Lc65+ study

Randomly selected sample of community-dwelling older adults aged 65 to 70 living in the city of Lausanne, Switzerland:

3053 individuals contacted in 2004

3179 individuals contacted in 2009

Initial questionnaire returned:

1564 participants enrolled in 2004

1489 participants enrolled in 2009

Total number: 3053

At least six (half the study period) distinct observations in all five dimensions of healthcare utilization:

2271 older adults included in the analysis

Supplementary Figure 1: Flow diagram of participants included in the analysis.

		Whole sample	Included	Excluded	p-valu
Total N (%)		3053	2271 (74.4)	782 (25.6)	
Recruitment wave	1	51.2%	50.9%	52.3%	0.513
	2	48.8%	49.1%	47.7%	
Age (years)	Mean (SD)	67.9 (1.4)	67.9 (1.4)	68.1 (1.4)	0.001
Sex	Female	58.7%	60.7%	53.1%	< 0.00
	Male	41.3%	39.3%	46.9%	
Living alone	No	62.3%	62.8%	60.9%	0.556
	Yes	37.4%	36.9%	38.7%	
	missing	0.3%	0.3%	0.4%	
Born in Switzerland	No	29.2%	26.4%	37.6%	< 0.00
	Yes	70.6%	73.5%	62.0%	
	missing	0.2%	0.1%	0.4%	
Difficult financial	No	71.8%	83.0%	39.5%	< 0.00
situation	Yes	11.7%	12.6%	8.8%	
	missing	16.5%	4.4%	51.7%	
Grip strength	Normal	72.4%	83.8%	39.3%	< 0.00
	Low	10.7%	11.3%	9.0%	
	missing	16.9%	4.9%	51.8%	
Diagnosed chronic	0	12.7%	13.7%	10.1%	0.002
illnesses	1	23.7%	23.8%	23.5%	
	2+	63.1%	62.4%	65.3%	
	missing	0.4%	0.2%	1.0%	
Self-perceived health	Good	64.8%	70.5%	48.5%	<0.001
	Av	29.2%	25.8%	39.3%	
	Bad	5.6%	3.5%	11.6%	
	missing	0.3%	0.2%	0.6%	
Difficulties IADLs	None	87.5%	90.6%	78.3%	<0.001
	Yes without help	6.6%	5.3%	10.4%	
	Yes with help	4.9%	3.3%	9.6%	
	missing	1.0%	0.8%	1.8%	
Ambulatory care	none	7.6%	7.4%	8.4%	< 0.00
	1 or 2	23.5%	25.4%	18.2%	
	3 to 5	33.1%	33.5%	31.8%	
	6 to 11	21.4%	22.0%	19.4%	
	12+	11.6%	9.9%	16.8%	
	missing	2.8%	1.9%	5.4%	
Emergency care	none	72.4%	74.0%	67.5%	< 0.00
-morgoney cure	once	14.0%	14.6%	12.3%	10.00
	2 or 3	7.2%	6.7%	8.6%	
	4+	1.3%	0.8%	2.7%	
	missing	5.1%	3.8%	9.0%	
Hospitalisation	none	79.9%	82.7%	71.7%	< 0.00
1105piumsauon	once	12.7%	11.8%	15.5%	\0.00
	2 or 3	3.5%	2.9%	5.1%	
	4+	0.7%	0.4%	1.5%	
	missing	3.2%	2.2%	6.1%	
Home care		93.7%	95.6%	88.1%	< 0.00
nome care	10 temporarily	3.0%	2.5%	4.5%	<0.00
	temporarily				
	regularly	1.8%	1.2%	3.6%	

Supplementary Table S1: Comparison of baseline characteristics of included versus excluded individuals (exclusion happened when more than half of the follow-up period was missing). Bivariate relationships are evaluated with chi-squared tests (ANOVA for the age). Ambulatory (emergency) care correspond to the number of annual (emergency) consultations. No individuals were institutionalised at the time of recruitment.

