

**Hospital Morbidity Survey
Year 2013**

In 2013, the number of discharges in Spain increases 0.1% after four years of decreases

Diseases of the circulatory system and tumours cause the largest number of hospital stays

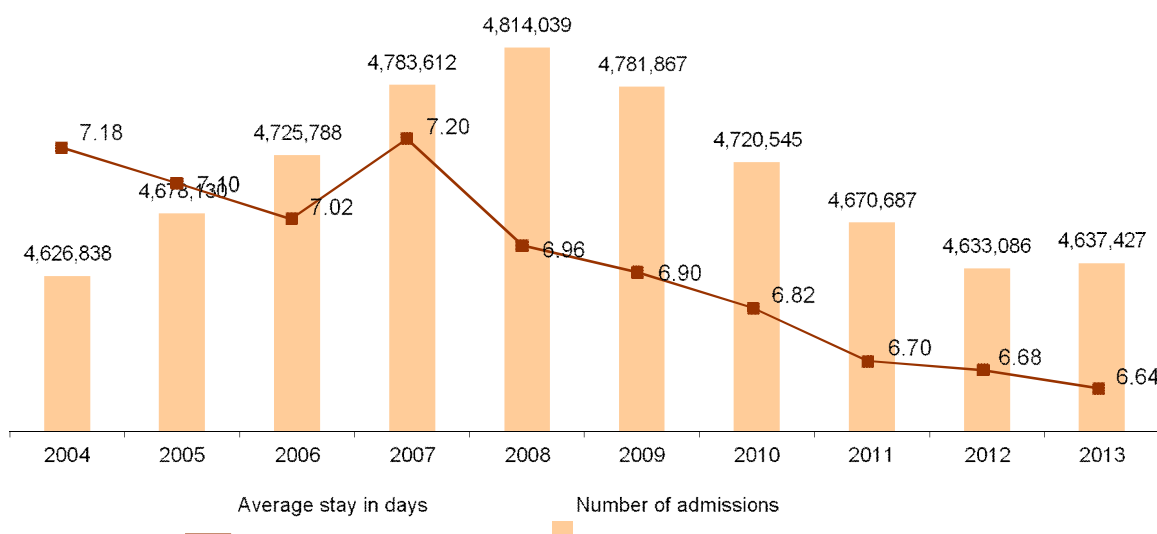
The average stay in hospitals is 6.64 days, 0.6% less than last year

In 2013, there were 4,637,427 discharges registered, representing a 0.1% increase as compared with 2012. This was the first increase in the number of discharges after four consecutive years of decreases.

By sex, discharges of men increased 0.8%, while those of women decreased 0.6% (excluding pregnancy and delivery, where an increase of 1.3% was registered).

Although more than half of admissions were of women (52.9%), if those resulting from pregnancy, delivery and puerperium were excluded, the percentage of admissions would account for 47.3%.

**Number of admissions and average stay.
Years 2004-2013**



As compared to 2012, discharges in public hospitals decreased by 0.3%, whereas in private hospitals they increased by 1.0%. Public hospitals comprised 72.2% of discharges¹.

9,953 discharges were registered per 100,000 persons, that is, a 0.4% increase as compared to the previous year (in 2012, the rate was 9,909 discharges per 100,000). This was the first increase in hospital morbidity rate, after nine years registering decreases.

The rate for males increased 1.4% as compared to 2012, standing at 9,532 admissions per 100,000 men. For females, the rate decreased by 0.4%, reaching 10,361 admissions per 100,000 women. However, excluding admissions due to pregnancy, delivery and puerperium, the rate for women increased by 1.5%, reaching 8,279 admissions per 100,000 women.

