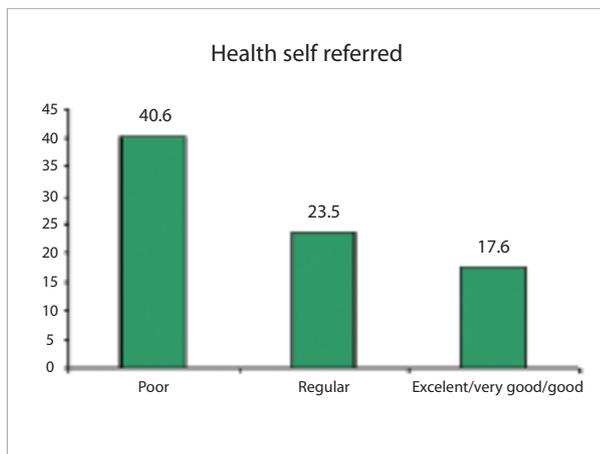
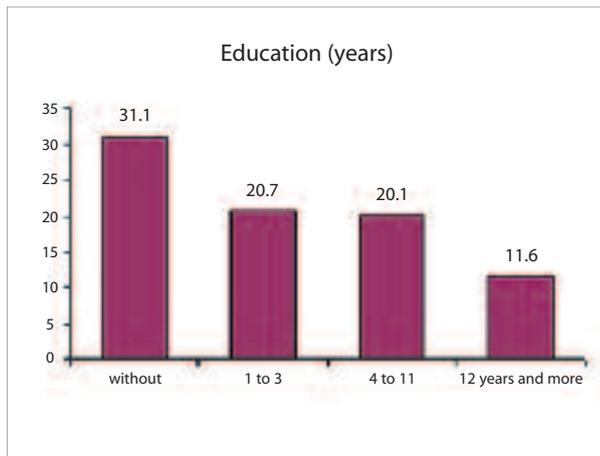


### SABE STUDY– HEALTH, WELL BEING AND AGEING. LONGITUDINAL STUDY ON LIVING AND HEALTH CONDITIONS OF THE ELDERLY IN SÃO PAULO CITY

Ruy LAURENTI

Public Health School / University of São Paulo (USP)



*Mortality rates (per 100 individuals aged 60 or above) according to some variables, city of São Paulo, 2000/2006*

The health of the elderly is a key element for the social and economic development of Latin American and Caribbean countries. In the 1950's, the average life expectancy in this region was 51 years. Nowadays, it is more than 68 years, and in many countries, nearly 75. This kind of change represents a major public health challenge. The Pan American Health Organization carried out in 2000 a multicentric study on the health and well-being of people aged 60 or above in seven Latin American and Caribbean capitals and major cities, including São Paulo. Five years later, a follow-up study is proposed, which is comprised of two sub-projects: the first aims to interview the elderly who participated in the first wave of the study to collect data on their present health and living conditions; the second sub-project aims to collect information on the new cohort, which is comprised of elderly whose ages range from 60 to 64 years in 2005. The sample will be composed of 400 individuals, which defines a sampling fraction of  $400/310694=0.001287$ . A sampling error of 7%, a design effect equal to 1.5 and prevalence of individuals with hypertension equal to 50% were chosen to calculate the sample size, which was corrected, by considering a mortality rate of 2%, and a response rate of 75%.

