

Press Release

25 April 2018

Hospital Morbidity Survey Year 2016

The number of hospital discharges increased by 2.1% in 2016

The hospital morbidity rate stood at 10,430 discharges per 100,000 inhabitants.

The highest number of hospital stays (14.8% of the total) was due to diseases of the circulatory system

Hospital discharges

In 2016, there were 4,844,832 hospital discharges, 2.1% more than in 2015. This is the fourth consecutive annual increase in the number of discharges.

By sex, hospital discharges of men increased by 2.3% and those of women by 1.8% (2.5% if pregnancy, childbirth and puerperium are excluded).

More than half of the discharges corresponded to women (52.6%). However, if pregnancy, childbirth and puerperium are excluded, this percentage would fall to 47.4%.

By age group, the highest number of discharges were recorded in the 65-84 age group (33.2% of the total) and 45-64 age group (23.2%).

Hospital discharges by age group and sex. Year 2016

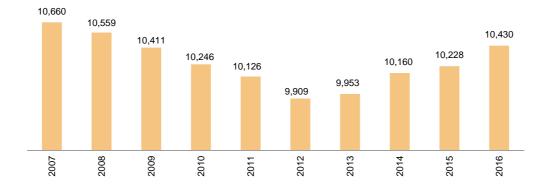
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	Total	Men	Women
TOTAL DISCHARGES	4,844,832	2,297,166	2,547,666
From 0 to 4 years old	243,541	138,694	104,847
From 5 to 24 years old	325,695	152,745	172,950
From 25 to 44 years old	996,113	283,153	712,961
From 45 to 64 years old	1,121,895	622,801	499,094
From 65 to 84 years old	1,609,385	881,350	728,035
85 years and older	548,204	218,424	329,780

The most common reason for a patient's discharge was either cure or improvement, with 91.7% of the total discharges. 3.7% corresponded to deaths and the rest to transfers to other centres or other causes.

Discharges increased by 2.3% in public hospitals and by 1.5% in private hospitals. 72.6% of discharges were made in public hospitals¹.

61.2% of hospital discharges in 2016 were admitted as a matter of urgency².

With regard to the morbidity rate, in 2016 there were 10,430 discharges per 100,000 inhabitants, which was an increase of 2.0% over the previous year. This is the fourth annual increase in this rate after nine years of decline.



Morbidity rates (per 100,000 population). Years 2007-2016

By sex, the male morbidity rate increased by 2.3% and stood at 10,073 discharges per 100,000 men. In the case of women, it grew by 1.7% up to a total of 10,775 discharges per 100,000 women. However, if discharges due to episodes of pregnancy, childbirth and puerperium are excluded, the female rate fell by 1.8% and stood at 8,406 discharges per 100,000 women.

By age groups, the morbidity rate increased with age from the age of five. In the case of women, there is an exception given the decrease observed in the 45-64 age group compared to the previous group (25-44 years), as a result of the effect of pregnancy, childbirth and the puerperium episodes on the latter.

Morbidity rates by age group and sex. Year 2016

Discharges per 100,000 inhabitants

¹ The public or private nature is determined by the body or legal entity on which the hospital depends (functional dependency), that is, the natural or legal person who exercises dominion or jurisdiction, hierarchical or functional, most immediately over the health establishment. The classification of functional dependency of hospitals with legal forms of management contemplated in Law 15/1997 of 25 April, on the authorisation of new forms of management in the National Health System, and in accordance with regional legislative developments, has been assigned to the corresponding Health Services of each Autonomous Community.

² It is considered that the admission is urgent (or not scheduled) when it was not previously planned and is performed unexpectedly, regardless of whether it comes from the emergency area or not.

	Total	Men	Women
TOTAL DISCHARGES	10,430	10,073	10,775
From 0 to 4 years old	11,220	12,403	9,964
From 5 to 24 years old	3,501	3,194	3,825
From 25 to 44 years old	7,496	4,224	10,828
From 45 to 64 years old	8,674	9,700	7,663
From 65 to 84 years old	21,840	26,564	17,972
85 years and older	39,602	47,352	35,728

Main diagnoses of hospital discharges

Diseases of the digestive system and diseases of the circulatory system (12.5% of the total in both cases) were the main diagnoses of the discharges in 2016. This was followed by the diseases of the respiratory system (12.1%).