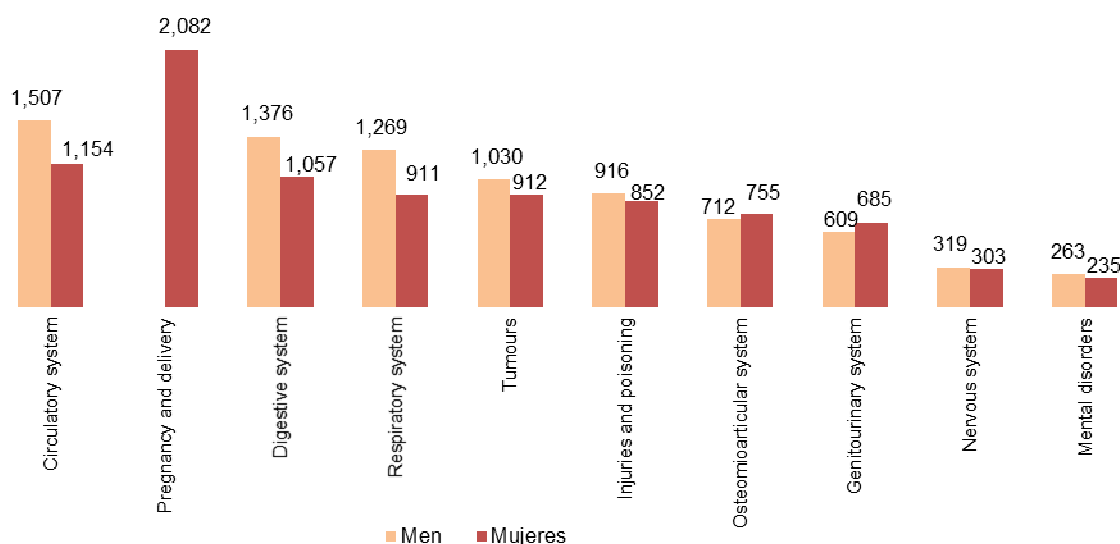
Main admission diagnoses

In 2013, the main reasons for hospitalisations were *diseases of the circulatory system* (13.3% of admissions), the group of *diseases of the digestive system* (12.2%) and *diseases of the respiratory system* (10.9%).

For women, the most common reasons for admission were *pregnancy, delivery and puerperium* (20.1% of the total admissions), followed by *diseases of the circulatory system* (11.1%) and *diseases of the digestive system* (10.2%).

For men, the most common diseases for admission were *diseases of the circulatory system* (15.8% of the total), followed by *diseases of the digestive system* (14.4%) and *diseases of the respiratory system* (13.3%).

Admissions per 100,000 inhabitants by most frequent groups of diagnosis and sex. Year 2013



¹ The public or private nature of hospitals is determined by the body or legal entity from whom the hospital depends, that is, the individual or the legal entity who has closest the power or jurisdiction, hierarchical or functional, to the Health Establishment. The classification of functional dependency of the hospitals with management legal status under the Law 15/1997, of 25th April, on Adaptation of new ways of management in the National Health System, and according to Autonomous legal developments, has been assigned to the corresponding Health Services.

The group of diseases that registered the greatest number of hospitalisations as compared with the previous year was that of *diseases of the osteo-mioarticular system and conjunctive tissue* (4.4%) followed by *diseases of the genitourinary system* (3.8%).

On the contrary, the greatest decreases were registered in admissions due to *pregnancy, delivery and puerperium* (-7.3%) and *birth defects* (-4.2%).

