Preface

The Porcupine Health Unit has been providing public health programs and services in the communities of Northeastern Ontario for more than sixty years. From its inception, the goal of the Porcupine Health Unit has been to improve the health of the population of these communities. The Porcupine Health Unit recently undertook an initiative to collate and publish data on those people in our communities who are 65 years or older.

Work on this publication began in 2006 when the Community Check-up: Porcupine Health Unit Status Report was published. That report describes the core indicators set by the Mandatory Health Programs and Services Guidelines of the Ministry of Health and Long-Term Care. By illustrating the indicators, this report helps health planners to take necessary steps to achieve their program goals.

The various indicators in this report on area seniors provide snapshots of how the Porcupine Health Unit is doing with respect to seniors’ programs. They include demographics, influenza vaccination, emergency room visits, home care data, health risk behaviours (physical activity, leisure activity, smoking, and alcohol consumption), nutrition data (obesity, vegetables and fruit consumption), hip fractures, general health (activities of daily living, high blood pressure, vision, dental visits, cancer data, hospitalizations) and mortality data.

With each indicator in this report, a graph or a table has been attached. To allow the readers to evaluate the progress, comparisons were made to data from the Province of Ontario and Canada (where applicable). This report uses the most up-to-date data available at the time of writing to describe the health conditions of seniors in the Porcupine Health Unit catchment area. Data that were used to
publish this report came from the provincial and national data sources, i.e., Sta-
tistics Canada: Census 2006, the Provincial Health Planning Database (PHP-
DB), the Health Planning Service Database (HELPS), 3.1 Canadian Community Health Survey (CCHS), and Cancer Care Ontario data (SEER Stat 5.3.1).

All data were analyzed using SPSS 15.0 (SPSS Inc., Illinois, USA) and
STATA 9.1 (STATA Corp., Texas, USA) and is presented according to source guidelines, including weighted values and collapsed response categories, where required. When rates were compared among different years, the population estimates were extracted from PHPDB database and also from the 2006 Census.

During the CCHS data analyses, when the number of observations for a variable (on which an estimate was based) was less than 30, the weighted estimate was not published in this report, regardless of the value of the coefficient of variation.
Acknowledgements

I would like to take the opportunity to thank those who helped me to publish this report. First of all, I would like to thank the management committee at the Porcupine Health Unit for their continued enthusiasm, encouragement and persistent keenness to have the report published.

A special thank goes to Dr. Dennis Hong for his detailed revision and valuable suggestions. Thanks to fellow epidemiologists Lee Sieswerda who helped me extract data from the Canadian Community Health Survey by using STATA (a statistical software) in a relatively short time, and Jane Hohenadel who helped me initially to draft the contents of this publication. Gary Schelling, the Communication Specialist of the Porcupine Health Unit deserves a special thanks for his continuous support regarding the naming of the publication and creating the graphs, design and layout of this report. I would also like to thank Bonnie Schultz, Rita Numainville and Jennifer Bonsall for preliminary editing, clerical support and distribution of the publication.

Finally, I would like to extend my gratitude to my wife Yasmin Azher, whose support during the good and bad times of every day has made this work possible. Another person deserves special thanks, whose arrival in this world made my life complete: my twenty-month-old son, Auvo.

Foyez Haque
Public Health Epidemiologist
Health Unit Regions in Ontario, 2007.
Executive Summary

- This report highlights the health status of the seniors living in the geographic area served by the Porcupine Health Unit.

- In 2006, 11,300 seniors lived in the Porcupine Health Unit catchment area. Out of 11,300 seniors, 5,455 seniors lived in Timmins. Of all seniors, 56% were females whereas 44% were male.

- The highest proportion of seniors’ income (78.1%) was from old age security or guaranteed income supplement (GIS).

- About sixty-four percent (64.1%) of seniors in the Porcupine Health Unit area received influenza immunization in 2005, which is lower than the provincial average of 79.4%.

- The leading cause of emergency visits in the Porcupine Health Unit area was respiratory diseases (14.4%).

