Davey A, Femia EE, Zarit SH, Shea DG, Sundstrom G, Berg S, Smyer MA, Savla J, "Life on the edge: patterns of

and informal help to older adults in the United States and Sweden," <u>The journals of gerontology</u>. Series B, Psychological sciences and social sciences, Vol. 60, No. 5 (September 2005): S281-8.

Compare assistance received by individuals in the United States and Sweden with characteristics associated with low, moderate, or high 1-year placement risk in the United States. Used longitudinal nationally representative data from 4,579 participants aged 75 years and older in the 1992 and 1993 waves of the Medicare Current Beneficiary Survey (MCBS) and cross-sectional data from 1,379 individuals aged 75 years and older in the Swedish Aging at Home (AH) national survey for comparative purposes.

Doshi JA, Shaffer T, Briesacher BA, "National estimates of medication use in nursing homes: findings from the 1997

medicare current beneficiary survey and the 1996 medical expenditure survey," <u>Journal of the American Geriatrics Society</u>, Vol. 53, No. 3 (March 2005): 438-43. Study highlights the usefulness of the MCBS as an important new resource for examining medication use in nursing homes.

Ferraro David, Lo Hongji,

"<u>Uses of the Medicare Current Beneficiary Survey for Analysis Across Time</u>," (Rockville, MD: Westat, Inc., August 2005). (104KB)

Hebert PL, Frick KD, Kane RL, McBean AM, "The causes of racial and ethnic differences in influenza vaccination

rates among elderly Medicare beneficiaries," <u>Health services research</u>, Vol. 40, No. 2 (April 2005): 517-37.

Disparities in access to care and provider discrimination play little role in explaining racial/ethnic disparities in influenza vaccination. Eliminating missed opportunities for vaccination in 1995 would have raised vaccination rates in three racial/ethnic groups to the Healthy People 2000 goal of 60 percent vaccination.

Kamal-Bahl S, Stuart BC, Beers MH, "National trends in and predictors of propoxyphene use in community-dwelling

older adults," <u>The American journal of geriatric pharmacotherapy</u>, Vol. 3, No. 3 (September 2005): 186-95.

Data from the Medicare Current Beneficiary Survey (MCBS) were used to examine the prevalence of propoxyphene use in cross-sections of nationally representative samples of community-dwelling elderly Medicare beneficiaries from 1993 through 1999 vaccination. This study found a continuing high prevalence of propoxyphene use in the community-dwelling elderly Medicare population from 1993 through 1999, with > 2 million beneficiaries receiving the drug in 1999.

Lo Annie, Chu Adam,

"Variance Estimation and the Components of Variance for the Medicare Current Beneficiary Survey Sample," (Rockville, MD: Westat, Inc., August 2005). (157KB)

Schneeweiss S, Wang PS, "Claims data studies of sedative-hypnotics and hip fractures in older people: exploring residual

confounding using survey information," <u>Journal of the American Geriatrics Society</u>, Vol. 53, No. 6 (June 2005): 948-54.

Identifies the magnitude of confounding bias caused by factors not measured in claims data studies of sedative-hypnotic use and fractures. Claims data studies tend to overestimate the relationship between benzodiazepine use and hip fractures. After correcting for such bias, a statistically significant association persists. Concluding that there is no relationship at all based on small clinical studies that did not reach statistical significance may be misleading.

Shaffer CL, Feldman SR, Fleischer AB Jr, Huether MJ, Chen GJ, "The cutaneous surgery experience of multiple specialties

in the Medicare population," <u>Journal of the American Academy of Dermatology</u>, Vol. 52, No. 6 (June 2005): 1045-8.

Compares the levels of cutaneous surgery experience of dermatologists and other surgical specialists. Medicare claims data on number of cutaneous surgery procedures performed by various medical disciplines, including dermatologists, plastic surgeons, general surgeons, and others, were obtained from the 1998-1999 Medicare Current Beneficiary Survey (MCBS) and analyzed.

Shumway-Cook A, Ciol MA, Yorkston KM, Hoffman JM, Chan L, "Mobility limitations in the Medicare

population: prevalence and sociodemographic and clinical correlates, "Journal of the American Geriatrics Society, Vol. 53, No. 7 (July 2005): 1217-21. Examines the prevalence of and clinical markers associated with mobility limitations in Medicare Current Beneficiary Community Survey (MCBS) respondents. National prevalence estimates suggest that functional mobility limitation is a significant problem for many older adults and is associated with some potentially modifiable characteristics.