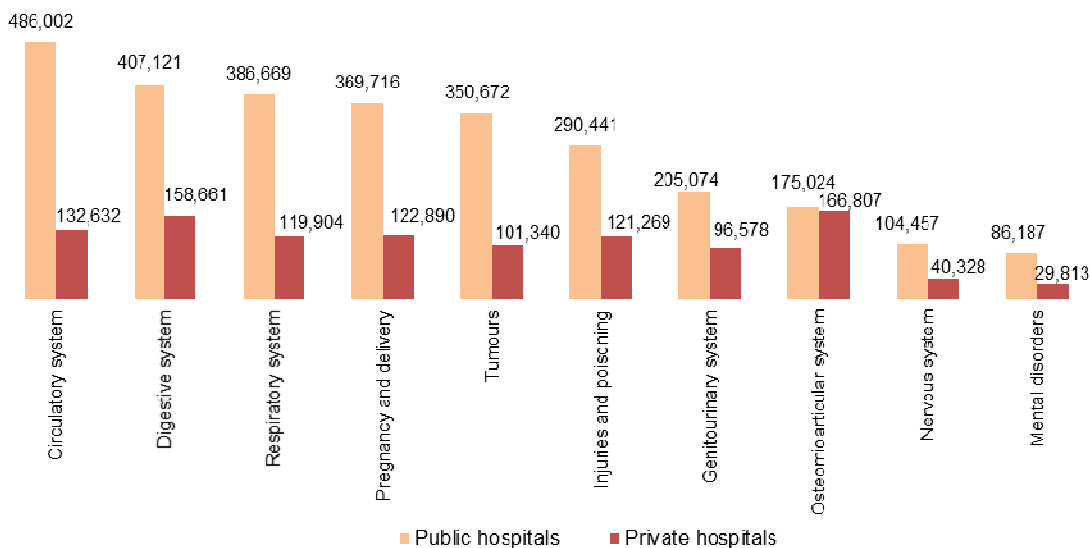
Admissions by large groups of diseases

	No. admissions in 2013	Variation (%) 2013-2012
TOTAL ADMISSIONS	4,637,427	0.1
Circulatory system	618,633	1.4
Digestive system	565,782	1.7
Respiratory system	506,573	-2.6
Pregnancy, delivery and puerperium	492,606	-7.3
Tumours	452,013	1.9
Injuries and poisoning	411,709	2.6
Osteomioarticular system and conjunctive tissue	341,831	4.4
Genitourinary system	301,652	3.8
Poorly-defined symptoms, signs and morbid states	195,633	1.3
Nervous system and sensory organs	144,785	2.5
Mental disorders	116,000	2.8
V Codes (main diagnosis only)*	100,412	-4.3
Infectious and parasitic diseases	96,486	2.2
Endocrine and metabolic diseases	84,980	1.4
Diseases originating in the perinatal period	64,004	-4.2
Diseases of the blood and blood forming organs	43,793	-1.2
Congenital anomalies	39,059	-0.3
Admissions without diagnosis	14,746	-40.3

* V Codes are those circumstances that are not considered disease or injury but can affect a patient's medical condition or treatment or cause contact with the medical system. For example, persons who are not ill contact with the medical system for a specific reason (organ donor, vaccination, etc.), persons with cured diseases that require specific treatment afterwards (dialysis, chemotherapy, etc.), circumstances that affect medical condition but are not diseases (sterilization, cosmetic surgery, etc.)

According to the functional dependency of the hospital, in public hospitals the main reason for hospitalisation were *diseases of the circulatory system* (14.5%), and *diseases of the digestive system* (12.2%). In private hospitals, the most common reasons for hospitalisation were *diseases of the osteo-mioarticular system* (13.0% of the total) and *diseases of the digestive system* (12.3%).

Number of admissions by most frequent groups of diagnosis and type of hospital. Year 2013

