

21 March 2024

## Hospital Morbidity Survey Year 2022

### Main results

- The number of hospital discharges increased by 5.3% in 2022.
- Between the most frequent hospitalisation causes, the respiratory system diseases increased a 35.9%, while infectious and parasitic diseases decreased a 13.6%.
- The average hospital stay decreased a 2.4% to sit in 8.1 days.

### More information

- [Annex of tables](#) (includes information from the Autonomous Communities and provinces)
- [Detailed results](#)

In 2022, there were 4,751,829 hospital discharges, 5.3% more than in 2021. By sex, discharges increased 5.5% in men and 5.0% in women. If the episodes of pregnancy, childbirth and the puerperium are excluded, the increase of women was 6.3%.

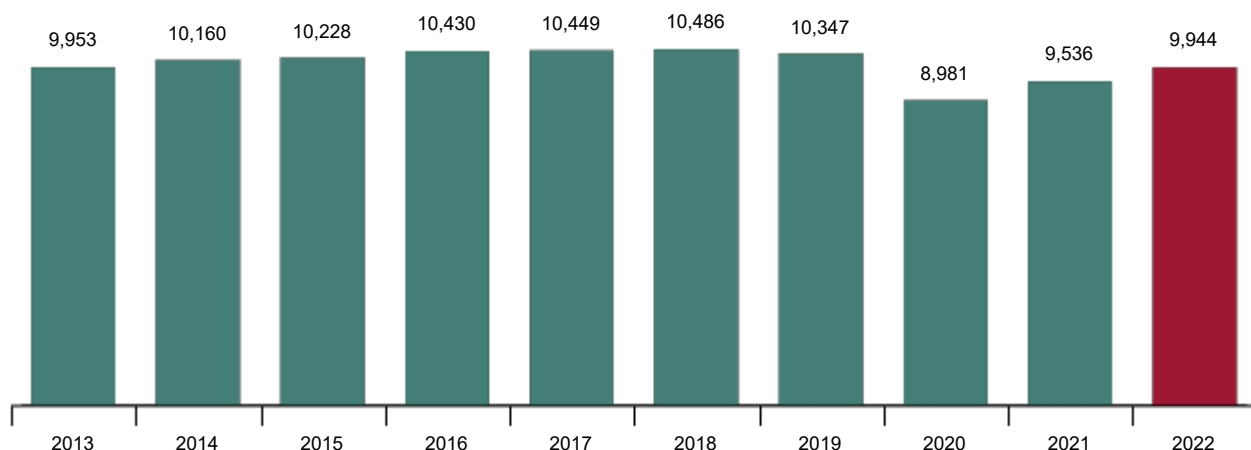
More than half of hospital discharges corresponded to women (51.6%). However, if pregnancy, childbirth and puerperium are excluded, this percentage would be of 47.5%.

Of the hospital discharges during the year, 63.5% were emergency admissions.

With regard to the data regarding hospital discharges per 100,000 inhabitants (known as hospital morbidity rates), in 2022 there were 9,944 discharges per 100,000 inhabitants, which was an increase of 4.3% over the previous year.

