

Modelling of temporary disability for anxiety disorders in Primary Health Care Centers of the Valencian Community

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Objectives: This work aims to study the prescription of temporary disability (TD) for anxiety disorders in Primary Health Care Centers (PHC) in order to obtain mathematical models that quantify the influence of sociodemographic and geographic characteristics of PHC, the operation of PHC and Health Districts (HD) in the incidence ratio (IR), in the Valencian Community.

Methods: Descriptive analysis of IR in prescribed TD in the 739 PHC distributed among 23 HDs in 2009. The total population assigned was 5,111,706. A logarithmic regression model was made to obtain an explicative model of the factors of PHC and HD that influence the IR. Quartiles of IR were established, and the logistic regression model was used to quantify the joint influence of the explanatory variables on the likelihood of the IR quartiles.

Results:

Of the 739 PHCs, 164 were excluded, 163 as their IR was zero and one with an anomalous figure of 10. The average IR of the TD prescribed for anxiety disorders in the 575 PHCs was 1.079%. The linear logarithmic model obtained included as explanatory factors of IR: the working of the HD (absenteeism, existence of shared information with the PHC and delays in specialized care); the working of PHC (absence index, average duration of sick leaves, number of physicians, hospital admissions for mental disorders); the geographic location of the PHC and their assigned female population between 35 and 44. The goodness-of-fit achieved is measured in R^2 of 43.5%. Similar results were obtained by the logistic regression.

Conclusions:

The factors of PHC, regardless of the patient conditions (health status, age, culture, personal circumstances, etc.), influence the TD prescribed by primary care physicians. This suggests the need to improve the management of the PHC by establishing clinical guidelines, labor market regulation and the control of financial compensation due to TD.