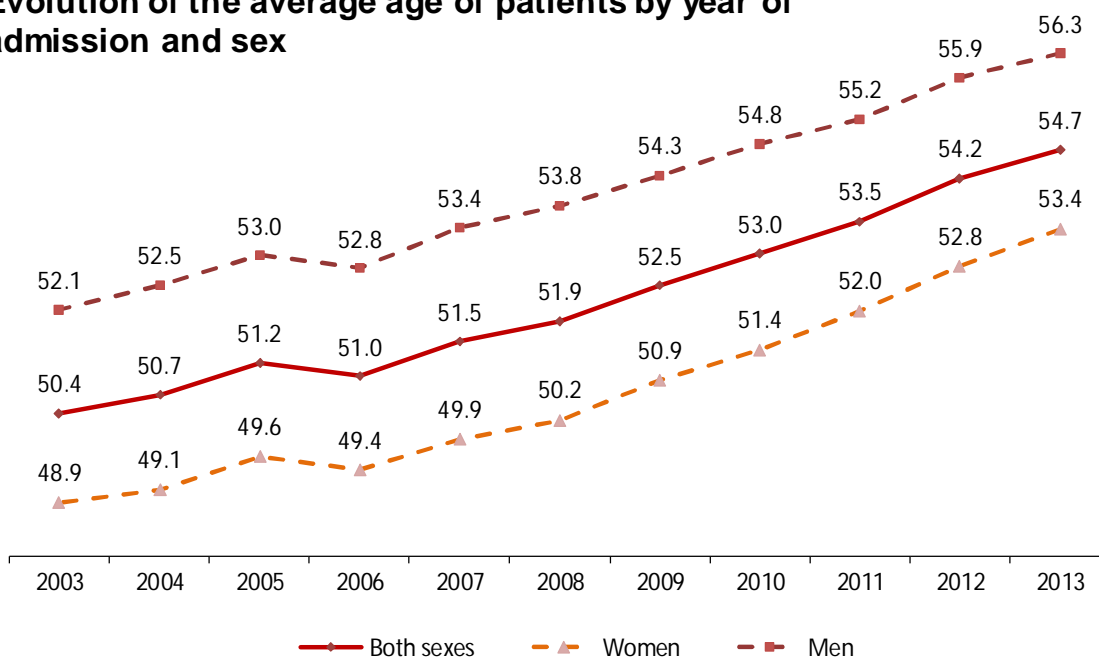


Average age

In 2013, the average age of admission to hospital stood at 54.7 years (as compared to 54.2 years in the previous year). In the last decade, the average age of patients has increased by more than four years.

The average age on admission stood at 56.3 years for men (55.9 in 2012) and at 53.4 for women (52.8). If we were to exclude admissions due to *pregnancy, delivery and puerperium*, the average age of women would rise to 59.2 years (58.5 in 2012).

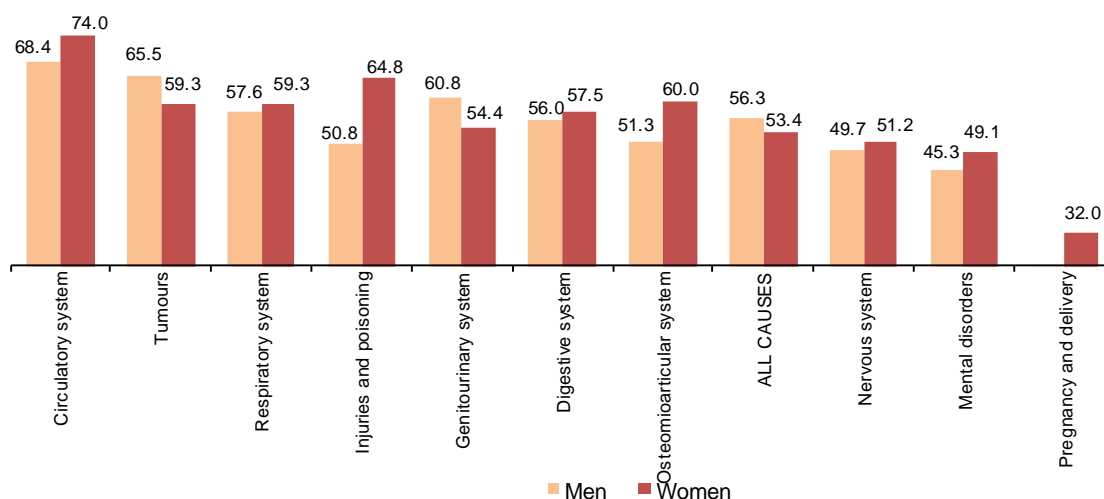
Evolution of the average age of patients by year of admission and sex



By group of diagnosis, persons admitted for *diseases of the circulatory system* had the greatest average age, both for men and women (68.4 and 74.0 years on average, respectively).

They were followed by people admitted for *tumours* in the case of men (65.5 years) and for *injuries and poisoning* in the case of women (64.8 years).