- In the health unit area, 2.7% of seniors received home care services by nurses and another 2.7% of seniors received home care services by neighbours or friends.

- Higher proportions (70.2%) of seniors in the Porcupine Health Unit area were inactive when compared to their provincial counterparts (51.2%).

- Walking (49.7%), gardening (17.7%), fishing (13.8%) and home exercise (25.9%) were the most popular leisure activities of seniors in the Porcupine Health Unit area.

- A majority of seniors in the Porcupine Health Unit area (86.3%) and in Ontario (90.2%) were either former smokers or never smoked.

- A higher proportion of seniors in the Porcupine Health Unit area (14%) were exposed to second-hand smoke than were the seniors of Ontario (7.7%).

- The proportion of regular drinkers was lower among the seniors of the Porcupine Health Unit area (36.1%) than the provincial average of 50.3%.
About sixty-three percent (63.2%) of seniors in the Porcupine Health Unit area were either overweight or obese. Provincially, about fifty-three percent (52.7%) of seniors were either overweight or obese.

About seventy-three percent (72.8%) of seniors in the health unit area wear dentures, whereas in the rest of Ontario about fifty-six percent (55.7%) seniors wear dentures.

The rate of colon cancer incidence has declined 17.5% over the period of 1988 to 2002 in the health unit area compared to a decline of about eleven percent (10.8%) in Ontario.

Trachea, bronchus and lung cancer incidence declined thirty-three percent (33.1%) from 1988 to 2002 whereas this decline was only 2.4% in Ontario.

Prostate cancer incidence has increased in both the Porcupine Health Unit area (40.7%) and in Ontario (42.5%) from 1988 to 2002. This increase might be the result of the advent of new diagnostic techniques.

The rate of colon cancer mortality in the Porcupine Health Unit area has fluctuated year to year.

The mortality rate from trachea, bronchus and lung cancer increased in the health unit area from 1988 to 2002 (28.7%) whereas the rate remained almost the same in Ontario over the same period of time.

The rate of breast cancer mortality has decreased in both Ontario (14.5%) and in the Porcupine Health Unit catchment area (45.4%) since 1988.

The rate of prostate cancer mortality in the health unit area increased 59.3% from 1988 to 2002, whereas the rate decreased by 16% in Ontario over the same time.

Cardiovascular diseases were the leading cause of hospitalization in the Porcupine Health Unit area (28.7%) followed by respiratory (14.6%) and gastrointestinal (10.3%) diseases.

Cardiovascular diseases were also the leading cause of mortality in the Porcupine Health Unit area (38.7%).
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There was no respect for youth when I was young, and now that I am old there is no respect for age. I missed it coming and going.
~ J.B. Priestly
1. Basic Demographics

