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Health attitudes and behaviour as predictors of self-rated health in relation to mortality patterns (17 year follow-up in Polish elderly - Cracow study).

The aim of the study carried out for 17 years in Cracow (Poland) was to examine and identify most important determinants responsible for the relationship between self-rated health status and mortality in noninstitutionalized elderly people. Base-line study was performed in a simple random sample group of 2605 citizen of Cracow, age 65 and older. Vital status of all individuals under study was established by monitoring city vital records. Death certificates were obtained for all deceased and coded for the underlying death causes (final time 31.12.2003).

The model of predictors related to self-rated health status, developed on the base of results of principal component analysis, included three indexes: index of individual (family) predisposition, index of care about health in the past and index of attitudes toward health.

Multivariate Cox analysis confirmed significant role of self-rating health in mortality patterns only for women (HR=1,18), and those with high level of care about health in the past had lower risk of mortality compared to the group with low care about health in the past (HR=1,19). In men positive attitude toward health remained independent predictor of mortality (HR=1,20). Multivariate regression model demonstrated that self-rating of health remained significant independent predictor of mortality only in women with low level of individual family predispositions (hazard ratio for self-rated health equal 1,35) and in those with positive attitudes toward health (hazard ratio for self-rated health equal 1,16).

The results of our observations showed opposite relationship between analyzed variables describing health-related attitudes and behaviours in the earlier stages of life and self-rating of health during the base-line interview. Contrary to our expectations obtained results did not confirm the role of self-rated health as an independent predictor of mortality in men.