

27 April 2022

## **Hospital Morbidity Survey Year 2020**

**The number of hospital discharges decreased by 12.7% in 2020**

**Respiratory system diseases were the main cause of hospitalization  
(12.4% of the total)<sup>1</sup>**

**The average stay increased 7.4%, standing at 8.7 days in 2020**

In 2020, there were 4,253,183 hospital discharges, 12.7% less than in 2019. By sex, discharges decreased 12.3% in the case of men and 13.1% in women. If the *episodes of pregnancy, childbirth and the puerperium* are excluded, the decrease in the case of women was 14.1%.

More than half of hospital discharges corresponded to women (51.7%). However, if pregnancy, childbirth and puerperium are excluded, this percentage would be 46.9%.

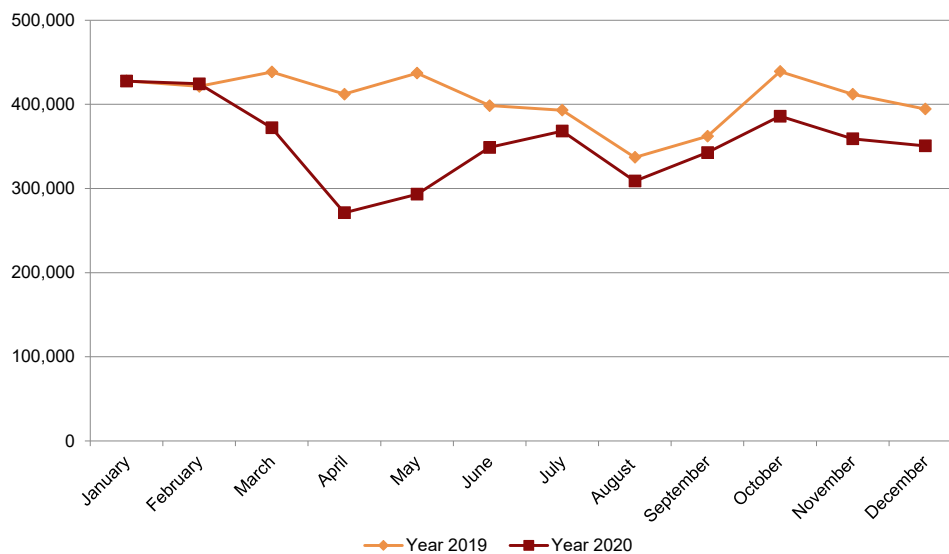
The greatest decreases in the number of discharges occurred in the months of March, April and May, coinciding with the first wave of COVID-19, and in October, November and December, the period during which the second wave occurred.

---

<sup>1</sup>To interpret the information on hospital discharges in 2020, we must take into account that, in 2020, the World Health Organization (WHO) established an emergency code in the International Classification of Diseases (ICD-10) for the coding of COVID-19 infections. This code was implemented in the ICD-10-CM (the classification used in the coding of diagnoses in hospitalized patients), on an exceptional basis, as of April 1, 2020 by the Centre for Disease Control and Prevention of the National Centre for Health Statistics (CDC/NCHS). Given the health crisis taking place at the time in Spain, the Ministry of Health, following consultation with the representatives of the Technical Units from all the Autonomous Communities, decided not to implement the new code until there was a decrease in pressure on health systems, so that information systems could better adjust to the change. Finally, the new code U07.1 for COVID-19 infection was implemented by hospitals starting in July 2020.

Likewise, we should remember that the circumstances arising from the COVID-19 pandemic have had an impact on the variables measured in the 2020 Hospital Morbidity Survey.

**Hospital discharges per month. Years 2019 and 2020.**



By age group, the highest number of discharges corresponded to the range of 65 to 84 years (35.7% of the total) followed by 45 to 64 years (24.7%).

**Hospital discharges by age group and sex. Year 2020**

	Total	Men	Women
<b>TOTAL DISCHARGES</b>	<b>4,253,183</b>	<b>2,055,949</b>	<b>2,197,234</b>
From 0 to 4 years old	156,775	88,670	68,105
From 5 to 24 years old	261,691	119,578	142,112
From 25 to 44 years old	798,559	226,093	572,467
From 45 to 64 years old	1,049,061	592,376	456,685
From 65 to 84 years old	1,420,872	798,352	622,521
85 years and older	566,225	230,880	335,344

The most common reason for a patient’s discharge was either cure or improvement (88.1% of the total). A total of 5.0% of the discharges were due to deaths (compared to 3.8% in 2019) and the rest to transfers to other centres or other causes.