**TABLE 1.** Seniors’ distribution throughout the Porcupine Health Unit area, 2006.*

<table>
<thead>
<tr>
<th>CENSUS SUBDIVISION &amp; TYPE</th>
<th>TOTAL POPULATION</th>
<th>MALE</th>
<th>FEMALE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cochrane T</td>
<td>785</td>
<td>345</td>
<td>435</td>
</tr>
<tr>
<td><strong>COCHRANE OFFICE AREA TOTAL</strong></td>
<td><strong>785</strong></td>
<td><strong>345</strong></td>
<td><strong>435</strong></td>
</tr>
<tr>
<td>Constance Lake 92 R</td>
<td>60</td>
<td>20</td>
<td>30</td>
</tr>
<tr>
<td>Hearst</td>
<td>745</td>
<td>335</td>
<td>410</td>
</tr>
<tr>
<td>Mattice-Val Cote TP</td>
<td>105</td>
<td>50</td>
<td>50</td>
</tr>
<tr>
<td><strong>HEARST OFFICE AREA TOTAL</strong></td>
<td><strong>910</strong></td>
<td><strong>405</strong></td>
<td><strong>490</strong></td>
</tr>
<tr>
<td>Hornepayne TP</td>
<td>105</td>
<td>55</td>
<td>50</td>
</tr>
<tr>
<td><strong>IROQUOIS FALLS OFFICE AREA TOTAL</strong></td>
<td><strong>920</strong></td>
<td><strong>400</strong></td>
<td><strong>515</strong></td>
</tr>
<tr>
<td>Fauquier-Strickland TP</td>
<td>140</td>
<td>55</td>
<td>60</td>
</tr>
<tr>
<td>Kapuskasing</td>
<td>1,470</td>
<td>635</td>
<td>845</td>
</tr>
<tr>
<td>Moonbeam</td>
<td>240</td>
<td>125</td>
<td>110</td>
</tr>
<tr>
<td>Opasatika</td>
<td>50</td>
<td>30</td>
<td>30</td>
</tr>
<tr>
<td>Val Rita-Harty TP</td>
<td>105</td>
<td>55</td>
<td>50</td>
</tr>
<tr>
<td><strong>KAPUSKASING OFFICE AREA TOTAL</strong></td>
<td><strong>2,005</strong></td>
<td><strong>900</strong></td>
<td><strong>1,095</strong></td>
</tr>
<tr>
<td>Black River-Matheson TP</td>
<td>460</td>
<td>205</td>
<td>240</td>
</tr>
<tr>
<td><strong>MATHESON OFFICE AREA TOTAL</strong></td>
<td><strong>460</strong></td>
<td><strong>205</strong></td>
<td><strong>240</strong></td>
</tr>
<tr>
<td>Marten Falls 65 R</td>
<td>10</td>
<td>5</td>
<td>5</td>
</tr>
<tr>
<td>Peawanuck</td>
<td>25</td>
<td>5</td>
<td>10</td>
</tr>
<tr>
<td>James Bay Area Total</td>
<td>35</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td><strong>MOOSONEE OFFICE AREA TOTAL</strong></td>
<td><strong>70</strong></td>
<td><strong>20</strong></td>
<td><strong>30</strong></td>
</tr>
<tr>
<td>Smooth Rock Falls TP</td>
<td>285</td>
<td>115</td>
<td>160</td>
</tr>
<tr>
<td>Timmins</td>
<td>5,455</td>
<td>2,320</td>
<td>3,135</td>
</tr>
<tr>
<td><strong>TIMMINS OFFICE AREA TOTAL</strong></td>
<td><strong>5,455</strong></td>
<td><strong>2,320</strong></td>
<td><strong>3,135</strong></td>
</tr>
<tr>
<td>Cochrane UNO North Part</td>
<td>340</td>
<td>190</td>
<td>145</td>
</tr>
<tr>
<td>Cochrane UNO SE Part</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td>Cochrane UNO SW Part</td>
<td>—</td>
<td>—</td>
<td>—</td>
</tr>
<tr>
<td><strong>COCHRANE UNO TOTAL</strong></td>
<td><strong>340</strong></td>
<td><strong>190</strong></td>
<td><strong>145</strong></td>
</tr>
<tr>
<td><strong>HEALTH UNIT TOTAL</strong></td>
<td><strong>11,335</strong></td>
<td><strong>4,955</strong></td>
<td><strong>6,295</strong></td>
</tr>
</tbody>
</table>

**SOURCE:** 2006 Census, Statistics Canada

(* – totals may not add up, due to census data collection processes)
About two-thirds of the senior population (57.5%) in the Porcupine Health Unit area lived with another person in the household.

About one-third of the senior population in the same area lived by themselves.

A small proportion of the senior population (8.6%) in the health unit area lived with two other individuals in the same household.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
Eleven percent (11.3%) of seniors in the Porcupine Health Unit area were university-educated (lower than the provincial average of 22.8%).

One-third of seniors have achieved only grade school with a further one-third (39%) achieving high school or college.

In the Province of Ontario, about sixty-eight percent (68.4%) of seniors were educated to either the grade school or secondary to college level.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
The highest proportion of seniors’ (78.1%) income in the Porcupine Health Unit area was from old age security (OAS) or guaranteed income supplement (GIS).