### Hospital discharges. 2013-2022 Series

Rates per 100,000 inhabitants

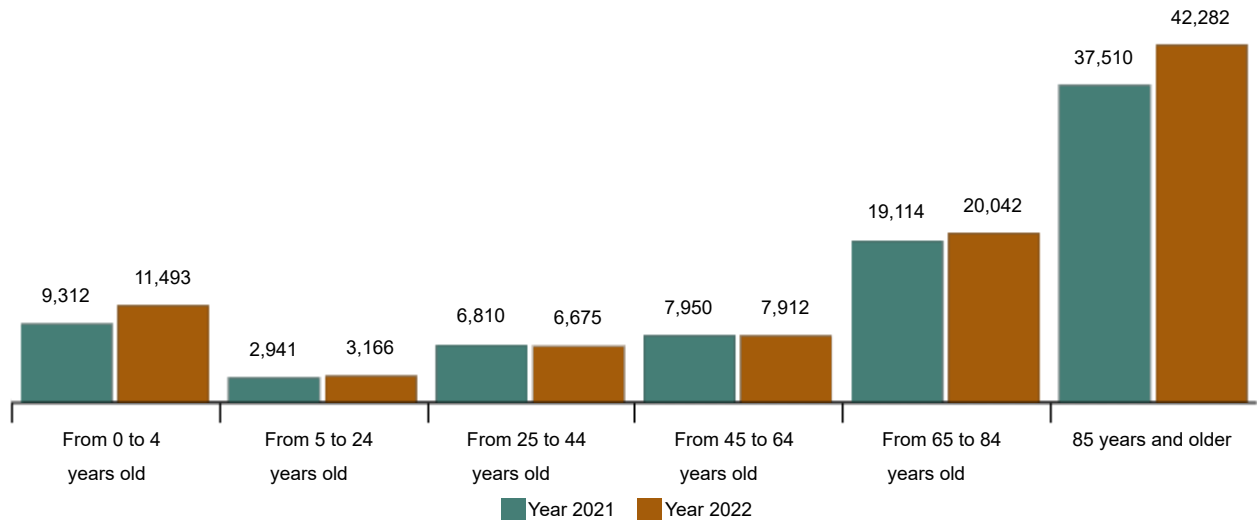


The male hospital morbidity rate increased by 4.5% and stood at 9,822 discharges per 100,000 men. That of women rose by 4.1%, to 10,061 discharges per 100,000 women. However, if discharges due to episodes of pregnancy, childbirth and puerperium are excluded, the female rate rose by 5.3% and stood at 8,547 discharges per 100,000 women.

By age, the greatest increases regarding 2021 happened on the 0 to 4 (23.4%) and the 85 and over (12.7%) age groups.