Discharges decreased by 12.9% in public hospitals and by 12.2% in private hospitals. 72.6% of discharges corresponded to public hospitals<sup>2</sup>.

65.2% of hospital discharges for the year were admitted as a matter of urgency<sup>3</sup>.

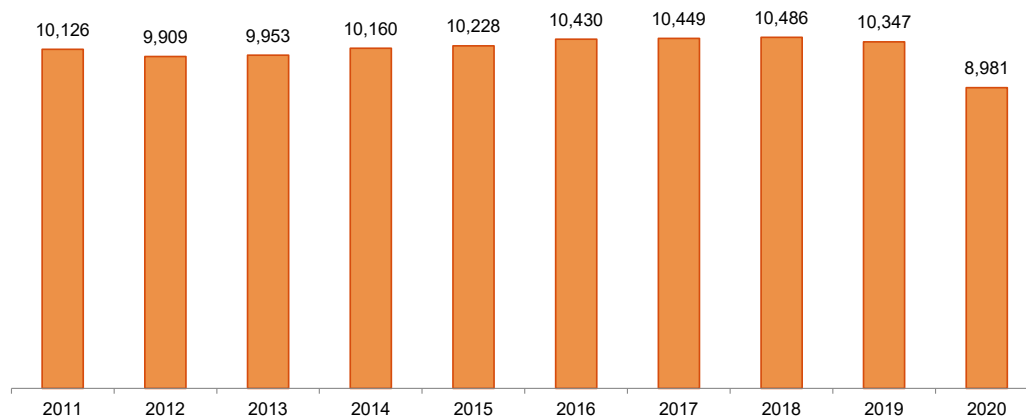
With regard to the morbidity rate, in 2020 there were 8.981 discharges per 100,000 inhabitants, which was a decrease of 13.2% compared to the previous year.

<sup>2</sup> 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.

<sup>3</sup>Patients with an urgent admission order from a physician are considered, regardless of whether or not they come from the emergency room.

### Hospital discharges 2011-2020 Series

Rates per 100,000 inhabitants



The male morbidity rate decreased by 12.8% and stood at 8,858 discharges per 100,000 men. That of women fell by 13.6%, to 9,099 discharges per 100,000 women. However, if discharges due to episodes of pregnancy, childbirth and puerperium are excluded, the female rate fell by 14.6% and stood at 7,523 discharges per 100,000 women.

By age group, the morbidity rate increased after five years of age, both for the total number of people and for men. In women, it also increased from that age onwards, with the exception of the 45 to 64 age group.

### Hospital discharges by age group and sex. Year 2020

Rates per 100,000 inhabitants

	Total	Men	Women
<b>TOTAL DISCHARGES</b>	8,981	8,858	9,099
From 0 to 4 years old	7,958	8,754	7,115
From 5 to 24 years old	2,713	2,406	3,040
From 25 to 44 years old	6,396	3,611	9,199
From 45 to 64 years old	7,518	8,560	6,493
From 65 to 84 years old	18,361	22,751	14,719
85 years and older	36,226	43,179	32,610

### Main diagnoses for hospital discharges

*Diseases of the respiratory system* was the main diagnosis for discharges in 2020, with 12.4% of the total. This was followed by *circulatory system diseases* (12.3%) and *digestive diseases* (11.6%).

