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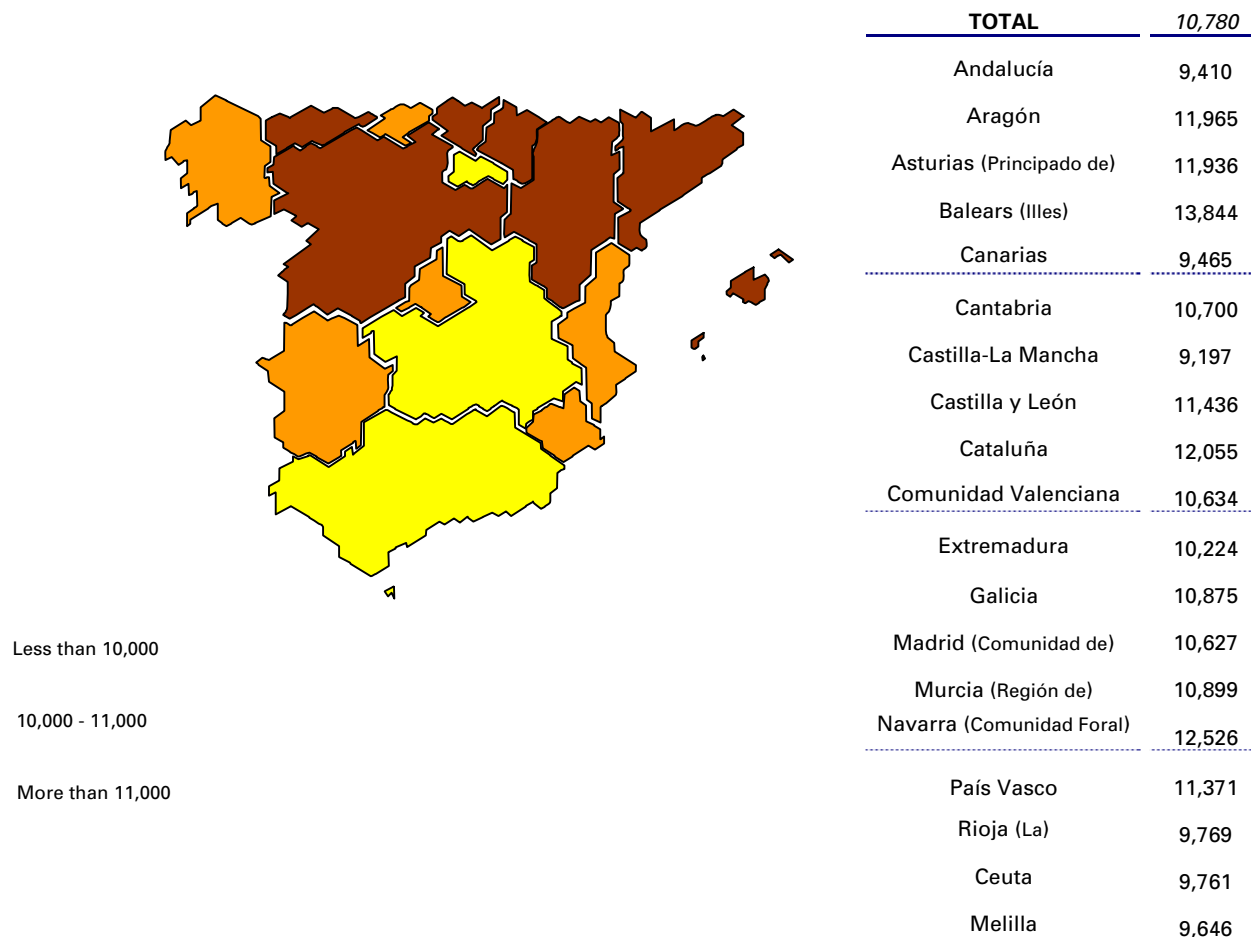
Hospital Morbidity Survey 2005

There were 4,678,130 admissions with confinement in Spanish hospitals during 2005, 1.1% more than in 2004

Complications during pregnancy and birth and diseases of the circulatory system cause the greatest number of admissions

There were 4,678,130 admissions with confinement during 2005 in Spanish hospitals, 1.1% with respect to year 2004. By autonomous communities the greatest number of admissions for every 100,000 inhabitants was in Illes Balears, Navarra and Cataluña. In contrast, Castilla - La Mancha, Andalucía and Canarias have the lowest number of admissions for every 100.000 inhabitants.

