

28 December 2011

Hospital Morbidity Survey
Year 2010

The number of inpatient admissions to hospital in Spain decreases 1.3% in 2010

Diseases of the circulatory system and pregnancy and delivery result in the highest number of admissions

During the year 2010, there occurred 4,720,545 inpatient hospital admissions, representing a 1.3% decrease as compared with 2009. This was the second interannual consecutive decrease of this type of admission.

The rate of admission per 100,000 inhabitants stood at 10,246, that is, 1.6% less. This was fundamentally due to the decrease in pregnancy and delivery, second consecutive year, and to the gradual increase in outpatient surgery without overnight stays in hospitals.

Women accounted for 53.6% of the total admissions. Nevertheless, if we were to exclude admissions due to pregnancy, delivery and puerperium, the higher percentage of participation would correspond to **men** (52.9%).

Main discharge diagnoses

Hospitalisations due to diseases of the circulatory registered the highest number of admissions (13.0 per 100 admissions). They were followed by pregnancy, delivery and puerperium¹ (12.3), diseases of the digestive system (12.1), diseases of the respiratory system (10.7) and tumours (9.3).

Evolution of admissions by large groups of diseases (% over the total hospital admissions). Years 1990-2010.

	1990	1995	2000	2005	2010
Circulatory system	8.2	10.4	12.3	12.8	13.0
Pregnancy and delivery	13.7	11.2	11.4	12.9	12.3
Digestive system	10.2	11.0	11.5	11.8	12.1
Respiratory system	7.4	8.3	9.6	10.6	10.7
Tumours	7.1	7.6	7.9	8.5	9.3
Injuries and poisoning	7.8	7.4	8.0	8.3	8.6

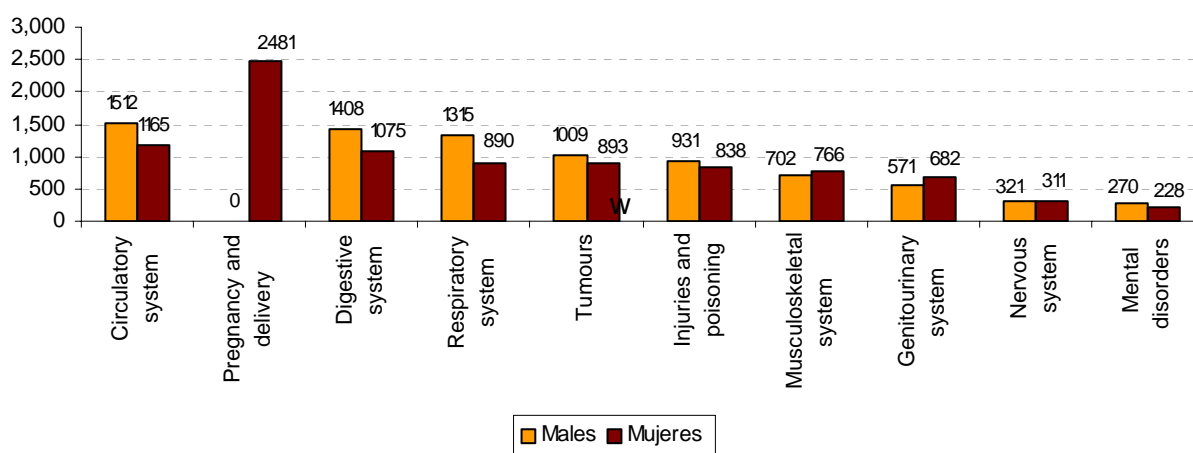
¹ Within this group we included the diagnoses that lead to delivery in any of its modalities (normal delivery, caesarean, premature delivery, etc.) and others, such as hypertension or haemorrhages that complicated pregnancy, delivery or puerperium (the period from the convalescence of childbirth to the complete normality of the genital organs)

Among females, the number one cause of hospitalisation corresponded to pregnancy, delivery and puerperium, with 22.9% of the total in 2010. However, this cause of hospitalisation decreased, second consecutive year (23.3% in 2009 and 24.5% in 2008). This data was in accordance with the evolution of the number of births in Spain, which decreased 1.9% the previous year.

The following causes of hospitalisation in women corresponded to the group of diseases of the circulatory system (10.8%) and diseases of the digestive system (9.9%).