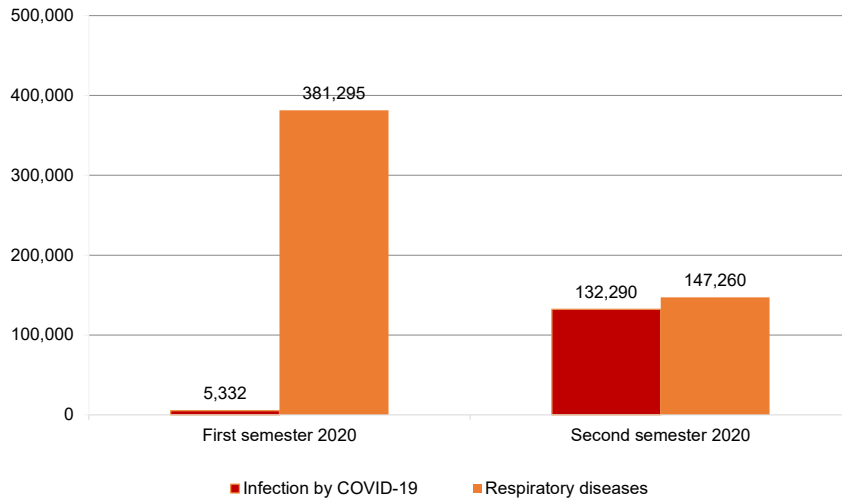
In 3.2% of hospitalizations, the main diagnosis was *COVID-19 infection*.

If only the second semester is considered - the period in which hospitals used the assigned code for *COVID-19 infection* - this percentage reached 6.3% of hospitalizations.

As a consequence of this, discharges due to *respiratory illnesses* fell in the second half compared to those in the first half.

**Discharges due to COVID-19 infection and respiratory diseases according to the semester of discharge. Year 2020**

Absolute Values



Note: Discharges due to COVID-19 recorded in the first semester corresponded to a small number of hospitals that carried out the coding for the entire year prior to the month of July.

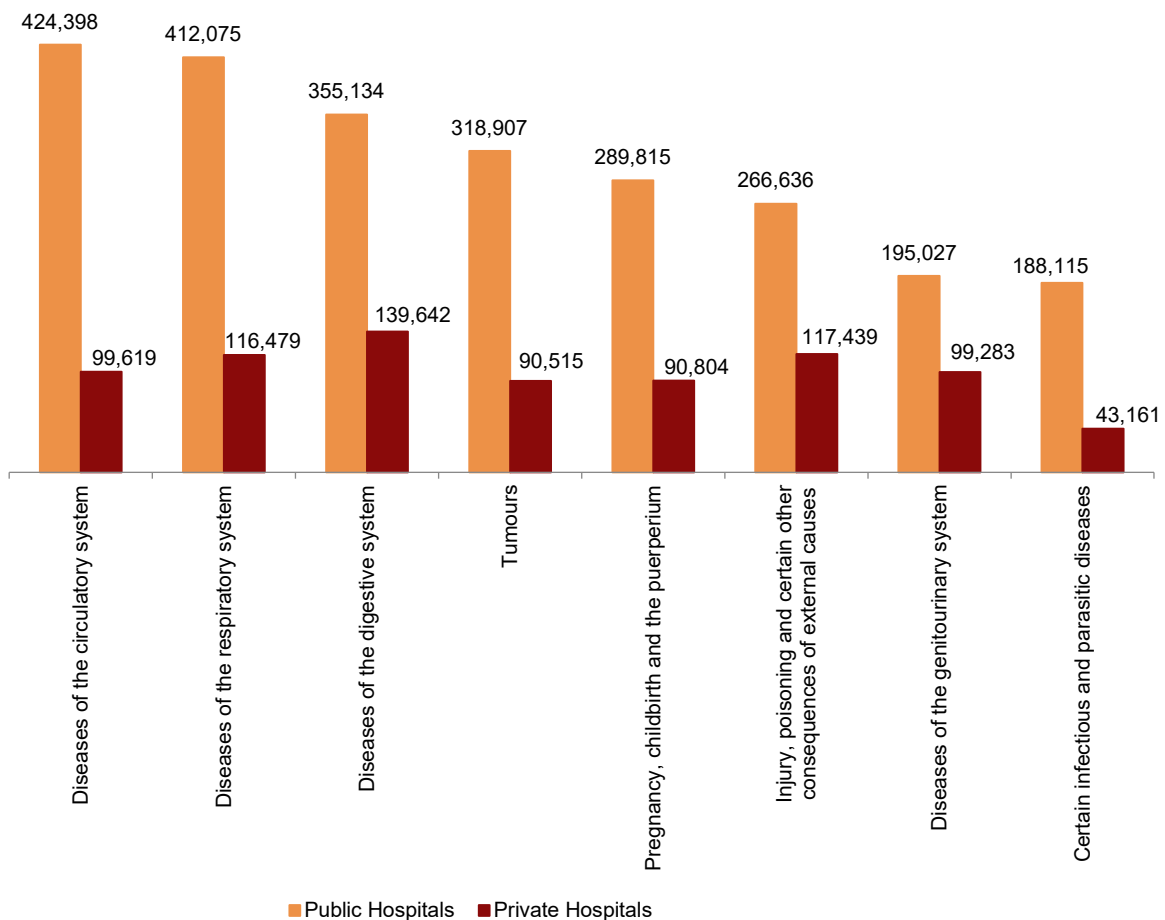
**Discharges by disease groups, according to the ICD-10 CM classification. Year 2020**

