CHANGING DEMOGRAPHIC AND GEOGRAPHIC DISTRIBUTIONS AMONG VETERANS WITH PARKINSON’S DISEASE UTILIZING THE VHA

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Introduction: Parkinson’s disease (PD) has been added to the list of service connected conditions for those Veterans who served in Vietnam during the use of herbicide. There is little published information on military service and PD.

Aims: To examine changes in the demographic and geographic distributions for PD patients receiving health care in the Veterans Health Administration (VHA) in fiscal years (FY) 2003 and 2008.

Methods: Out-patient and hospitalization data were searched for any patient receiving $\geq$ 1 ICD-9 code for PD (332.0) within either FY. Age, gender, military period of service (POS), and residence information were collected. County codes (FIPS) were linked to other FIPS-based data sources to acquire county level characteristics.

Results: VHA PD patients: 45,868 (FY03), 45,325 (FY08) with 14,729 common to both years. The percentage with World War II POS decreased from 53.6% (FY03) to 37.1% (FY08), while Vietnam Veterans increased from 13.0% to 22.1%. Crude and age-adjusted prevalences decreased from FY03 to FY08; only one age-specific rate (age 55-59) was higher in FY08. Residence in completely rural areas was greater for VHA PD population vs US 2000, though that percentage declined in FY08 for the entire PD group and each of the 3 wartime POS groups. In both years, farming counties had a higher PD prevalence than non-farming counties. (POR=1.18 [95%CI 1.11-1.26])

Conclusions: With the attrition of WWII Veterans, Vietnam Veterans comprise an increasing proportion of patients seen within VHA. The proportion living in rural, especially agricultural areas merits additional study.