Average age of patients by most frequent diagnosis groups and sex. Year 2013



Hospital stays

Total hospital stays (that is, the total number of days patients stayed at the hospital in 2013) reached 30.8 millions, 0.5% less as compared to 2012.

Public hospitals registered a decrease of 1.4% in stays, and private hospitals registered a 2.4% increase. 75.3% of the total number of stays was registered in public hospitals.

The groups of diseases that caused more hospital stays were *diseases of the circulatory system* (15.3% of the total stays) and *tumours* (11.9%).

Worth noting was the great number of hospital stays due to *mental disorders* (9.5% of the total) as compared with the low number of discharges with said diagnose (2.5%). This was due to the long period of stay of persons with this diagnose.

On the contrary, *pregnancy, delivery and puerperium*, despite being the fourth diagnose in terms of frequency among the discharges in 2013, had the eighth post in terms of total hospital stays.

Average stay

The average stay by hospital discharge was 6.64 days, as compared with 6.68 in 2012.

By diagnose group, the longest average stays (excluding *mental disorders*) corresponded to *infection and parasitic diseases* (8.87 days), *diseases of newborns or associated with birth* (8.69 days) and *tumours* (8.07 days).

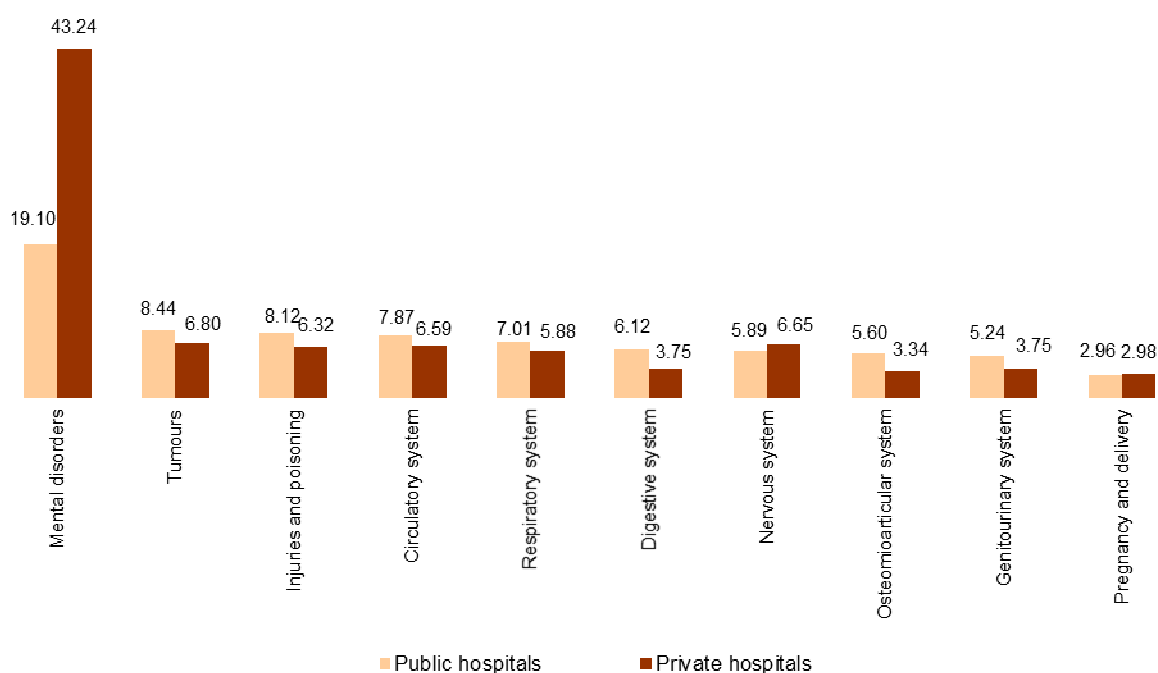
Admissions, stays and average stays by large groups of diseases (% over the total) Year 2013.