Canadian Pension Plan (CPP) (73.4%) and pensions (62.7%) were the other sources of income of local seniors.

A few seniors (4.7%) in the Porcupine Health Unit catchment area received income from the Workplace Safety and Insurance Board (WSIB).

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
About eighty-four percent of seniors (84.2%) in the Porcupine Health Unit area had enough of the kinds of food they wanted to eat, which is lower than their provincial counterparts (91.4%).

About seven percent (7.4%) of the area seniors had enough food, but not always the kinds of food they wanted to eat, which is higher than the provincial average (4.9%).

**SOURCE: 3.1 Canadian Community Health Survey, 2005**
About ninety-one percent (90.7%) of the health unit area seniors had the ability to access nutritious food. This was lower than the provincial average of 94.1%.

A small proportion (about 0.5%) of seniors in the area reported food insecurity without hunger. None of the seniors reported food insecurity with hunger.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
2. Influenza vaccination

**FIG. 6.** Proportion of seniors in the Porcupine Health Unit area and Ontario who received influenza immunization in 2005.

<table>
<thead>
<tr>
<th></th>
<th>Ontario</th>
<th>PHU</th>
</tr>
</thead>
<tbody>
<tr>
<td>had flu shot</td>
<td>79.4</td>
<td>64.1</td>
</tr>
<tr>
<td>never had flu shot</td>
<td>13.7</td>
<td>29.1</td>
</tr>
</tbody>
</table>

**SOURCE: 3.1 Canadian Community Health Survey, 2005**

- About sixty-four percent (64.1%) of seniors in the Porcupine Health Unit area received influenza immunization in 2005, which is lower than the provincial average of 79.4%.

- A substantial proportion of seniors (29.1%) in the area had never received influenza immunization, which is higher than the provincial rate (13.7%).
About fifty-eight percent (57.7%) of Porcupine Health Unit area seniors reported that they received immunization against influenza in 2004. This is lower than the provincial rate of 72.6%.

Statistics on seniors in the Porcupine Health Unit area who received influenza immunization in 2003 were almost the same as the provincial statistics.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
The Canadian Community Health Survey has identified seven reasons seniors did not receive influenza immunization.

Language problems (35.5%) and cost (35.5%) were two main reasons stated by seniors in the Porcupine Health Unit area for not having immunization against influenza.

Respondents answered they “did not think it was necessary”, “previous experience of adverse reaction”, “did not get around to it”, “fear” and “doctor did not think it was necessary” as other reasons for not receiving influenza immunization.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
The hardest years are those between ten and seventy.

— Helen Hayes
3. Emergency room visits

**FIG. 9.** Leading causes of emergency room visits by seniors in the Porcupine Health Unit area and Ontario, 2001–05.

<table>
<thead>
<tr>
<th>Category</th>
<th>PHU</th>
<th>Ontario</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not specified</td>
<td>31.2</td>
<td>16.3</td>
</tr>
<tr>
<td>Respiratory</td>
<td>14.4</td>
<td>15.6</td>
</tr>
<tr>
<td>Musculo-skeletal</td>
<td>14.4</td>
<td>11.7</td>
</tr>
<tr>
<td>Cardiovascular</td>
<td>10.5</td>
<td>9.5</td>
</tr>
<tr>
<td>Genito-urinary</td>
<td>9.5</td>
<td>7.5</td>
</tr>
<tr>
<td>Injury &amp; poisoning</td>
<td>6.2</td>
<td>4.2</td>
</tr>
<tr>
<td>Gastro-intestinal</td>
<td>5.7</td>
<td>7.8</td>
</tr>
<tr>
<td>Skin</td>
<td>3.7</td>
<td>5.7</td>
</tr>
<tr>
<td>ENT</td>
<td>2.7</td>
<td>1.7</td>
</tr>
<tr>
<td>Neurological &amp; psychiatric</td>
<td>2.7</td>
<td>2.8</td>
</tr>
</tbody>
</table>

**SOURCE:** Provincial Health Planning Database (PHPDB), extracted March 12, 2007. Health Data and Decision Support Unit, Ministry of Health and Long-Term Care, Ontario.