	Number of discharges
<b>TOTAL DIAGNOSTICS</b>	<b>4,253,183</b>
Diseases of the respiratory system	528,554
Diseases of the circulatory system	524,016
Diseases of the digestive system	494,775
Tumours	409,422
Injury, poisoning and certain other consequences of external causes	384,075
Pregnancy, childbirth and the puerperium	380,619
Diseases of the genitourinary system	294,310
Diseases of the musculoskeletal system and connective tissue	268,722
Certain infectious and parasitic diseases	231,276
Symptoms, signs and abnormal findings	157,612
Mental and behavioural disorders	104,135
Factors influencing health status	99,852
Diseases of the nervous system	98,518
Endocrine, nutritional and metabolic diseases	75,740
Conditions originating in the perinatal period	55,212
Diseases of the skin and subcutaneous tissue	42,985
Diseases of the blood and blood-forming organs	38,223
Congenital abnormalities	27,723
Diseases of the eye and adnexa	16,405
Diseases of the ear and mastoid process	14,892
Discharges without diagnosis	6,117

The main causes of hospitalization in public hospitals were *circulatory* (13.7% of the total), *respiratory* (13.3%) and *digestive* (11.5%) diseases.

Meanwhile, the main reasons for hospitalization in private hospitals were *diseases of the musculoskeletal system and connective tissue* (12.4% of the total), those of the *digestive system* (12.0%) and *injuries, poisonings and other consequences from external causes* (10.1%).

