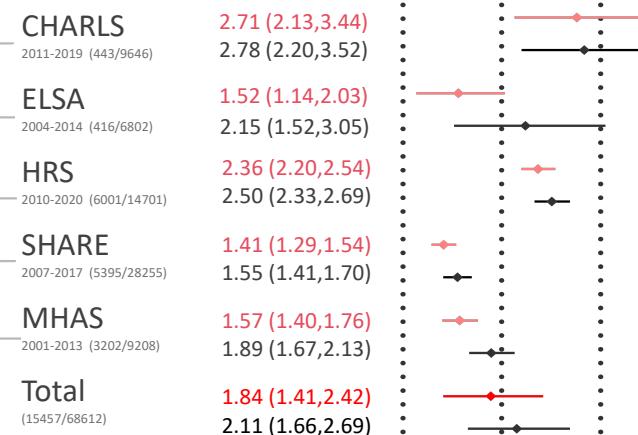
#### Analysis:

Kaplan-Meier curve; Cox regression; Meta-analytic random-effects model; Mediation analysis; Interaction analysis

### Hypothesis



### Findings



### Mediation Analysis

Percentage of total effect explained by chronic diseases and depression (95%CI)

	Chronic Diseases	Depression
CHARLS	0.14 (0.08-0.21)	0.11 (0.02-0.22)
ELSA	0.32 (0.19-0.61)	0.03 (-0.16-0.25)
HRS	0.21 (0.19-0.24)	0.05 (0.02-0.08)
SHARE	0.22 (0.15-0.30)	0.32 (0.23-0.46)
MHAS	0.21 (0.15-0.30)	0.15 (0.08-0.26)

### Interpretation

ADL/IADL disability is associated with a strong increase in the risk of mortality. Healthcare services need to be more inclusive to reduce mortality among middle-aged and older people with disabilities