	Total stays	% total stays	Admissions	% total admissions	Average stay (days)
TOTAL ADMISSIONS	30,769,356	100.0	4,637,427	100.0	6.64
Circulatory system	4,698,888	15.3	618,633	13.3	7.60
Tumours	3,647,585	11.9	452,013	9.7	8.07
Respiratory system	3,416,285	11.1	506,573	10.9	6.74
Injuries and poisoning	3,123,231	10.2	411,709	8.9	7.59
Digestive system	3,087,607	10.0	565,782	12.2	5.46
Mental disorders	2,935,134	9.5	116,000	2.5	25.30
Pregnancy and delivery	1,462,259	4.8	492,606	10.6	2.97

The average stay in public hospitals was 6.92 days (7.00 in 2012) and that of private hospitals was 5.89 days (5.81 in 2012).

In all disease groups the average stay of the patient was longer in public hospitals than in private hospitals, except in the groups of *mental disorders* (19.10 days in public hospitals and 43.24 in private hospitals), *diseases of the nervous system* (5.89 as compared to 6.65 days) and *pregnancies and deliveries* (2.96 as compared with 2.98).

Average stay (in days) by type of hospital and most frequent diagnosis groups. Year 2013



Reasons for urgent discharge and admission

In 2013, 61.0% of discharges were due to emergency admissions², as compared to 61.2% registered in 2012.

With regard to the reason for discharge, 92.0% of the total resulted from recovery or improvement, 4.0% due to death, and the remaining 4.0% due to transfer to other centres or other causes.

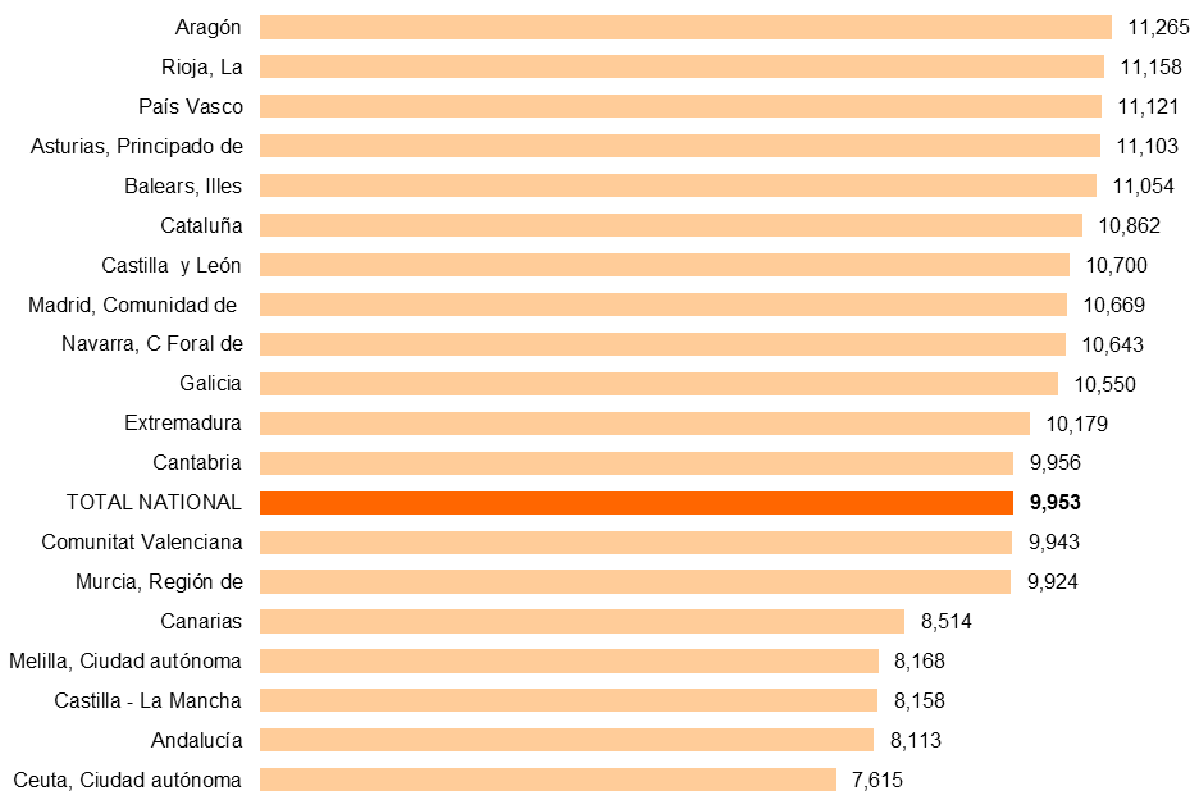
In total, 184,624 persons died in Spanish hospitals, 1.9% less than in 2012. The main causes of death were *tumours* (24.8% of the total), *diseases of the circulatory system* (21.6%) and *diseases of the respiratory system* (18.0%).