**Discharges by groups of most frequent diagnoses and type of hospital. Year 2020**  
Absolute Values

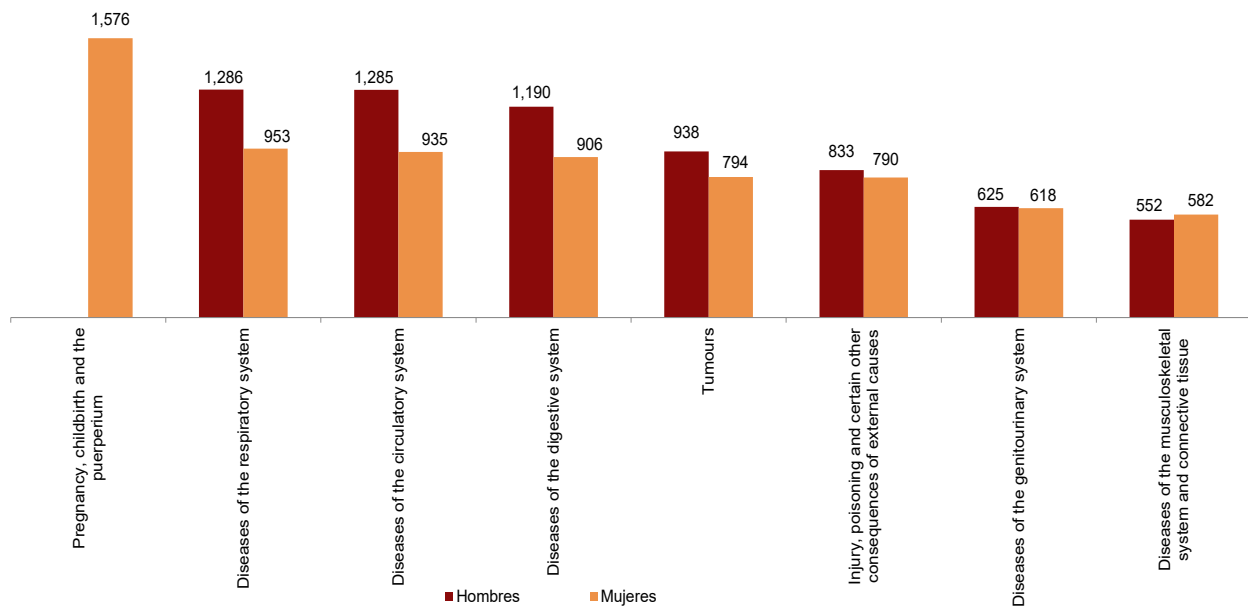


By diagnoses groups, the highest morbidity rates for men were *diseases of the circulatory system* (1,286 per 100,000 men) and those of the *circulatory system* (1,285).

In the case of women, the highest rates were for the *episodes of pregnancy, childbirth and the puerperium* (1,576 per 100,000 women) and *respiratory diseases* (953).

### Diagnoses by groups of most frequent diagnoses and sex. Year 2020

Rates per 100,000 inhabitants



In 2020 as a whole, a total of 211,221 people died in Spanish hospitals, 12.7% more than in 2019. The main causes of death were *diseases of the respiratory system* (24.7% of the total), *diseases of the circulatory system* (16.7%) and tumours (16.2%).

In the first semester, 39,291 people died in hospitals due to *diseases of the respiratory system*. In the second, 13,045 due to respiratory diseases and 16,914 due to *COVID-19 infection*.

### Average age of patients

The average age of people discharged in 2020 was 58.1 years, which was an increase of 1.6% over the previous year.

The average age of men was 59.8 years old and that of women was 56.6 years old. If discharges due to *pregnancy, childbirth and puerperium* were excluded, the average age in women would be 61.6 years.

By diagnosis group, circulatory diseases had the highest average age, both for men (69.7 years) and women (75.8).

Next were, in the case of men, *tumours* (66.5 years) and *infectious and parasitic diseases* (63.8 years). And, in women, *infectious and parasitic diseases* (67.9 years) and *injuries, poisoning and other consequences of external causes* (66.0).

### Hospital stays

Total stays (i.e., the total number of days of hospitalization for patients discharged in 2020) reached 37.1 million, 6.2% less than in 2019.

Of the total, 67.2% corresponded to the public network.

The diagnostic groups that caused the most hospital stays were *mental and behavioural disorders* (17.1% of the total), *circulatory system diseases* (12.1%) and *respiratory diseases* (11.8%).

The high percentage of hospital stays due to *mental and behavioural disorders* compared to the small number of discharges with this diagnosis (2.4%) is due to the longer period of hospitalization in patients with this pathology in private long-stay hospitals.

On the other hand, the *episodes of pregnancy, childbirth and the puerperium* were the sixth group of diagnoses with the most discharges in 2020, and the tenth in total hospital stays.

### Total stays by most frequent diagnostic groups.

Year 2016 Absolute values (in number of days) and percentages

	Total stays	% of total stays
<b>TOTAL DIAGNOSTICS</b>	<b>37,114,355</b>	<b>100.0</b>
Mental and behavioural disorders	6,331,102	17.1
Diseases of the circulatory system	4,493,447	12.1
Diseases of the respiratory system	4,368,885	11.8
Tumours	3,233,181	8.7
Injury, poisoning and certain other consequences of external causes	3,066,129	8.3
Diseases of the digestive system	2,898,935	7.8
Certain infectious and parasitic diseases	2,591,219	7.0
Diseases of the genitourinary system	1,516,867	4.1
Diseases of the musculoskeletal system and connective tissue	1,322,725	3.6
Pregnancy, childbirth and the puerperium	1,107,659	3.0

The average stay as per hospital discharge was 8.7 days (8.1 in 2019). In public hospitals, the average stay was 8.1 days and in private hospitals, 10.4 days.