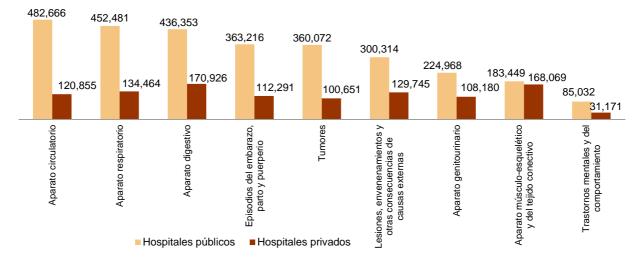
Discharges by disease groups³ according to the ICD-10 CM classification Year 2016

	Number of
	discharges
TOTAL DISCHARGES	4,844,832
Diseases of the digestive system	607,279
Diseases of the circulatory system	603,521
Diseases of the respiratory system	586,946
Pregnancy, childbirth and the puerperium	475,507
Tumours	460,723
Injury, poisoning and certain other consequences of external causes	430,059
Diseases of the musculoskeletal system and connective tissue	351,518
Diseases of the genitourinary system	333,148
Symptoms, signs and abnormal findings	204,167
Diseases of the nervous system	117,014
Mental and behavioural disorders	116,203
Certain infectious and parasitic diseases	111,417
Factors influencing health status	102,996
Endocrine, nutritional and metabolic diseases	83,922
Conditions originating in the perinatal period	67,485
Diseases of the skin and subcutaneous tissue	51,926
Diseases of the blood and blood-forming organs	43,153
Congenital abnormalities	36,695
Diseases of the eye and adnexa	27,654
Diseases of the ear and mastoid process	22,765
Discharges without diagnosis	10,733

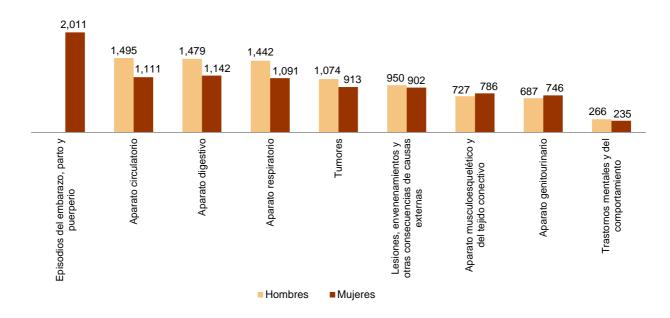
The main causes of hospitalization in public hospitals were *circulatory diseases* (13.7%) and *respiratory diseases* (12.9%). In private hospitals, those of the *digestive system* (12.9%) and those of the *musculoskeletal system and connective tissue* (12.7%).

³In 2016, the International Classification of Diseases (ICD-10 CM) was implemented. The use of this new classification causes that the data by diagnosis are not strictly comparable with those of previous years.

Discharges by groups of most frequent diseases and type of hospital. Year 2016



By disease groups, the highest morbidity rates for men were *diseases of the circulatory system* (1,495 per 100,000 men) and those of the *digestive system* (1,479). And for women, *episodes of pregnancy, childbirth and puerperium* (2,011) and *diseases of the digestive system* (1,142).



Morbidity rates (per 100,000 inhabitants) by most frequent disease group and sex. Year 2016

In 2016, a total of 181,004 people died in Spanish hospitals, 10.0% less than in the previous year. The main causes of death were *tumours* (23.3% of the total), *diseases of the circulatory system* (20.5%) and those of the *respiratory system* (19.5%).

Average age of patients

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The average age of people discharged in 2016 was 56.1 years old, with an increase of 0.5% compared to the previous year.

The average age of men stood at 57.6 years old and that of women was 54.8 years old. If discharges due to pregnancy, childbirth and puerperium were excluded, the average age in women would be 59.8 years.

The last decade has seen a progressive increase in the average age of hospitalized people, both in men and women.

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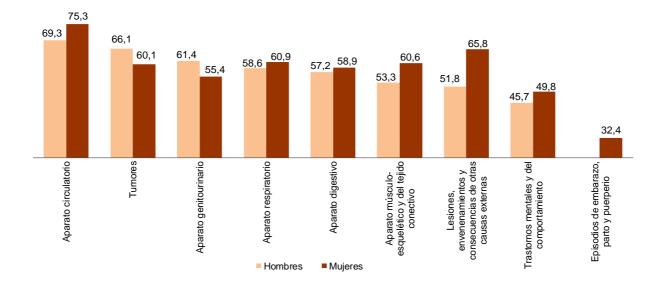
Evolution of the average age of patients per year of discharge and sex

By diagnosis group, circulatory diseases had the highest average age, both for men (69.3 years of average age) and women (75.3 years).