## SUMMARY OF RESULTS TO DATE AND PERSPECTIVES

The “SABE Study - health, well being and ageing, longitudinal study on living and health conditions of the elderly in São Paulo city” has been in progress for two years, and represents a continuation of a previous project started in 2000. The study’s methodology is innovative in Brazil since it is a study of complex cohorts, i.e., in addition to following up the initial cohort, new cohorts will be added to each wave. This kind of study is important in aging studies since each generation is different from the previous one, because of economic, cultural and social reasons and there is no detailed information on which is or will be the behavior of the cohort who were born before, during or after the Second World War. From the initial sample of 2,143 analyzed persons (2000) was done, an extensive search, and 1,115 persons were located and re-interviewed. The difference between those numbers arose from the fact that there were 649 deaths, 379 changes of address (or city) or refusals. Also another 299 persons aged 60-64 were interviewed and added to the new cohort. The data showed that the probability of death is higher with the advancement of age, among elder male, without higher education, with high number of diseases and disabilities, presenting of cognitive decline, history of hospitalization and fall, with self-perception of health referred as bad, and who were not able to perform the tests of mobility, flexibility and balance. Among the survivors, increase in the proportion of elderly people living alone, was noted from 13% in 2000 to 15.9% in 2006. Furthermore, there was an increase in the number of those who feel that their money is sufficient for their expenses. The comparison between the groups age 60-64 of both cohorts showed that there are fewer people living alone in the second cohort, and that they have a good perception that their money is enough for their daily needs. However, the same cohort considered their health worse and reported greater number of diseases than the first cohort.

## MAIN PUBLICATIONS

Albala C, Lebrão ML, León Díaz EM, et al. 2005. Encuesta Salud, Bienestar y Envejecimiento (SABE): metodología de la encuesta y perfil de la población estudiada. *Rev Panam Salud Publica*. **17(5/6)**:307–22.

Lebrão ML, Laurenti, R. 2005. Saúde, bem-estar e envelhecimento: o estudo SABE no Município de São Paulo. *Revista Brasileira de Epidemiologia*, nº2, vol. 8.

Duarte YAO, Lebrão ML, de Lima FD. 2005. Contribuição dos arranjos domiciliares para o suprimento de demandas assistenciais dos idosos com comprometimento funcional em São Paulo, Brasil. *Rev Panam Salud Publica*. **17(5/6)**:370-8.

Barbosa AR, Souza JMP, Lebrão ML, Laurenti R, Marucci MFN. 2005. Functional limitations of Brazilian elderly by age and gender differences: data from SABE Survey. *Cad. Saúde Pública, Rio de Janeiro*. **21(4)**:1177-1185.

Barbosa AR, Souza JMP, Lebrão ML, Laurenti R, Marucci MFN. 2005. Anthropometry of elderly residents in the city of São Paulo, Brazil. *Cad. Saúde Pública, Rio de Janeiro*. **21(6)**:1929-1938.

Alves LC, Rodrigues RN. 2005. Determinantes da autopercepção de saúde entre idosos do Município de São Paulo, Brasil. *Rev Panam Salud Publica/Pan Am J Public Health*. **17(5/6)**.

Camargos MCS, Perpétuo IHO, Machado CJ. 2005. Expectativa de vida com incapacidade funcional em idosos em São Paulo, Brasil. *Rev Panam Salud Publica/Pan Am J Public Health*. **17(5/6)**.

Maia FOM, Duarte YAO, Lebrão ML, Santos, Jair L F. 2006. Fatores de risco para mortalidade em idosos. *Rev Saúde Pública*.

Alves LC, Leimann BCQ, Vasconcelos MEL, Carvalho MS, et al. 2007. A influência das doenças crônicas na capacidade funcional dos idosos do Município de São Paulo, Brasil. *Cad. Saúde Pública, Rio de Janeiro*. **23(8)**:1924-1930.

Rosa TEC, Benício MHA, Alves MCGP, Lebrão ML. 2007. Aspectos estruturais e funcionais do apoio social de idosos do Município de São Paulo, Brasil. *Cad. Saúde Pública, Rio de Janeiro*. **23(12)**:2982-2992.

---

### Ruy LAURENTI

Faculdade de Saúde Pública  
Universidade de São Paulo (USP)  
Departamento de Epidemiologia  
Avenida Dr. Arnaldo, 715 – Cerqueira César  
01246-904 – São Paulo, SP – Brasil  
+55-11-3082-3886  
laurenti@usp.br