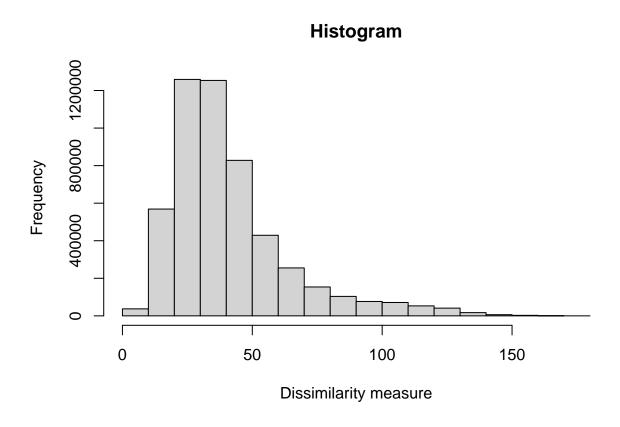
		Increasing healthcare utilization	Late health deterioration	Ambulatory care to nursing home	Early fatal event	High ambulatory care
Age	years	1.23** (1.01 - 1.49)	1.09 (0.89 - 1.34)	2.10 *** (1.34 - 3.3)	1.04 (0.83 - 1.30)	1.13 (0.84 - 1.53)
Sex	male (vs. female)	1.08 (0.70 - 1.67)	1.88*** (1.21 - 2.91)	2.98 ** (1.22 - 7.28)	2.05 *** (1.27 - 3.31)	0.37 ** (0.16 - 0.85)
Living alone	yes (vs. no)	1.40 (0.92 - 2.12)	1.34 (0.86 - 2.10)	6.29*** (2.48 - 16)	1.56* (0.97 - 2.52)	1.31 (0.70 - 2.48)
Self-perceived health	average (vs. good)	2.15 *** (1.37 - 3.36)	1.24 (0.76 - 2.03)	1.83 (0.63 - 5.27)	2.25 *** (1.34 - 3.80)	4.35 *** (2.11 - 8.95)
	bad (vs. good)	2.39 * (0.95 - 5.99)	1.36 (0.47 - 3.90)	4.88** (1.29 - 18.49)	4.05 *** (1.58 - 10.39)	13.92*** (4.86 - 39.88)
Grip strength	low (vs. normal)	1.5 (0.88 - 2.54)	1.16 (0.62 - 2.16)	2.85 ** (1.14 - 7.12)	1.94** (1.09 - 3.46)	1.3 (0.62 - 2.76)
Diagnosed	1 (vs. 0)	1.02 (0.47 - 2.23)	1.35 (0.65 - 2.80)	NA	0.66 (0.32 - 1.39)	NA
chronic illnesses	2+ (vs. 0)	1.17 (0.58 - 2.37)	1.14 (0.57 - 2.26)	NA	0.63 (0.33 - 1.22)	NA
Difficulties IADLs	yes without help (vs. no)	1.86* (0.94 - 3.67)	2.64 *** (1.27 - 5.48)	3.34 * (0.99 - 11.27)	0.73 (0.24 - 2.19)	1.47 (0.59 - 3.69)
	yes with help (vs. no)	2.96 ** (1.25 - 6.99)	3.53 ** (1.33 - 9.33)	25.01 *** (8.66 - 72.27)	3.45 *** (1.40 - 8.50)	1.9 (0.62 - 5.75)

Supplementary Table S2: Results of the multinomial regression model with seven selected explanatory variables (n = 2256). Coefficients are adjusted odds ratios for membership into each cluster compared to the reference one (low healthcare utilization). Confidence intervals in parenthesis are at a 95% level. NAs are present when there is an empty category.

^{*} p < 0.1; ** p < 0.05; *** p < 0.01.

Dissimilarity measure between two sequences

When operating a Sequence Analysis, the discrepancy across all trajectories is summarized into a dissimilarity matrix. In our study, this matrix (dimension 2271*2271) is distributed as follows:



The median value is 35.44. To illustrate how these values are obtained, we will take as example the dissimilarity measure between the two following multidimensional sequences (corresponding to the median distance):

Participant 1

1 none none no no	one one
	one
2 none none none no	
3 1 or 2 none none no	one
4 1 or 2 none none no	one
5 1 or 2 none none no	one
6 none none no no	one
7 none none none no	one
8 1 or 2 none none no	one
9 none none no no	one
10 6 to 11 none none no	one
11 1 or 2 none none no	one