Among men, the diseases that caused the highest number of hospitalisations were those of the circulatory system, with 15.7% of the total.

Discharges per 100,000 inhabitants by most frequent diagnosis groups and sex. Year 2010



Hospitalisations by age

The average age on admission to hospital stood at 53 years (54.8 years in men and 51.4 in women), as compared with 52.4 years registered in the year 2009.

If we were to exclude admissions due to pregnancy, delivery and puerperium, the average age of women would rise to 57.4 years.

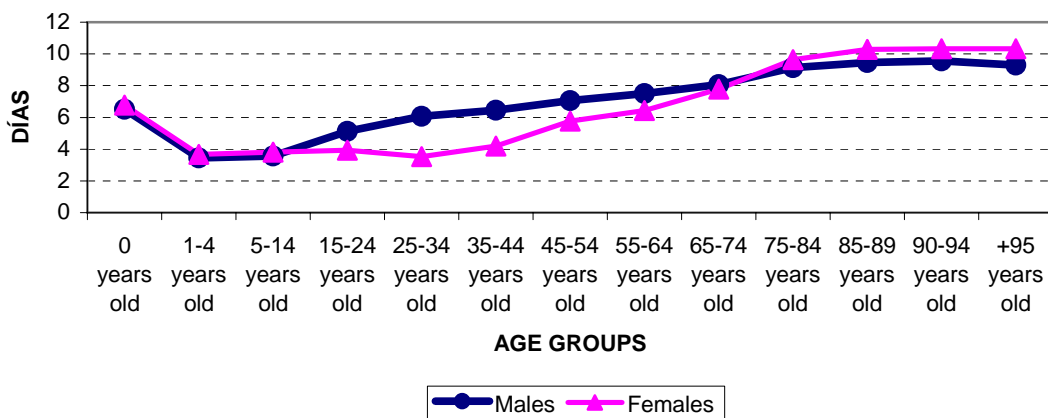
Likewise, worth noting was the increase, over the last two decades, in the percentage of participation of the oldest age groups over the total hospital admissions. So, if 2.5 out of 10 correspond to people of 65 years and over in 1990, the proportion stood at four out of ten in 2010.

Hospital stays by sex, age and large groups of diseases

The average stay per hospital admission was 6.82 days, as compared with 6.90 in 2009 and 6.96 in 2008.

By groups of diseases, long stays (not taking into consideration mental illnesses) corresponded to infection and parasitic diseases (8.99 days), diseases of newborns or associated with birth (8.84 days) and to tumours (8.71 days).

Average stay by age and sex. Year 2010



Reasons for discharge and admissions via Emergency

The number of hospital admissions for persons admitted via Emergency represented 59.2% of total admissions in 2010, as compared with 59.6% registered in the year 2009.

92.2% of the discharges were produced as a result of cure or improvement, 3.8% from death, 4.0% due to transfer to other centres or other causes.

The main causes of death in Spanish hospitals were tumours (24.7% of the total), diseases of the circulatory system (22.3%) and of the respiratory system (17.6%).

Hospitalisations by Autonomous Community

The highest numbers of hospital admissions per 100,000 inhabitants were recorded in Illes Balears, Comunidad Foral de Navarra and Aragón, in the year 2010.

In turn, Andalucía and Canarias and the autonomous city of Melilla presented the lowest number of admissions per 100,000 inhabitants.

By groups of diseases, pregnancy, delivery and puerperium caused the highest rate of hospital admissions in Andalucía, Castilla-La Mancha, Comunidad de Madrid, Región de Murcia and the autonomous cities of Ceuta and Melilla.

In Illes Balears and Comunidad Foral de Navarra the first place in admissions was occupied by the group of diseases of the digestive system. In turn, diseases of the circulatory system occupied the first place in the eleven remaining Communities.

Admissions per 100,000 inhabitants, by Autonomous Community of hospitalisation. Year 2010

AVERAGE	10.246		
Andalucía	8,464	Extremadura	10,342
Aragón	11,781	Galicia	10,615
Asturias Principado de	11,589	Madrid Comunidad de	10,609
Balears, Illes	12,052	Murcia Región de	9,842
Canarias	8,658	Navarra, Comunidad Foral de	12,030
Cantabria	9,743	País Vasco	11,329
Castilla y León	11,081	Rioja, La	10,597
Castilla-La Mancha	9,139	Ceuta	9,528
Cataluña	11,287	Melilla	8,386
Comunitat Valenciana	10,102		

The Autonomous Communities with the longest **average stay** were Galicia (7.87 days), Cantabria (7.68 days) and Principado de Asturias (7.62 days).

