

Sample LE Report: Case 3 Review Sample

In the sample case shown below, this patient had notable physical impairments mostly associated with mitral insufficiency and previous open-heart surgery to repair the valve. The use of a +/- system would likely have suggested a reduction in LE associated with a heart condition through the use of a mortality multiplier above 1.0. The Lapetus medical assessment concluded that this person's health risk is roughly equivalent to that of the average man his age – a conclusion documented in an NIH funded study at Yale University. This patient falls into Category # 3, which means a summary of the medical history is provided, but his LE is estimated entirely by the Summary Adjusted Life Expectancy based on his personal attributes.



SURVIVAL PROBABILITY REPORT

Report Date: February 16, 2019

Case Number: 001-010119-C

Date of birth: 1934

Gender: male

Smoking status: never smoker

Height/Weight (BMI): 24.52 (healthy)

Education: no data

Family Income: no data

Marital Status: widower

Physical Activity: walking and yard work, lives independently

Self-Reported Health: NA

Cholesterol (total, HDL, LDL): NA

Blood Pressure: 127/79 (good) - 128/70

Fasting Blood Sugar: 69

Age at menopause (f): NA

Conclusion

Case No. 001-021419-A: Lapetus LE = **77 months**

Conditional Survival Probabilities to Subsequent Ages

[Presented as survival probabilities to calendar years from date of Lapetus LE estimate. For example, a survival probability of 1 = 60% means there is a 60 percent chance the person will be alive one year from the date of assessment; and a 40% chance of death in that calendar year. Survival probabilities do not always correspond precisely to the projected median age at death.]

1 = 91.0%
2 = 81.9%
3 = 73.0%
4 = 64.0%
5 = 55.5%
6 = 47.6%
7 = 40.1%
8 = 33.1%
9 = 26.7%
10 = 21.0%

Medical History Summary

Case No. 001-021419-A: This patient is an 85-year-old male whose primary impairment is symptomatic mitral insufficiency with atrial fibrillation and valvular cardiomyopathy. Because of severe mitral insufficiency he had open heart surgery in 2013 with repair of his mitral valve and incidental repair of his tricuspid valve. His echocardiogram reveals a preserved ejection fraction between 50% and 60%; a massively dilated left atrium; and evidence of the surgical repair of the valves.

Since surgery, he has been maintained on hydrochlorothiazide 12.5 mg daily, doxepin 10 mg at HS and metoprolol, presumably for rate control of his atrial fibrillation. His BNP (a marker for Congestive heart failure) was discovered to be 220. Normal is less than 100. This higher BNP level is consistent with compensated congestive heart failure. His heart failure is being treated with metoprolol and a very small dose of diuretics.

His other past medical history is a remote cystectomy and urostomy for bladder cancer. There has been no evidence of recurrent cancer. He has obstructive sleep apnea being treated with bipap. He has chronic chest pain that resulted in cardiac angiography. They found no high grade obstructions or critical stenosis. He has recently had a CT scan of his abdomen and chest revealing a slightly dilated aorta and a compression fracture of T7. The T7 fracture could be the cause of his pain since his coronaries are not significantly blocked.

In the Annals of Thoracic surgery (2004, October) there was an article reporting marked improvement in LE in elderly patients post repair of mitral insufficiency. The NIH Heart, Lung and Blood Institute Center at Yale has suggested that elderly patients who have had mitral valve repair for severe mitral insufficiency would likely have a normal LE.

This patient's estimated LE is 77 months.

Willcox Comparison With Other LE Providers

The Lapetus estimated remaining duration of life: **77 months**.

Other LE providers: none

Willcox Mortality Summary

The average remaining duration of life for a man this age in the United States is **76.9 months**.

The Lapetus estimated remaining duration of life is **77 months**.

This is an 85-year-old widowed nonsmoking male whose primary impairment is symptomatic mitral insufficiency with atrial fibrillation and valvular cardiomyopathy. His open heart surgery to repair the mitral valve was successfully completed in 2013. Although he has a massively dilated left atrium, his congestive heart failure is being successfully treated. His other comorbidities are not life threatening. Evidence suggests that this patient is likely to have a normal LE for a man his age.