Participant 2

Year	Ambulatory care	Emergency care	${\tt Hospitalisation}$	${\tt Home\ care}$	Nursing home
1	6 to 11	none	none	no	none
2	3 to 5	none	none	no	none
3	3 to 5	none	none	no	none
4	1 or 2	none	none	no	none
5	3 to 5	<na></na>	none	no	none
6	3 to 5	once	2 or 3	reg	none
7	6 to 11	none	none	no	none
8	3 to 5	once	once	no	none
9	3 to 5	none	none	temp	none
10	6 to 11	none	once	reg	none
11	1 or 2	none	none	reg	none

Year is year since entry into the study, ambulatory care is number of physician's appointments, emergency care is number of emergency consultations, hospitalisations are overnight stays, home care is professional home care and nursing home is stay of at least one night. 'Temp' stands for temporary and 'reg', for regular.

The first step of a multidimensional Optimal Matching (OM) measure is to set substitution and indel (insertion-deletion) costs. Substitution costs are dimension- or channel-specific and user-defined as follows:

Ambulatory care

	none 1	or 2 3	3 to 5 6	to 11	12+	incap	dead *
none	0	1	2	3	4	4	5 1
1 or 2	1	0	1	2	3	3	4 1
3 to 5	2	1	0	1	2	2	3 1
6 to 11	3	2	1	0	1	1	2 1
12+	4	3	2	1	0	1	1 1
incap	4	3	2	1	1	0	1 1
dead	5	4	3	2	1	1	0 1
*	1	1	1	1	1	1	1 0

Emergency care

	none	once	2	or	3	4+	incap	dead	*
none	0	1			2	3	3	4	1
once	1	0			1	2	2	3	1
2 or 3	2	1			0	1	1	2	1
4+	3	2			1	0	1	1	1
incap	3	2			1	1	0	1	1
dead	4	3			2	1	1	0	1
*	1	1			1	1	1	1	0

Hospitalisation

	none	once	2	or	3	4+	incap	dead	*
none	0	1			2	3	3	4	1
once	1	0			1	2	2	3	1
2 or 3	2	1			0	1	1	2	1
4+	3	2			1	0	1	1	1
incap	3	2			1	1	0	1	1
dead	4	3			2	1	1	0	1
*	1	1			1	1	1	1	0

Home care

	no	temp	reg	incap	dead	*
no	0	1	2	2	3	1
temp	1	0	1	1	2	1
reg	2	1	0	1	1	1
incap	2	1	1	0	1	1
dead	3	2	1	1	0	1
*	1	1	1	1	1	0

Nursing home

	none	temp	perm	incap	dead	*
none	0	1	2	2	3	1
temp	1	0	1	1	2	1
perm	2	1	0	1	1	1
incap	2	1	1	0	1	1
dead	3	2	1	1	0	1
*	1	1	1	1	1	0

Channel-specific indel costs are each time half the maximum substitution cost. There are no occurrences of either long common unidimensional or long common multidimensional subsequences in our example so the OM measure is simplified into computing the cost of substituting one sequence by the other in each healthcare utilisation dimension independently. Substitution costs between individual states are thus applied as follows:

Variation between ambulatory care sequences: 3 + 2 + 1 + 0 + 1 + 2 + 3 + 1 + 2 + 0 + 0 = 15.

Variation between emergency care sequences: 1+1+1=3.

Variation between hospitalisation sequences: 2 + 1 + 1 = 4.

Variation between home care sequences: 2 + 1 + 2 + 2 = 7.

Variation between nursing home sequences: 0.

The first substitution cost (3) corresponds to replacing 'none' by '6 to 11' and applying the ambulatory care substitution cost matrix introduced above. The same principle can be extended to all other computations. The total variation between the two participants is then derived in an additive way, with dimension-specific weights corresponding to the ratio of the maximum substitution costs (5/5 = 1 for ambulatory care, 5/4 = 1.25 for emergency care and hospitalisation, and 5/3 = 1.67 for home care and nursing home):

Total variation between the trajectories: 1*15+1.25*3+1.25*4+1.67*7+1.67*0=35.44.