LETTER TO THE EDITOR

To the Editor:—The study by Yu et al.¹ on ICU use and mortality in the elderly provided useful data for estimating survival of older patients admitted to an ICU. We performed a study looking at hospitalization survival of older patients admitted to an ICU, with patients' age as an independent variable. While varying somewhat from the data presented by the above, our findings offer additional information on the subject, using a more recent set of data.

Our study utilized computerized records at NYU Medical Center of 2686 patients aged 70 or older who were admitted to an ICU between 1/1/97 and 5/1/99. Mortality rose with age, but dividing by age into 5-year intervals, mortality peaked in the 80 to 84 age range (41%) and in the 95 and older age group (42%). While unable to fully explain the first peak, we considered the criteria used in patient selection for admission to ICUs, a possible physiologic "threshold" in this age range, or a peculiarity of our patient pool as contributing factors. We concluded that age is an independent risk factor for mortality for patients 70 years old and older, with mortality increasing with age.

JGIM welcomes your letters and comments. Letters may contain brief commentaries on articles published in the Journal, illustrative case reports, general suggestions for improving the Journal, or other information of interest to readers. Letters to the Editor should not exceed 450 words in length and should be sent in triplicate (typed, double-spaced). We cannot guarantee publication and we may edit to improve readability.

You may send your letters to us by mail or fax: JGIM, JHU Division of General Internal Medicine, 1830 East Monument Street, Room 8068, Baltimore, MD 21205; fax (410) 955-0825.

For our patient pool, the overall in-hospital mortality was 19%, with 9% and 33% for surgical and non-surgical patients, respectively. While also increasing with age, in-hospital mortality in the patient set used by Yu et al was lower, at 8.5% and 9.7% for the above groups, respectively. Two other studies looking at ICU mortality in the elderly found the mortality also to be higher than the above. Djaiani et al.² found in-hospital mortality (of surgical and non-surgical patients) to be 14% and 28% for patients in the 70 to 79 and 80 or older age groups. One-year post-hospitalization mortality was 45% and 51% for the two age groups, respectively.² Hamel et al.³ reported in hospital mortality at 29% for 70-year-old and older patients, and 6-month mortality at 51% and 55% for the above age groups.

All three studies show a decrease in in-hospital and in the post-hospitalization survival with advancing age for 70-year-old patients and over. Our findings also offer additional current information on survival of seriously ill patients irrespective of aggressiveness of care in a major urban university teaching hospital.—**ALEXANDER SULER, BA,** and **ANTHONY J. GRIECO, MD,** *New York University School of Medicine, New York, NY.*

REFERENCES

1. Yu W, Ash A, Levinsky N, Moskowitz M. Intensive care unit use and mortality in the elderly. *J Gen Intern Med.* 2000;15:97–102.
2. Djaiani G, Ridley S. Outcome of intensive care in the elderly. *Anaesthesia* 1997;52:1130–6.
3. Hamel MB, Davis RB, Teno JM, et al. Older age, aggressiveness of care, and survival for seriously ill, hospitalized adults. *Ann Intern Med.* 1999;131:721–8.