This was followed by tumours for men (66.1 years) and injuries, poisoning and other consequences of external causes for women (65.8 years).

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Average age of patients by groups of most frequent diseases and sex. Year 2016



Hospital stays

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Total stays (i.e., the total number of days of hospitalization for patients discharged in 2016) reached 33.8 million, 6.9% more than in 2015.

Of the total number of hospital stays, 74.6% corresponded to the public network.

The groups of diseases that caused more hospital stays were diseases of the circulatory system (14.8% of the total), diseases of the respiratory system (12.2%) and tumours (11.2%).

It is worth mentioning the high percentage of hospital stays due to *mental and behavioural disorders* (9.0% of the total), compared to the small number of discharges with this diagnosis (2.4%). This situation responds to the longer period of hospitalization in patients with this pathology.

By contrast, *episodes of pregnancy, childbirth and puerperium*, despite being the fourth group of diseases with the most discharges in 2016, occupied the ninth place in total hospital stays.

Total stays by groups of most frequent diseases. Year 2016 Absolute values (in number of days) and percentages

	Total	% of total
	stays	stays
TOTAL DISCHARGES	33,812,172	100.0
Circulatory system	5,013,607	14.8
Respiratory system	4,131,393	12.2
Tumours	3,779,320	11.2
Injury, poisoning and certain other consequences of external causes	3,426,224	10.1
Digestive system	3,402,364	10.1
Mental and behavioural disorders	3,030,585	9.0
Diseases of the musculoskeletal system and connective tissue	1,713,660	5.1
Diseases of the genitourinary system	1,666,334	4.9
Pregnancy, childbirth and the puerperium	1,456,609	4.3

The average stay per hospital discharge was 7.39 days (7.72 days in public hospitals and 6.57 days in private hospitals).

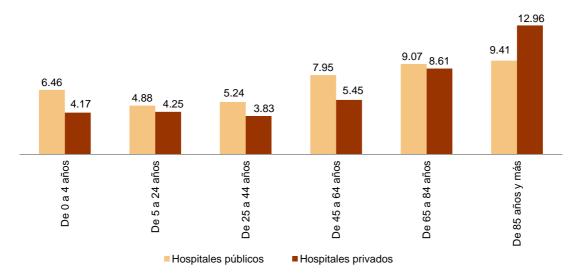
By most frequent groups of diseases, the longest average stays corresponded to *mental and behavioural disorders* (27.61 days), *diseases of the circulatory system* (8.82 days) and *tumours* (8.71 days).

Average stays (in days) by groups of most frequent diseases and type of hospital. Year 2016

	Total	Public hospitals	Private hospitals
TOTAL DISCHARGES	7.39	7.72	6.57
Mental and behavioural disorders	27.61	21.54	43.53
Circulatory system	8.82	8.91	8.48
Tumours	8.71	9.11	7.36
Injury, poisoning and certain other consequences of external			
causes	8.41	8.90	7.35
Respiratory system	7.47	7.77	6.55
Digestive system	5.92	6.77	3.85
Diseases of the musculoskeletal system and connective tissue	5.10	6.36	3.81
Diseases of the genitourinary system	5.26	5.82	4.17
Pregnancy, childbirth and the puerperium	3.28	3.35	3.08

By age group, the average stay increased progressively with age from the interval of 5 to 24 years, both in public and private hospitals.

The average stay in public hospitals was higher than that of private hospitals in all age groups, except in the range of people aged 85 and older.



Average stay (in days) by age group and type of hospital. Year 2016

Hospital discharges by Autonomous Communities and Cities

In 2016, the Autonomous Communities with the highest number of discharges as compared to the total were Cataluña (18.5%), Comunidad de Madrid (14.8%) and Andalucía (14.4%).

By type of hospital, the Autonomous Communities with the highest percentage of discharges corresponding to public hospitals were Castilla-La Mancha (93.3% of the total), Extremadura (92.3%) and Castilla y León (88.6%).

On the contrary, the Autonomous Communities with the highest percentage of discharges in the private network were Cataluña (50.0% of total discharges), Canarias (35.0%) and Illes Balears (33.9%).