- In the Porcupine Health Unit area, the leading known cause of emergency visits among seniors was respiratory disease (14.4%).
- The lowest reported causes for emergency visits by seniors were neurological and psychiatric (2.7%), as well as diseases of the ears, nose and throat (2.7%).
Just remember: when you’re over the hill, you pick up speed.

~ Charles M. Schulz
4. Home care

**FIG. 10.** Percentage of seniors who received home care services covered by government in the Porcupine Health Unit area and Ontario, 2005.

<table>
<thead>
<tr>
<th>Service</th>
<th>Ontario</th>
<th>PHU</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nursing care</td>
<td>4.1</td>
<td>12.6</td>
</tr>
<tr>
<td>Health services</td>
<td>1.3</td>
<td>0</td>
</tr>
<tr>
<td>Personal care</td>
<td>0.9</td>
<td>0</td>
</tr>
<tr>
<td>House work</td>
<td>4.0</td>
<td>3.7</td>
</tr>
<tr>
<td>Meals</td>
<td>3.2</td>
<td>4.5</td>
</tr>
<tr>
<td>Shopping</td>
<td>1.2</td>
<td>0</td>
</tr>
<tr>
<td>Respite care</td>
<td>0.3</td>
<td>0.4</td>
</tr>
<tr>
<td>Medical equipment</td>
<td>0.3</td>
<td>0</td>
</tr>
</tbody>
</table>

**SOURCE: 3.1 Canadian Community Health Survey, 2005**

- A leading proportion of seniors (12.6%) in the Porcupine Health Unit area utilized nursing care services.
- House work (3.7%) and meals (4.5%) were two other home care services that seniors in the health unit area commonly used.
In the Porcupine Health Unit area as well as in Ontario, home care services were also provided by both individuals and non-governmental organizations.

In the health unit area, home care services were also provided by nurses (2.7%), and neighbours or friends (2.7%).

Homemakers (0.4%) and families (0.5%) also provided home care services to local seniors.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
FIG. 12. Barriers to accessing home care service by seniors in the Porcupine Health Unit area, 2005.

SOURCE: 3.1 Canadian Community Health Survey, 2005

- 8.4% of area seniors reported that they were too busy to access home care services.
- 5.4% of area seniors indicated that they were still waiting for home care services to be provided to them.
My grandmother started walking five miles a day when she was sixty. She is ninety-seven now and we don’t know where the hell she is.

~ Ellen DeGeneres
5. Health risk behaviour

Physical activity

**FIG. 13.** Activity levels of seniors in the Porcupine Health Unit area and Ontario, 2005.

![Graph showing activity levels of seniors in the Porcupine Health Unit area and Ontario, 2005.](graph)

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- Only 8.9% of seniors in the Porcupine Health Unit area were physically active, compared to 18% in the rest of Ontario.
About twenty-nine percent (29.3%) of seniors in the Porcupine Health Unit area spent their time sitting down during a usual day, compared to twenty-three percent of seniors province-wide.

About forty-five percent (44.8%) of seniors in the health unit area liked to spend their time standing or walking which is almost par with the Province of Ontario rate (46.1%).

About eighteen percent (18.1%) indicated that they carried light loads regularly, compared to twenty-two percent (21.6%) of seniors in Ontario.
Leisure activity

**FIG. 15.** Leisure activities in the last 3 months in the Porcupine Health Unit area and Ontario, 2005.

![Bar chart showing leisure activities in the last 3 months for the Porcupine Health Unit area and Ontario, 2005.](image)

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- Walking was the most popular activity of seniors in the Porcupine Health Unit area (49.7%), as well as for seniors province-wide (63%).

- Fewer seniors in the Porcupine Health Unit area participated in leisure activities than seniors in the rest of Ontario, with the notable exception of fishing.
Smoking

FIG. 16. Type of smoker among seniors in the Porcupine Health Unit area and Ontario, 2005.