### Hospital discharges by age groups. Years 2021-2022

Rates per 100,000 inhabitants

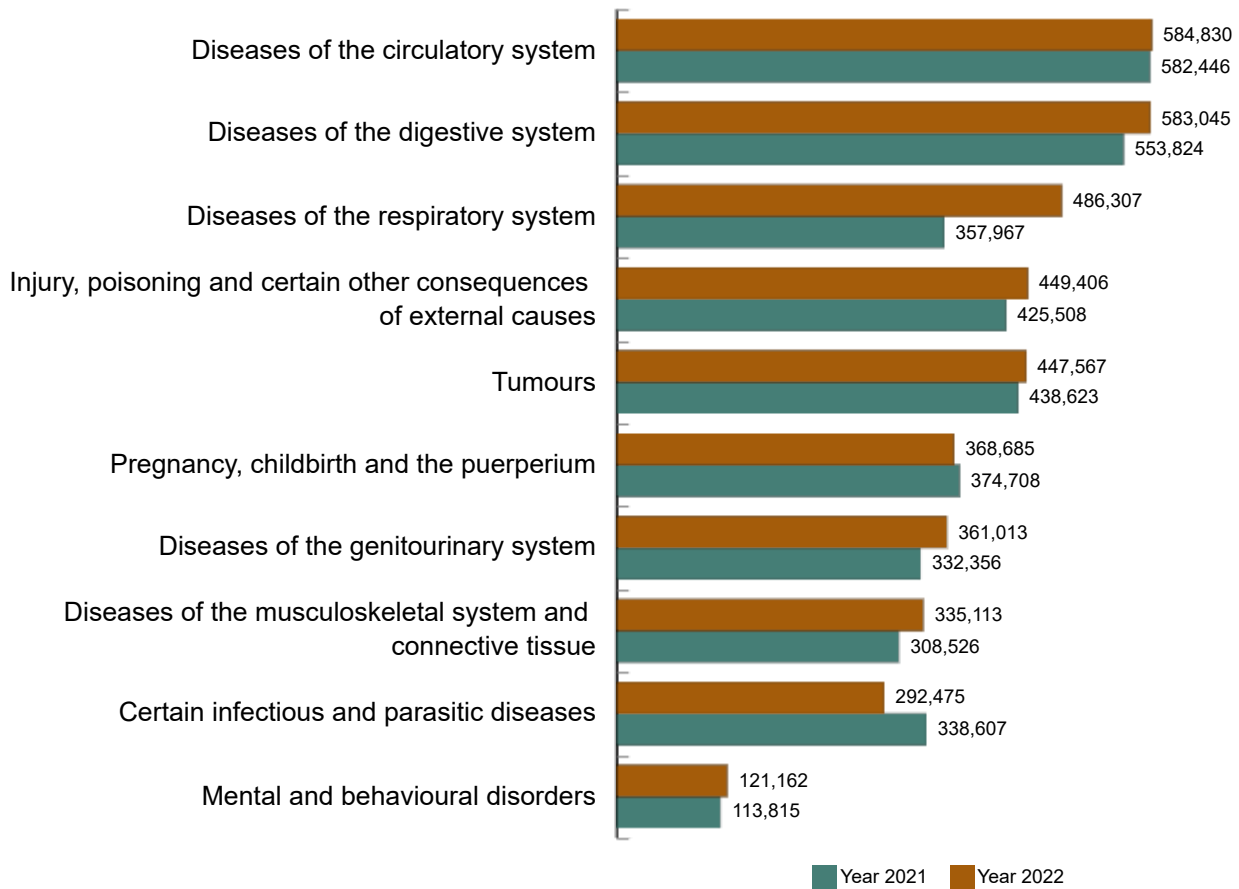


The pandemic led to a change in the pattern of causes of hospitalisation when compared to previous years, affecting respiratory diseases to a greater extent, which fell significantly.

But this effect fade away on 2022. Therefore, *respiratory system diseases* increased a 35.9%, while *infectious and parasitic diseases* -COVID-19 infection included- decreased a 13.6%.

## Main diagnoses for hospital discharges. Year 2021-2022

Absolute Values



## Average age of patients

The average age of discharged people in 2022 was 58.4 years old, which means a four tenths increase compared to the previous year (the average age in men was of 59.6 years old and 57.1 years old in women).

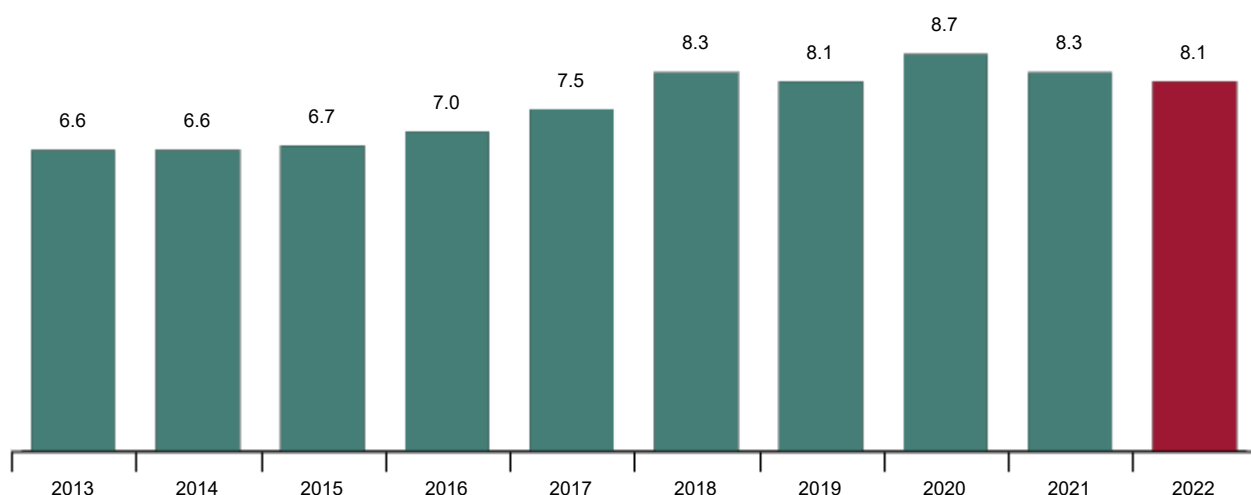
By diagnosis group, circulatory diseases had the highest average age, both for men (69.9 years average) and women (76.3 years).

