

# Effects of the molar ratio of Hydroxide and Fluoride to

## Exploring the association between long-term care and mortality rates among stroke patients

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### Abstract

Information on types of long-term care received by stroke patients after hospital discharge is essential for the formulation of long-term care resource development policy. Comparisons of outcomes resulting from different types of long-term care can provide important considerations in the selection of long-term care services. The purpose of this study is to describe the patterns of long-term care received, and to explore if associations exist between long-term care services and mortality status among stroke patients after hospital discharge. Using a longitudinal quasi-experimental study design, this study collected information on the type of long-term care received at 1, 3, and 6 months after discharge for 714 patients. At one month after discharge, 4.5 % had died, and 22.1 % had regained all functions in activities of daily living and instrumental activities of daily living. The percentage of patients receiving institutional care, home or community-based care, and family care only were 10.4 % , 22.4 % , and 40.7 % respectively. The respective percentages at 3 months after discharge were 11.2 % , 18.7 % , and 38.0 % , and, at 6 months after discharge, 10.3 % , 19.4 % , and 30.9 % . After adjusting for age, sex, previous incidence of stroke, and physical functions, the odds of dying within 6 months after discharge for stroke patients receiving home or community-based care was significantly lower than those in institutions ( OR = 0.39; 95 % CI = 0.15 to 0.97 ). It is not clear why a lower mortality rate was observed among patients receiving home or community-based services. Differences in quality of care and quality of life among users of different types of long-term care services should be investigated. More research is needed to assess the causes of the disparity in mortality rates among users of different types of long-term care services.