Hospitalisations by Autonomous Community

The highest rates of morbidity (number of admissions per 100,000 inhabitants) were recorded in Aragón, La Rioja and País Vasco.

In turn, Ceuta, Andalucía and Castilla-La Mancha registered the lowest number of discharges per 100,000 inhabitants.

Admissions per 100,000 inhabitants by Autonomous Community of admission. Year 2013



² Patients considered were those who were ordered urgent admission by a doctor, regardless of whether they came from the emergency area or not.

By groups of diseases, *pregnancy, delivery and puerperium* caused the highest rate of discharges in Andalucía and the Autonomous Cities of Ceuta and Melilla.

In Illes Balears, first place in admissions went to the group *diseases of the digestive system*.

In turn, *diseases of the circulatory system* occupied the first place in the remaining Autonomous Communities.

Average stay by Autonomous Community

In 2013, the Autonomous Communities with the longest average stays were Principado de Asturias (7.46 days), Castilla y León (7.38 days) and Cataluña and Galicia (both at 7.25 days).

Conversely, those registering the shortest average stay were the Autonomous Cities of Ceuta (5.39 days) and Melilla (5.40) and Comunitat Valenciana (5.46 days).

Average stay (in days) by Autonomous Community of admission. Years 2013, 2012 and 2003

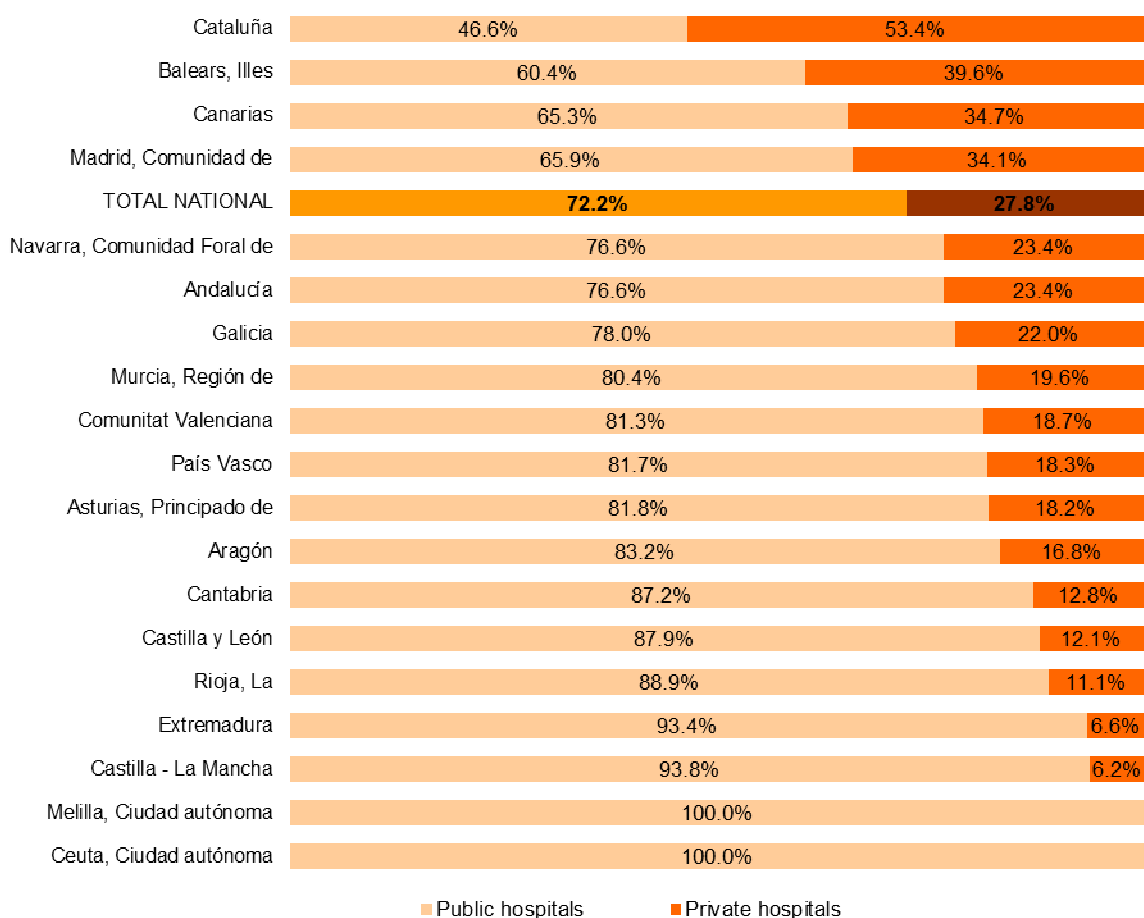
	2013	2012	2003
TOTAL NATIONAL	6,64	6,68	7,69
Andalucía	6,31	6,34	7,29
Aragón	7,04	6,77	7,99
Asturias, Principado de	7,46	7,51	8,62
Balears, Illes	5,63	5,77	6,00
Canarias	7,19	7,34	8,12
Cantabria	7,11	7,20	9,90
Castilla y León	7,38	7,71	8,64
Castilla - La Mancha	6,54	6,86	7,03
Cataluña	7,25	7,15	8,11
Comunitat Valenciana	5,46	5,47	6,56
Extremadura	6,38	6,65	8,28
Galicia	7,25	7,41	8,61
Madrid, Comunidad de	6,46	6,44	7,46
Murcia, Región de	6,23	6,24	6,79
Navarra, Comunidad Foral de	6,69	6,66	7,28