## Average hospital stay

The average hospital stay was of 8.1 days in 2022, which meant a 2.4% less compared to the previous year. In public hospitals, it was of 7.6 days and in private hospitals, 9.5 days.

### Evolution of the average patient stay by discharge year

Average stay in days



For more frequent diagnostic groups, the longer average stays corresponded to *mental and behavioural disorders* (50.4 days), *infectious and parasitic diseases* (10.2) and *circulatory system diseases* (8.9).

### Average stay by most frequent diagnostic groups

Absolute values and number of days

|  | Total discharges | Average stays |
|--|------------------|---------------|
| <b>TOTAL DIAGNOSTICS</b>   | 4,751,829        | 8.1           |
| <b>Diseases of the circulatory system</b>                                  | 584,830          | 8.9           |
| <b>Diseases of the digestive system</b>                                    | 583,045          | 5.6           |
| <b>Diseases of the respiratory system</b>                                  | 486,307          | 7.3           |
| <b>Injury, poisoning and certain other consequences of external causes</b> | 449,406          | 8.3           |
| <b>Tumours</b>   | 447,567          | 7.8           |
| <b>Pregnancy, childbirth and the puerperium</b>                            | 368,685          | 3.0           |
| <b>Diseases of the genitourinary system</b>                                | 361,013          | 5.2           |
| <b>Diseases of the musculoskeletal system and connective tissue</b>        | 335,113          | 5.0           |
| <b>Certain infectious and parasitic diseases <sup>1</sup></b>              | 292,475          | 10.2          |
| <b>Mental and behavioural disorders</b>                                    | 121,162          | 50.4          |

<sup>1</sup>COVID-19 infection is included in the group of Certain infectious and parasitic diseases

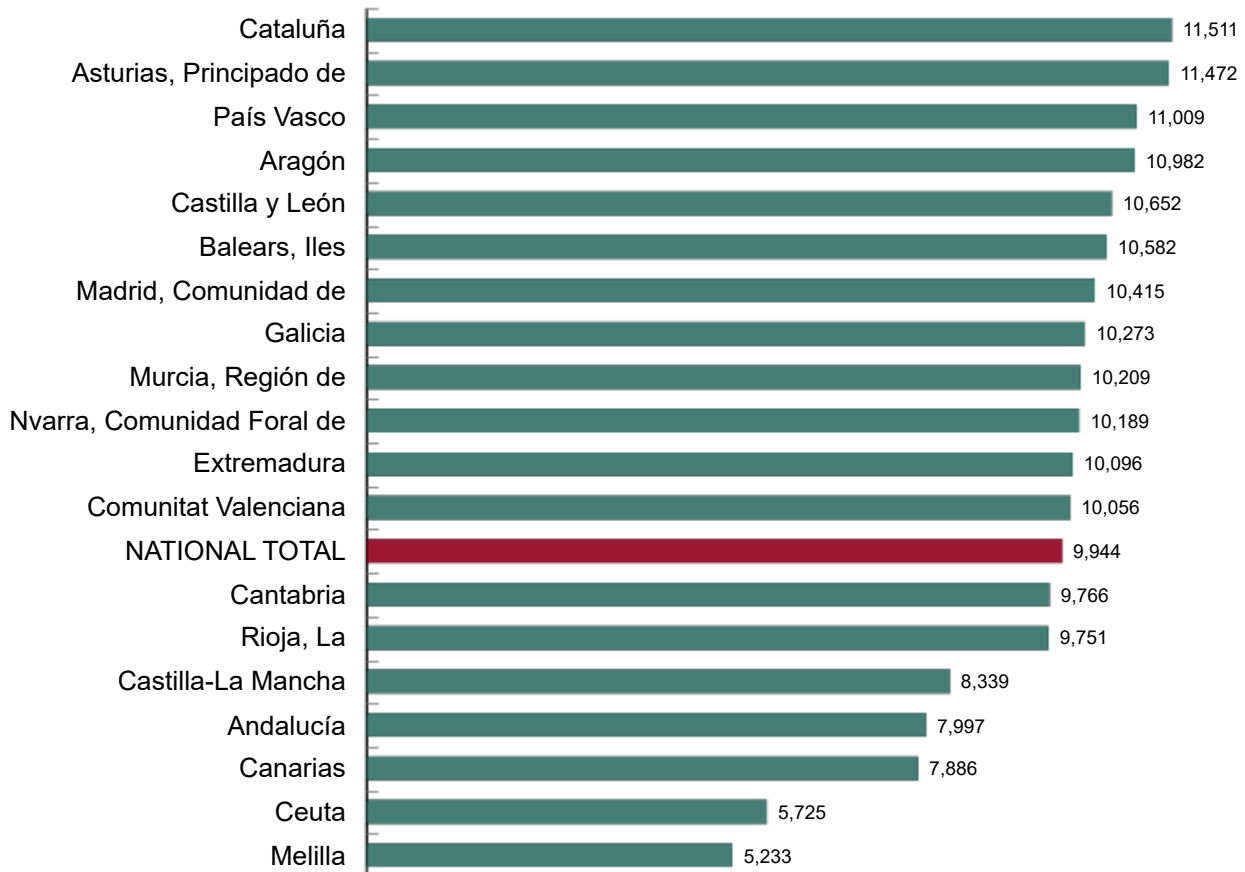
## Hospital discharges by autonomous communities and cities