Discharges by Autonomous Communities and Cities of hospitalization and type of hospital. Year 2016

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Absolute values and percentages with respect to the total for each Autonomous Community and City

		Public	Private Hospitals	
	Total	Hospitals		
	discharges	(%)	(%)	
NATIONAL TOTAL	4,844,832	72.6	27.4	
Cataluña	897,900	50.0	50.0	
Madrid, Comunidad de	715,626	66.8	33.2	
Andalucía	698,002	75.5	24.5	
Comunitat Valenciana	514,046	81.4	18.6	
Galicia	292,970	78.4	21.6	
Castilla y León	269,695	88.6	11.4	
País Vasco	245,264	82.6	17.4	
Canarias	185,101	65.0	35.0	
Castilla - La Mancha	174,530	93.3	6.7	
Aragón	156,091	82.2	17.8	
Murcia, Región de	149,490	81.2	18.8	
Balears, Illes	136,072	66.1	33.9	
Asturias, Principado de	119,734	81.4	18.6	
Extremadura	114,264	92.3	7.7	
Navarra, Comunidad Foral de	69,562	76.4	23.6	
Cantabria	57,773	86.6	13.4	
Rioja, La	34,322	88.0	12.0	
Ceuta	6,864	100.0	-	
Melilla	7,526	100.0	-	

The highest morbidity rates were recorded in 2016 in the Autonomous Communities of Cataluña (with 12,107 discharges per 100,000 inhabitants), Illes Balears (with 11,902) and Aragón (with 11,854).

On the other hand, the autonomous city of Ceuta (with 8,102 discharges per 100,000 inhabitants), Andalucía (with 8,306) and Castilla-La Mancha (with 8,542) presented the lowest morbidity rates.

By groups of diseases, *episodes of pregnancy, childbirth and puerperium* originated the highest rate of hospital morbidity in Andalucía and in the Autonomous Cities of Ceuta and Melilla.

In Castilla-La Mancha, Cataluña, Extremadura, Galicia, Comunidad de Madrid and La Rioja the highest morbidity rate was recorded in *respiratory system diseases*.

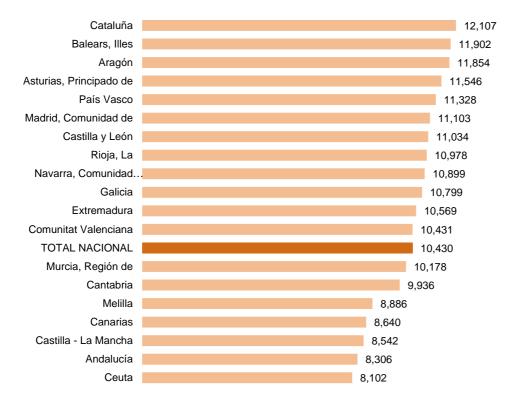
In Principado de Asturias, Canarias, Cantabria and País Vasco, the highest morbidity rate was recorded in *diseases of the circulatory system*.

In Aragón, Castilla y León, Illes Balears, Comunitat Valenciana, Región de Murcia and Comunidad Foral de Navarra, the highest morbidity rate was recorded in *diseases of the digestive system*.

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Morbidity rates by Autonomous Community and City of hospitalisation. Year 2016

Discharges per 100,000 inhabitants



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Methodological note

The Hospital Morbidity Survey (HMS) provides information on hospital discharges with hospitalisation based on the main diagnosis associated with the discharge. Hospital discharge is considered to be the procedure by which a patient admitted to a Health Centre or Establishment ceases to occupy a hospital bed, whether due to cure, improvement, death, transfer or voluntary discharge.

The main objective of the HMS is to know the demographic and health characteristics of patients who have been admitted to a hospital and have stayed at least one night, as well as to have information at the national, Autonomous Community and province level on the frequency and use of hospital resources in the reference year.

The health information focuses on the main diagnosis contained in the hospital discharge report received by the patient and which has led to his or her admission according to the criteria of the clinical service or physician who attended the patient. The characteristics that are collected from the patient are the following: sex, age, date of admission, date of discharge, province of residence, type of income and reason for discharge.

The survey makes it possible to determine the morbidity rate and the average stay by type of diagnosis, to know the area of influence of hospitals according to the province of residence of the patient and to carry out epidemiological studies of certain diseases. Since 2011, disaggregated information on discharges and hospital stays has been published, distinguishing between public and private hospitals.

In 2016, a change of classification was carried out and the results of the survey are published according to the International Classification of Diseases (ICD-10 CM) (in previous years, the ICD9-CM was used). The use of this new classification means that the data per diagnosis are not always strictly comparable with those of previous years.

The new dissemination tables are presented following the International Shortlist of Diagnosis Groups that has been agreed by Eurostat, the OECD and the WHO for the dissemination of hospital morbidity data.

Since 2005, microdata files have been available to users.

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