Admissions per 100.000 inhabitants by autonomous community of hospitalisation. Year 2005.



Rates per large diagnosis groups

The group of complications during pregnancy, birth and puerperium have maintained a rising trend during the last tendency and, after reaching the same level as admissions produced by diseases of the circulatory system in 2004, has already exceeded them. Specifically, in 2005 it recorded the greatest number of admissions per 100,000 inhabitants with 1,386, 12,9% of the total hospitalisations with confinement.

Hospitalisations due to diseases of the group of the genitourinary system had 1,384 admissions (12.8% of the total). These were followed by the group of diseases of the digestive system (1,270 admissions and a percentage of 11.8%) diseases of the respiratory system (1,146 admissions and 10.6%) and tumours (916 admissions and 8.5%).

It is worth mentioning the increase in the percentage of diseases of the group of the respiratory system in the total number of admissions, from 9.7% to 10.6%, as a consequence, of the **increase of 18% experienced by the diagnosis group of pneumonia and flu** with respect to year 2004.

Admissions per 100.000 inhabitants according to the main groups of diseases and percentages of population under 45 years of age and over 65 years of age for each autonomous community of hospitalisation. Year 2005.

Autonomous Community	Group 1	Group 2	Group 3	Group 4	Group 5	%Popul. <45 years	%Popul. >65 years
National total	1386	1384	1270	1146	916	60%	17%
Andalucía	1645	1169	1139	820	752	64%	15%
Aragón	1207	1519	1419	1252	1045	55%	21%
Asturias (Principado de)	906	2035	1267	1487	932	51%	22%
Balears (Illes)	1378	1643	1731	1552	750	63%	14%
Canarias	1407	1221	1095	807	641	66%	12%
Cantabria	1128	1637	1262	1241	852	56%	19%
Castilla y León	1062	1558	1431	1250	1042	53%	23%
Castilla - La Mancha	1264	1247	1175	1163	699	60%	19%
Cataluña	1338	1502	1315	1357	1059	59%	17%
Comunidad Valenciana	1440	1349	1303	1184	921	61%	16%
Extremadura	1290	1381	1348	1175	782	59%	19%
Galicia	1133	1504	1247	1304	995	54%	21%
Madrid (Comunidad de)	1462	1251	1231	1056	1005	62%	15%
Murcia (Región de)	1909	1303	1275	1114	774	66%	14%
Navarra (C. Foral)	1305	1341	1424	1240	1442	58%	18%
País Vasco	1127	1634	1379	1334	1040	55%	18%
Rioja (La)	1376	1456	1240	1171	918	57%	19%
Ceuta	2525	1076	1108	1123	455	67%	12%
Melilla	3350	808	745	853	413	69%	11%

GROUP 1: Complications of pregnancy, birth and puerperium.

GROUP 2: Diseases of the circulatory system.

GROUP 3: Diseases of the digestive system.

GROUP 4: Diseases of the respiratory system.

GROUP 5: Neoplasias (tumours)

In nine of the autonomous communities diseases of the group of the circulatory system occupy the first place in admissions per 100.000 inhabitants.

However, in Andalucía, Canarias, Castilla-La Mancha, Comunidad Valenciana, Madrid, Murcia, Ceuta and Melilla the greater rate of admissions occurred in hospitalisations due to complications of pregnancy, birth and puerperium. It is worth noticing that these communities have high percentages of population less than 45 years of age.

In Illes Balears the first place in admissions was occupied by the group of diseases of the digestive system, whereas in Navarra it corresponded to neoplasias (tumours).