SOURCE: 3.1 Canadian Community Health Survey, 2005

- About eleven percent (11.1%) in the Porcupine Health Unit area were daily smokers, compared to about eight percent (7.7%) of seniors in the Province of Ontario.

- Most of the seniors in the health unit area were either former smokers (52.2%) or never smoked (34.1%).
A higher proportion of seniors in the Porcupine Health Unit area were exposed to second-hand smoke (14%) than their provincial counterparts (7.7%).

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
**Alcohol drinking**

**FIG. 18.** Type of drinker among seniors in the Porcupine Health Unit area and Ontario, 2005.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- The proportion of regular drinkers among seniors in the Porcupine Health Unit area (36.1%) was lower than seniors province-wide (50.3%).

- The proportion of seniors in the Porcupine Health Unit area who identified themselves as an occasional or former drinker (24.5% and 27.6%) was higher than the provincial average (17.4% and 21%).
Binge drinking is usually described as drinking five or more drinks in one occasion and is linked to alcohol-related health problems.

The frequency of “never drinking 5 or more drinks in one occasion” was higher in the Province of Ontario (58.6%) than in the Porcupine Health Unit area (49.7%).

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
My grandmother was a very tough woman. She buried three husbands and two of them were just napping.

~ Rita Rudner
6. Nutrition

**FIG. 20.** Weight categories of seniors in the Porcupine Health Unit area and Ontario, 2005.

![Bar chart showing weight categories of seniors in the Porcupine Health Unit area and Ontario, 2005.](chart.png)

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- The combined rate of overweight and obesity was higher among seniors in Porcupine Health Unit area (63.2%) than seniors in the Province of Ontario (52.7%).

- The Body Mass Index (BMI) may underestimate or overestimate risks in adults over 65 years of age.
A lower proportion of seniors of the Porcupine Health Unit area (41.2%) consumed the recommended 5–10 servings of vegetables and fruit (according to Canada’s Food Guide to Healthy Eating, 1992) than their provincial counterparts (43.1%).

The current Canada Food Guide (Eating Well with Canada’s Food Guide, 2007) recommends at least seven servings of vegetables and fruit for seniors. In that case, many more seniors of the Porcupine Health Unit area did not meet the required amount.
A higher proportion of females (47%) consumed the previously recommended 5 to 10 servings of vegetables and fruit than their male counterparts (34.2%) in the Porcupine Health Unit area.

As might be expected, a lower proportion of females (41.7%) in the area consumed less than 5 servings of vegetables and fruit than their male counterparts (48.8%).
Old age is like a plane flying through a storm. Once you are aboard, there is nothing you can do.

~ Golda Meir
7. Hip Fractures

**FIG. 23.** Hip fracture hospitalizations in the Porcupine Health Unit area and Ontario, 2005.

![Graph showing hip fracture hospitalizations in the Porcupine Health Unit area and Ontario, 2005.](image)

<table>
<thead>
<tr>
<th>Year</th>
<th>Canada</th>
<th>Ontario</th>
<th>PHU</th>
</tr>
</thead>
<tbody>
<tr>
<td>2001</td>
<td>554</td>
<td>573</td>
<td>426</td>
</tr>
<tr>
<td>2002</td>
<td>544</td>
<td>567</td>
<td>†</td>
</tr>
<tr>
<td>2003</td>
<td>545</td>
<td>570</td>
<td>692</td>
</tr>
<tr>
<td>2004</td>
<td>525</td>
<td>553</td>
<td>723</td>
</tr>
<tr>
<td>2005</td>
<td>502</td>
<td>521</td>
<td>622</td>
</tr>
</tbody>
</table>

**SOURCE:** CIHI Health Indicator Reports, Canadian Institute for Health Information, 2005 († - data not available)

- The rate of hip fracture hospitalizations was higher in the Porcupine Health Unit area than in Ontario and Canada over the period of 2003 to 2005.
- Over the period of 2001 to 2005, the highest number of hip fracture hospitalizations in the Porcupine Health Unit area was reported in 2004 (723/100,000 population).
Retirement at sixty-five is ridiculous. When I was sixty-five, I still had pimples.