In contrast, those with the shortest average stay in 2010, were Illes Balears (5.58 days), Comunitat Valenciana (5.72 days) and the autonomous city of Melilla (5.72 days).

International Data: Shortlist for diagnosis groups for international dissemination (Eurostat/OECD/WHO) of Hospital Morbidity data

With the hospital admissions information corresponding to the year 2005, for the first time, the Shortlist for diagnosis groups for international dissemination of Hospital Morbidity data was published, agreed upon by the main international institutions in this area (Eurostat, OECD and WHO), and which allowed for a homogeneous comparison of the figures and diagnoses among countries in subsequent years.

Hospital admissions per 100,000 inhabitants for different countries and diagnosis groups ². Year 2009

Countries	All diagnoses	Diseases of the circulatory system	Diseases of the respiratory system	Diseases of the digestive system	Pregnancy and delivery **
Germany	23,658	3,499	1,497	2,191	2,110
Canada *	8,403	1,090	694	890	2,573
Spain	10,411	1,295	1,186	1,241	2,568
United States *	13,086	1,950	1,180	1,128	2,985
France	26,251	2,220	1,244	3,201	3,889
Italy	13,021	2,049	1,040	1,250	2,344
Japan*	10,709	1,384	887	1,334	1,542
Portugal	11,250	1,321	1,079	1,100	1,880
United Kingdom	13,798	1,321	1,203	1,216	3,102
Turkey	13,317	1,433	1,674	1,095	3,166

* Data corresponding to the year 2008 ** Episodes per 100,000 women

Average stay in days, for different countries and diagnosis groups ². Year 2009

Countries	All diagnoses	Diseases of the circulatory system	Diseases of the respiratory system	Diseases of the digestive system	Pregnancy and delivery
Germany	9.7	10.0	8.5	7.0	4.6
Canada *	7.7	8.5	7.8	6.0	2.5
Spain	6.9	8.2	7.0	5.8	3.1
United States *	4.9	4.6	5.4	4.7	2.7
France	5.6	6.9	7.0	5.3	4.7
Italy	6.7	7.7	8.1	6.7	4.0
Portugal	5.9	7.4	7.6	5.4	3.3
United Kingdom	7.7	10.3	7.7	6.2	2.4
Turkey	4.3	4.6	4.7	3.8	2.1

* Data corresponding to the year 2008

² Source: OECD (Further information available on the website: <http://www.oecd.org/els/health/data>). The complete list of diagnoses included in the Eurostat/OECD/WHO Shortlist is published in tables 3.1-3.4 and 4.1-4.4 of the Hospital Morbidity Survey 2005-2010.

Methodological note

The main objective of the Hospital Morbidity Survey is to ascertain the demographic-health features of the patients discharged who have been admitted to a hospital and have stayed there at least one night, as well as to provide information on a provincial and state level on the rate of visits and use of hospital resources throughout a reference year.

The Survey collects information by a sampling of 90.6% of both public and private Spanish hospitals in 2010, such that the number of patients collected directly from hospitals reaches 97.1% of total inpatient hospital admissions taking place annually in Spain.

Health information focuses on the main diagnosis stated in the hospital discharge report received by the patient, and which caused his/her admission according to the criteria of the clinical department or doctor who treated the patient. The features collected from the patient are as follows: sex, age, date admitted, date discharged, province of residence, type of admission and reason for discharge.

The Survey allows for determining the average stay for each type of diagnosis, ascertaining the scope of influence of hospitals according to the province of residence of the patient, and performing epidemiological studies of certain diseases.

As of the year 2005, we have microdata with a breakdown level of four digits in the main diagnosis, in accordance with the International Classification of Diseases. (ICD-9-MC). As of that same year, the publication includes the International Shortlist of Diagnosis Groups agreed upon by Eurostat, OECD and the WHO for the dissemination of Hospital Morbidity data.