

Current definitions of advanced multimorbidity: a scoping review of research, policy and practice

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Background

Multimorbidity is most commonly defined as the presence of **two or more long-term health conditions**.

With medical advances, people are **living for longer** with multimorbidity.

Current models of delivery of end of life and palliative care are designed around the needs of people with **single conditions**, predominantly cancer.

It is **challenging to identify** when people with multimorbidity are approaching the end of life – so called **advanced multimorbidity**.

Aim

This **scoping** review aims to identify and present the available evidence on how people with advanced multimorbidity are currently included in **research, policy and clinical practice**.

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Methods

- **Arksey & O'Malley** framework for scoping review
- Search terms centred around **“multimorbidity”** and **“end-stage”**, **“palliative”** and **“terminal”**
- Medline, EMBASE, CINAHL, Scopus, PsychInfo and Grey Literature
- Studies selected if defining multimorbidity in a **terminal phase**
- **Inductive content analysis**

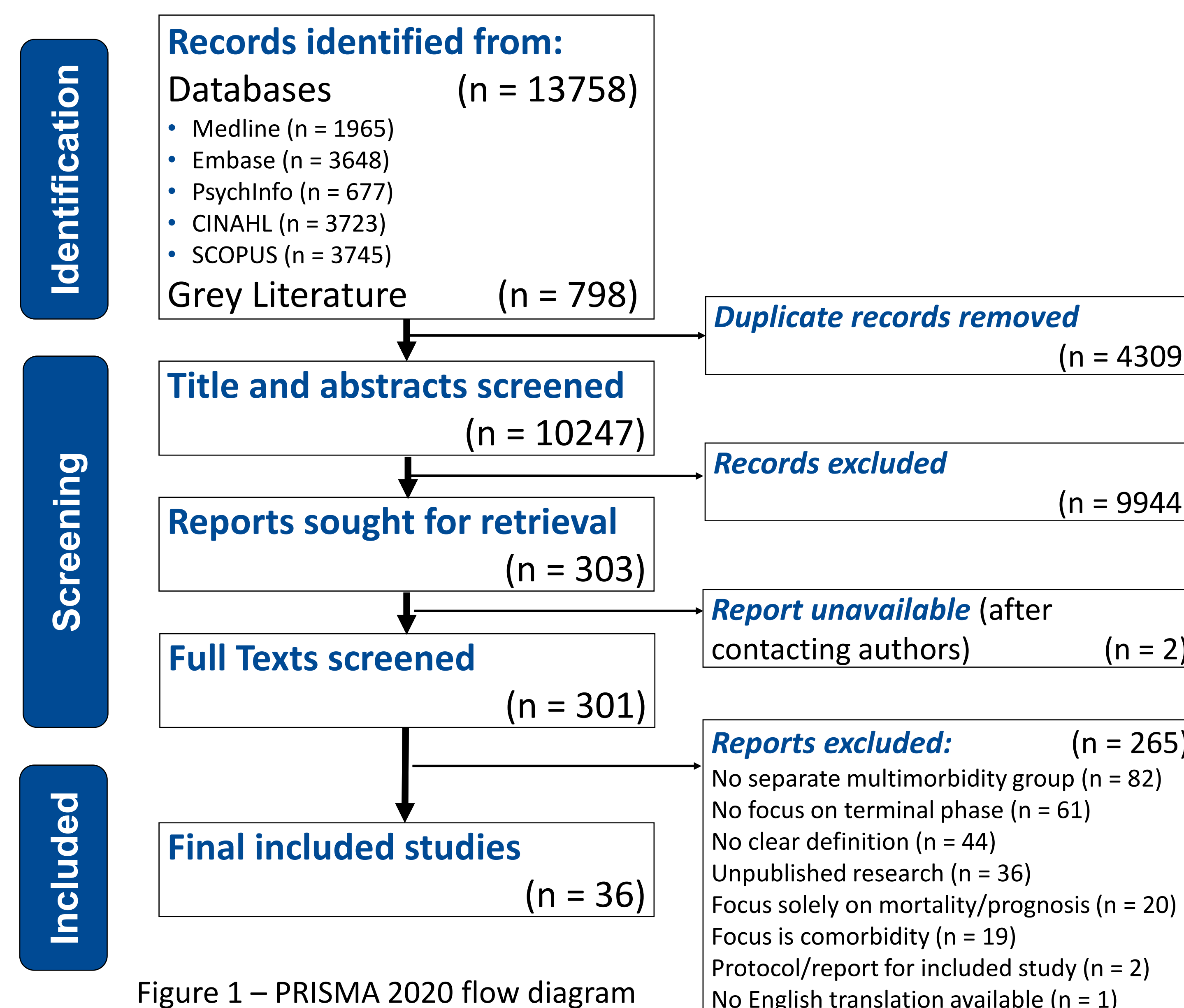


Figure 1 – PRISMA 2020 flow diagram

Results

36 studies were identified

Used **29 different definitions**

17 Quantitative, 4 Qualitative, 6 Mixed Methods, 5 Reviews, 3 Editorials, 1 Case Study

Features of study	Studies
Multimorbidity + markers of deterioration	15
Age + multimorbidity (unspecified conditions)	6
Assessment tool	5
Age + multimorbidity (specified conditions)	3
Multiple life limiting/palliative conditions	2
ICD-10 code: “Debility, unspecified”	2
Charlson score (>5)	1
Computerised algorithm	1

Table 1 – Description of definitions

Conclusion

Inconsistencies remain in how advanced multimorbidity is described
Markers of deterioration (e.g. healthcare use, physical decline) can aid identification of **end-of-life care needs**.