By groups of most frequent diagnoses, the longest average stays corresponded to *mental and behavioural disorders*, with 60.8 days (50.6 in 2019), *infectious and parasitic diseases*, with 11.2 days (10.2 in 2019) and *diseases of the circulatory system*, with 8.6 days (9.1 in 2019).

The average stay due to *COVID-19 infection* was 11.3 days.

### Average stays by groups of most frequent diseases and type of hospital.

Average number of days

	Average stays	Public hospitals	Private hospitals
<b>TOTAL DIAGNOSTICS</b>	<b>8.7</b>	<b>8.1</b>	<b>10.4</b>
Mental and behavioural disorders	60.8	36.2	131.5
Certain infectious and parasitic diseases	11.2	10.8	12.9
Diseases of the circulatory system	8.6	8.2	10.3
Diseases of the respiratory system	8.3	8.2	8.4
Injury, poisoning and certain other consequences of external causes	8.0	8.1	7.7
Tumours	7.9	8.0	7.4
Diseases of the digestive system	5.9	6.5	4.1
Diseases of the genitourinary system	5.2	5.6	4.3
Diseases of the musculoskeletal system and connective tissue	4.9	6.1	3.9
Pregnancy, childbirth and the puerperium	2.9	2.9	2.8

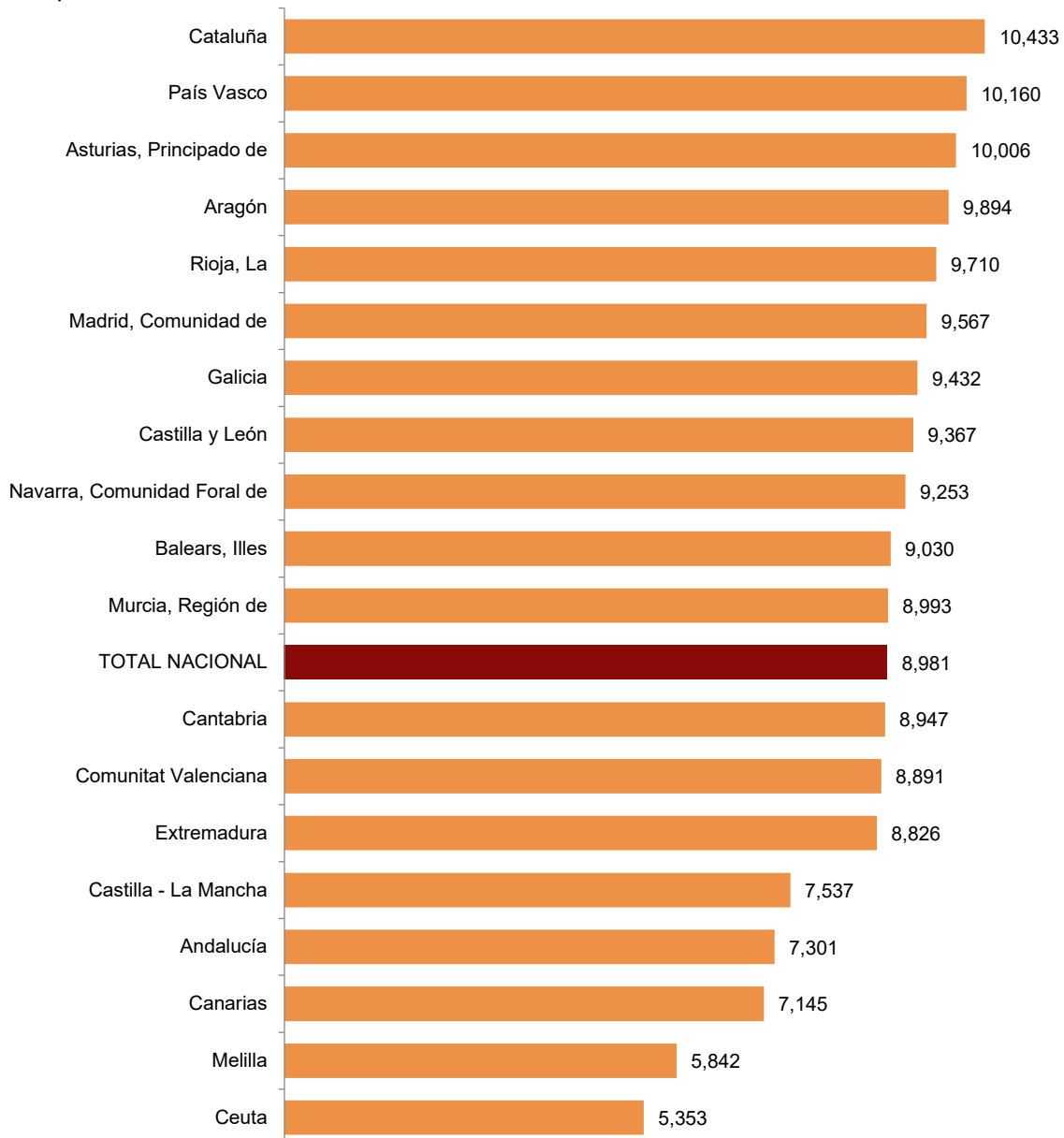
### Hospital discharges by Autonomous Communities and Cities