~ George Burns
8.0 General Health

Hypertension

**FIG. 24.** Proportion of seniors who have high blood pressure in the Porcupine Health Unit area and Ontario, 2005.

![Bar chart showing proportion of seniors with high blood pressure](chart.png)

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- About fifty percent of the area seniors (49.6%) reported having high blood pressure, which was higher than their provincial counterparts (45.2%).

- This is self-reported data and therefore may be an overestimation of the diagnosis of high blood pressure. Some seniors may report high blood pressure without true diagnosis.
Fifty-five percent of the area seniors reported taking blood pressure medication, compared to about forty-eight percent (47.7%) of seniors province-wide.

**Source:** 3.1 Canadian Community Health Survey, 2005

**Fig. 25.** Proportion of seniors taking high blood pressure medication in the Porcupine Health Unit area and Ontario, 2005.
Activities of daily living


SOURCE: 3.1 Canadian Community Health Survey, 2005

- A lower proportion of seniors in the health unit area (49.7%) reported that they had activity limitation. In the Province of Ontario 53.1% of seniors and in Canada 52.8% of seniors reported that they had activity limitation.

- A higher percentage of seniors in the health unit area with activity limitations reported that they were regularly active, as compared to both Ontario and Canada seniors.
Vision

**FIG. 27.** Proportion of seniors with cataracts in the Porcupine Health Unit area and Ontario, 2005.

![Bar chart showing proportion of seniors with cataracts in PHU and Ontario in 2005](chart.png)

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- About twenty-one percent (21.3%) of the Porcupine Health Unit area seniors reported having cataracts, compared to 23.5% of seniors in the entire province.
Only fifty-two percent (51.7%) of seniors in the Porcupine Health Unit area reported visiting an eye doctor in the last year, compared to sixty percent (60%) province-wide.

A small proportion of seniors (5.4%) in the health unit area reported they had not visited an eye doctor in the last 12 months. This was higher than the provincial average (1.1%).

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
Dental visits

**FIG. 29.** Frequency of dentist visits among seniors in the Porcupine Health Unit area and Ontario, 2005.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005

- About twenty-nine percent (29.1%) of the seniors in the Porcupine Health Unit area reported visiting a dentist more than once, compared to about fifty-three percent (53.1%) in the entire province.

- About fifty-six percent (55.9%) of the seniors in the health unit area reported visiting the emergency department for a tooth disorder, compared to about thirty-three percent (33.2%) of seniors province-wide.
About three-quarters of seniors in the Porcupine Health Unit area (72.8%) reported wearing dentures or having artificial teeth, whereas about half of the seniors in the Province of Ontario (55.7%) reported wearing dentures.

**SOURCE:** 3.1 Canadian Community Health Survey, 2005
In both Ontario (21.9%) and the Porcupine Health Unit area (11.3%), the dental insurance provider most utilized by seniors was employer-sponsored insurance agencies.

Government and private insurance agencies were also indicated as providers of dental insurance to seniors in both the health unit area and in Ontario as a whole.
9. Cancer


- In the Porcupine Health Unit area, the rate of colon cancer decreased about eighteen percent between 1988 and 2002. Over the same period, the Province of Ontario as a whole experienced about an eleven percent drop.

- The highest incidence of colon cancer in the health unit area was reported in 1989 (328.2/100,000).

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
The incidence rate of cancer of the trachea, bronchus and lung in the Porcupine Health Unit area has been higher than the provincial average since 1988.

The cancer incidence in the health unit area rate decreased thirty-three percent (33.1%) in 2002 from that of 1988.

The highest incidence of cancer of the trachea, bronchus and lung in the health unit area was reported in 1994 (569.9/100,000 population).

