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Repository Citation

Torres Stone, Rosalie A.; Hobart, Marie; and Sambamoorthi, Usha, "Co-occurring Mental & Physical Disorders Among Adults Under 65 Years of Age" (2008). *Systems and Psychosocial Advances Research Center Publications and Presentations*. 625.  
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Co-occurring Mental & Physical Disorders Among Adults Under 65 Years of Age

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BACKGROUND
Research in the areas of co-occurring depression, heart disease, diabetes, asthma and schizophrenia are extensive. However, a comprehensive account of physical illnesses among those with many types of mental illnesses is scarce.

OBJECTIVE
To estimate the prevalence of common chronic physical illnesses among a nationally representative sample of adults under 65 years of age with mental illness and examine the demographic, socioeconomic, and health status predictors of co-occurring physical and mental illness.

METHODS
Cross-sectional analysis of 13,649 adults from the 2005 household component of the Medical Expenditure Panel Survey (MEPS). Chi-square and multinomial logistic regression were used to profile individuals with co-occurring mental and physical illnesses. All analyses accounted for the complex survey design of the MEPS.

MEASURES

Mental illness: attention deficit, adjustment, anxiety, mood, personality, other psychotic, miscellaneous disorders, schizophrenia

Physical illness: Alzheimer’s, arthritis, asthma, cancer, chronic obstructive pulmonary disease, diabetes, heart disease, hypertension, HIV, osteoporosis, stroke, and thyroid disorders

RESULTS
Overall 22% (N = 2,980) reported presence of mental illness. Among those with mental illness, depressive (61%) and anxiety (48%) disorders were highly prevalent and the most common physical illness was hypertension (23.2%) followed by arthritis (17.4%). A comparison of physical illnesses among individuals with and without mental illness revealed that except for Alzheimer's, osteoporosis, HIV, and cancer, all other disorders had elevated rates in individuals with mental illness (p < .01). Women, whites, current smokers, and those who were obese were more likely to report co-occurring mental and physical illnesses.

CONCLUSIONS
Many types of physical illnesses occur at higher rates in individuals with mental illness. Some subgroups are more likely to have co-occurring mental and physical illnesses. These subgroups need special attention and monitoring for prevention and treatment of both mental and physical health.