The J1 adolescent health check-up -A retrospective cohort study

Riens B • Mangiapane S

Abstract

Background: Since 1998 the J1 adolescent health check-up is one of the service offers of the statutory health insurance funds. Beside a complete medical examination the J1 includes an anamnestic investigation of the whole life situation. Although there are references for a contribution to the recognition of health problems, there is still a remarkably low attendance rate. The aim of the present study is a regional analysis of the J1 attendance rates on the basis of nationwide outpatient care claims data. An additional aspect of interest is the identification of the medical specialist groups, who carry out the J1 examinations.

Method: The basis of calculation are the nationwide outpatient care claims data from 2007 to 2010 referred to §295 SGB V. The calculation of the cumulative attendance rate of the adolescents aged 15 years in 2010 is carried out by the addition of the J1 attendances from 2007 to 2010 of this cohort. The basic population is defined by a KM6-statistic corrected population statistic.

Results: Measured by means of the cumulative utilization results in a nationwide J1 check-up rate of 43.4%, with only small gender-related differences (boys 43.8%, girls 43.0%). The participation at the J1 check-up varies highly at the level of the administrative districts (range: 21.0% to 69.7%) as well as between the districts of the association of statutory health insurance physicians (range: 35.5% to 52.6%). Presumably, the higher rates are caused by the implementation of an invitation and reporting procedure.

Adolescents, who live in rural areas (38.3% to 41.5%), take part less frequent in the J1 check-up than adolescents living in urban areas (44.4% to 44.8%). A correlation of the J1 check-up rate with the ratio of physicians to population was not found

The average age at the J1 check-up attendance is 13.4 years. From 2007 to 2010 there is a slight but significant decrease (p<0,001) of the average age, especially in East Germany.

62% of the J1 check-ups are carried out by pediatricians.

Conclusion: The J1 check-up offers an opportunity to reveal undesirable developments, diseases, deficits of vaccinations and harmful behavior of the adolescents. A comparison with other publications shows a great decrease of attendance from the primary preventive U-examinations in early childhood to the J1 check-up.

Some regions in Germany show J1 attendance rates far below the average rate of 43.4%. An increase of the J1 rate by added educational advertising and information of the local health offices, the schools, the physicians, the health insurance funds and the regional associations of statutory health insurance physicians is desirable. The regions with low utilization rates should be brought into special focus.