The communities with the highest hospital discharge rates per 100,000 inhabitants in 2022 were Cataluña (11,511), Principado de Asturias (11,472) and País Vasco (11,009).

On the other hand, the autonomous cities of Melilla (5,233) and Ceuta (5,725) and Canarias (7,886) presented the lowest rates.

### Hospital discharges by autonomous communities and cities of hospitalization. Year 2022

Rate per 100,000 inhabitants



Looking at the main diagnosis groups, the highest hospital morbidity rates for circulatory diseases were in Principado de Asturias (1,834 per 100,000 inhabitants), Castilla y León and Cataluña (both with 1,419).

Digestive system diseases presented the highest rates in Castilla y Leon (1,514), Principado de Asturias (1,391) and Aragon (1,388).

In turn, Principado de Asturias registered the highest hospital morbidity rate due to respiratory system diseases (1,326), followed by Castilla y Leon (1,224) and Cataluña and Galicia (both with 1,175).

## Reviews and data updates

The data published today are final. All the results of this operation are available at [INEBase](#).

## Methodological note

The Hospital Morbidity Survey (HMS) offers information on hospital discharges with hospitalisation regarding the main diagnosis related to the discharge. Hospital discharge is the procedure where a patient hospitalised in a Health Centre or Establishment stops using a hospitalisation bed due to recovery, improvement, death, transfer, or voluntary discharge.

The HMS's main objective is to know the demographic-sanitary characteristics of the unwell who have been admitted to a hospital centre or have spent at least one night there, as well as to have information to national, autonomous community, and province level on the frequency and use of the hospital sources on the reference year.

The health information is based on the main diagnosis shown on the hospital discharge report that the patient receives and have motivated their admittance according to the criteria of the clinic service or physician who attended the unwell. The characteristics gathered from the unwell are the following: sex, age, admittance date, discharge date, residence province, type of admittance, and motive of discharge.

The survey results are published following the International Classification of Diseases (ICD-10-CM). In 2020, some codes of said classification were updated and a new emergency code was introduced for the coding of COVID-19 infections, which was implemented by hospitals as of July.

**Type of operation:** annual survey.

**Population scope:** hospital discharges occurring in the national territory.

**Geographical scope:** the entire national territory.

**Reference period for the results:** the calendar year.


**Reference period for the information:** date on which hospital discharge occurs.

**Collection method:** transcription of administrative documents.

More information on the [methodology](#) and the [standardised methodological report](#).

INE statistics are produced in accordance with the Code of Good Practice for European Statistics. More information on [Quality at INE](#) and the [Code of Best Practices](#).

For further information see [INEbase](#)

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