



This Issue in the Journal

Risk factors for entry into residential care after a support-needs assessment

M Weatherall, T Slow, K Wiltshire

Risk factors for residential care after a support needs assessment were identified from an administrative database in Wellington, New Zealand. The very elderly (ie, persons aged over 80) and those with mobility, continence, and cognitive problems were most at risk. These factors may represent targets for intervention to keep older adults in their own homes.

Circumstances and consequences of falls in residential care: the New Zealand story

M Butler, N Kerse, M Todd

Over 1900 falls were reported over 18 months in a study of 680 residents in 14 residential care homes in New Zealand. Falls were seldom seen by staff (23%), occurred mostly in the resident's room (63%) and frequently resulted in injury (65% of falls). Falls in rest homes occurred mainly in the afternoons and were less likely to result in injury than falls occurring in private hospitals. Falls resulting in serious injury were more likely to occur in the mornings.

Diurnal, weekly, and seasonal variations in stroke occurrence in a population-based study in Auckland, New Zealand

N Anderson, V Feigin, D Bennett, J Broad, M Pledger, C Anderson, R Bonita.

Diurnal, weekly, and seasonal variations in the time of occurrence of stroke in Auckland residents were analysed. Strokes were more likely to occur between 6am and midday than at other times of the day. Strokes were more common during the winter and spring than in the other seasons. No weekly pattern of stroke occurrence was observed. Identification of these peak times of occurrence of stroke has implications for the provision of acute stroke services in the community and in hospital.

General Practice care of enduring mental health problems: an evaluation of the Wellington Mental Health Liaison Service

H Rodenburg, V Bos, C O'Malley, P McGeorge, T Love, A Dowell

The care of those with enduring mental health disorders is an important issue for health providers and consumers. The rapidly changing environment of general practice and primary care provides new opportunities for the delivery of mental health services. An evaluation of the Wellington Mental Health Liaison service suggests that, with training and support, general practice can provide high-quality community-

based mental healthcare for consumers with enduring mental health disorders, and it can support the introduction of integrated mental healthcare initiatives.

Under-reporting of energy intake in the 1997 National Nutrition Survey

C Pikholtz, B Swinburn, P Metcalf

Dietary surveys may not give an accurate estimate of total energy intake because people often under-report what they eat. This analysis assessed the level of under-reporting in the 1997 National Nutrition Survey. The overall level of 'definite' under-reporting was about 17%, with higher levels noted in women (21%), older people (23%), and obese people (27%). The effects of ethnicity were not clear. Care needs to be taken in interpreting the energy intake information from this survey.

Doctors, elder abuse, and enduring powers of attorney

F Matthews

An enduring power of attorney can be donated by a competent adult, nominating another person to make welfare and/or financial decisions on his/her behalf in the event of mental incapacity. Attorneys have wide powers, which may be misused. Doctors may be aware that this is happening and may need to turn to the Family Court in order to protect incapacitated patients.