País Vasco	6,62	6,81	8,49
Rioja, La	6,48	6,66	7,84
Ceuta, Ciudad autónoma	5,39	5,44	6,04
Melilla, Ciudad autónoma	5,40	5,45	6,92

Admissions by Autonomous Community and type of hospital

The Autonomous Communities with the greatest weight in number of admissions to private hospitals as compared to the public network were Cataluña (53.4% of admissions were to private hospitals), Illes Balears (39.6%) and Canarias (34.7%).

In contrast, the Autonomous Communities with the least presence of discharges in the private network were Castilla-La Mancha (6.2% of admissions to private hospitals), Extremadura (6.6%) and La Rioja (11.1%).

Distribution of discharges by Autonomous Community of admission and type of hospital. Year 2013



Methodological note

The Hospital Morbidity Survey (HMS) offers information regarding hospital admissions with stays, and the average stay thereof, by virtue of the main diagnosis associated with the admission. **Hospital discharge is considered to be the procedure by which a patient admitted to a Health Centre or Establishment ceases to occupy a bed, due to cure, improvement, death, transfer or voluntary discharge.**

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.

In 2013 the Survey collected information from 95.6% of Spanish hospitals, both public and private. Information was collected from 99.3% of the total hospital admissions that take place annually.

Health information focuses on the main diagnosis stated in the 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. Since 2011, broken-down information has been published for discharges and hospital stays by public and private hospitals³.

Since 2005, we have had 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.

For further information see INEbase-www.ine.es/en/

All press releases at: www.ine.es/en/prensa/prensa_en.htm

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