The communities with the highest hospital discharge rates per 100,000 inhabitants in 2020 were Cataluña (10,433), País Vasco (10,160) and Principado de Asturias (10,006).

On the other hand, the autonomous cities of Ceuta (5,353) and Melilla (5,842) and Canarias (7,145) presented the lowest rates.

### Hospital discharges by autonomous communities and cities of hospitalization. Year 2020

Rate per 100,000 inhabitants





The highest percentages of discharges in public hospitals were in Castilla - La Mancha (92.8%), Extremadura (91.4%) and La Rioja (89.3%), as well as in the autonomous cities of Ceuta and Melilla, where all discharges were in public hospitals.

On the contrary, the communities with the highest percentage of hospital discharges in the private network were Cataluña (49.5%), Illes Balears (34.6%) and Comunidad de Madrid (32.5%).

**Discharges by Autonomous Communities and Cities of hospitalization and type of hospital. Year 2020**

Absolute values and percentages, as compared with the total for each community.

	Total discharges	Public Hospitals (%)	Private Hospitals (%)
NATIONAL TOTAL	4,253,183	72.6	27.4
Cataluña	798,869	50.5	49.5
Comunidad de Madrid	646,439	67.5	32.5
Andalucía	619,435	74.0	26.0
Comunitat Valenciana	447,823	79.3	20.7
Galicia	254,526	79.8	20.2
Castilla y León	224,013	88.8	11.2
País Vasco	222,438	83.6	16.4
Canarias	160,379	70.3	29.7
Castilla - La Mancha	153,978	92.8	7.2
Región de Murcia	135,729	82.0	18.0
Aragón	131,702	83.1	16.9
Illes Balears	109,720	65.4	34.6
Principado de Asturias	101,611	82.3	17.7
Extremadura	93,494	91.4	8.6
Comunidad Foral de Navarra	60,811	76.9	23.1
Cantabria	52,100	88.5	11.5
La Rioja	30,697	89.3	10.7
Melilla	4,925	100.0	0.0
Ceuta	4,494	100.0	0.0

## 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.

In 2016, a classification change was carried out in general and specialized hospitals, public and private, and since that date the results of the survey are published according to the International Classification of Diseases (ICD-10-MC) (in prior years ICD-9-MC was used). 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:** Transcript of administrative document.

For more information the methodology can be accessed at:

<https://www.ine.es/daco/daco42/sanitarias/notaemh16.pdf>

The standardized methodological report is at:

<https://www.ine.es/dynt3/metadatos/es/RespuestaDatos.html?oe=30414>

---

For further information see **INEbase**: [www.ine.es/en/](http://www.ine.es/en/) Twitter: [@es\\_ine](https://twitter.com/es_ine)

All press releases at: [www.ine.es/en/prensa/prensa\\_en.htm](http://www.ine.es/en/prensa/prensa_en.htm)

---

**Press Office:** Telephone numbers: (+34) 91 583 93 63 /94 08 – [gprensa@ine.es](mailto:gprensa@ine.es)

**Information Area:** Telephone number: (+34) 91 583 91 00 – [www.ine.es/infoine/?L=1](http://www.ine.es/infoine/?L=1)

---