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
The prostate cancer incidence rate has increased in both Ontario (42.5%) and in the Porcupine Health Unit area (40.7%) over the years from 1988 to 2002. This increased incidence may be the result of improved diagnostic techniques.

The highest incidence of prostate cancer in the health unit area was reported in the year 2000 (560.3/100,000 population).

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
Breast cancer incidence rates have increased in the Porcupine Health Unit area since 1988. The rate remained practically the same in the Province of Ontario over the same period of time.

In some years, especially from 1989 to 1992, the breast cancer incidence rates decreased in the health unit area, but since 1995 these rates have started to climb again.

The highest rate of breast cancer incidence in the health unit area was reported in 2002 (249.5/100,000 population).

**FIG. 35. Incidence of breast cancer among seniors in the Porcupine Health Unit area and Ontario, 1988–2002.**

<table>
<thead>
<tr>
<th>Year</th>
<th>Ontario</th>
<th>PHU</th>
</tr>
</thead>
<tbody>
<tr>
<td>1988</td>
<td>204.6</td>
<td>155.8</td>
</tr>
<tr>
<td>1989</td>
<td>210.4</td>
<td>175.1</td>
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<td>1992</td>
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<td>235.9</td>
</tr>
<tr>
<td>2002</td>
<td>200.7</td>
<td>249.5</td>
</tr>
</tbody>
</table>
The rate of colon cancer mortality in the Porcupine Health Unit area has fluctuated from year to year.

The highest mortality rate from colon cancer in the health unit area was reported in 1992 (165/100,000 population).

The mortality rate of colon cancer dropped in the Province of Ontario in the period from 1988 to 2002 (17.9%).
The mortality rate for cancers of the trachea, bronchus and lungs in the Porcupine Health Unit area was consistently higher than that of Ontario.

The rate of mortality from trachea, bronchus and lung cancer in the Porcupine Health Unit area increased substantially from 1988 to 2002 (28.7%), whereas the rate remained steady in the whole of Ontario.

The highest rate of mortality due to trachea, bronchus and lung cancer in the health unit area was reported in 2001 (552/100,000 population).

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
The rate of breast cancer mortality declined in both Ontario (14.5%) and in the Porcupine Health Unit area (45.4%) from 1988 to 2002.

The highest rate of breast cancer mortality in the Porcupine Health Unit area was reported in 1997 (127.4 deaths per 100,000).

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
The rate of prostate cancer mortality in the Porcupine Health Unit area increased 59.3% from 1988 to 2002.

The rate of prostate cancer mortality in the Province of Ontario declined slightly (16%) over the same period of time.

**SOURCE:** Cancer Care Ontario, SEER*Stat data, 2004
10. Hospitalization

**FIG. 40.** Leading causes of hospitalizations of seniors in the Porcupine Health Unit area and Ontario, 1996–2005.

**SOURCE:** Provincial Health Planning Database (PHPDB), extracted April 05, 2007. Health Data and Decision Support Unit, Ministry of Health and Long-Term Care, Ontario.

- Ten leading causes of hospitalization were identified. Cardiovascular diseases were the foremost cause of hospitalizations in the Porcupine Health Unit area (28.7%) and in Ontario (30.3%).

- Respiratory diseases (14.6%), non-specific causes (12%) and gastrointestinal diseases (10.3%) were also leading causes of hospitalizations in the health unit area.
Old age is the most unexpected of all things that happen to a man.

~ Leon Trotsky
11. Mortality

**FIG. 41.** Cause-specific deaths of seniors in the Porcupine Health Unit area and Ontario, 1994–2003.

**SOURCE:** Provincial Health Planning Database (PHPDB), extracted April 11, 2007. Health Data and Decision Support Unit, Ministry of Health and Long-Term Care, Ontario.

- In the Porcupine Health Unit area, about thirty-nine percent (38.7%) of seniors’ deaths were attributed to cardiovascular diseases. In Ontario, the rate was 41.1%.

- Cancer (26.4%) and respiratory diseases (10.7%) were also identified as leading causes of seniors’ mortality in the Porcupine Health Unit area.