In the group of diseases of the circulatory system the highest rate occurred in Asturias (2,035) and the lowest in Melilla (808), the communities with the highest (49%) and the lowest percentages (31%) of population over 45 years of age, respectively. In contrast, in the group of complications of pregnancy, birth and puerperium the highest rate corresponded to Melilla (3,350) and the lowest to Asturias (906).

In the group of diseases of the digestive system, the greatest number of admissions per 100.000 inhabitants corresponded to Illes Balears (1,731), followed by Castilla y León (1,431). Melilla showed the lowest number (745).

Hospitalisations by sexes and large groups of diseases

53% of the total admissions in the year 2005 corresponded to females, due to the significant participation of hospitalisations by complications of pregnancy, birth and puerperium. This percentage was equal to that of 2004 and slightly above that maintained during the period 1992-2000 (52%).

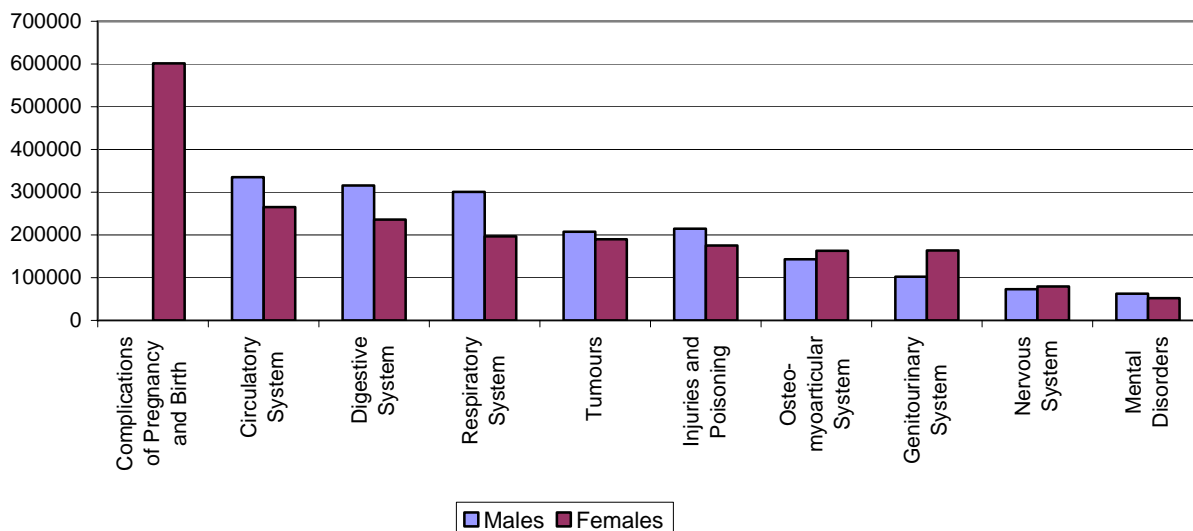
The first cause of admission of females corresponds to complications during pregnancy, childbirth and the puerperium, which amount to 24% of the total. Within this group, the greatest number of admissions occurred as a consequence of care during pregnancy, birth labour and labour (27%), followed by complications of pregnancy (26%), complications of labour (20%) and normal delivery (16%). The **growing** population of this group in total hospital admissions is in line with the evolution of the number of births in Spain that, in 2004 and 2005 has reached its highest values in absolute terms since 1990.

Therefore, **the participation of admissions caused by complications related to pregnancy, birth and puerperium have increased from 21.5% of the total admissions of females in 2000, to 24% in 2005.** The percentage of this group with respect to total admissions for both sexes has increased from 11.4% in 2000 to 12.9% in 2005.

The second cause of hospitalisation in females corresponded to the group of diseases of the circulatory system (10.6%), followed by the group of diseases of the digestive system (9.4%), diseases of the respiratory system (7.8%) and tumours (7.6%).

In males, the diseases giving rise to most hospitalisations were those corresponding to the circulatory system, with 15.4% of the total. These were followed by diseases of the digestive system (14.5%), followed by diseases of the respiratory system (13.8%), injuries and poisoning (9.9%) and tumours (9.5%).

Admissions by most frequent diagnostic groups and sex. Year 2005.



If we exclude those produced by the group of complications of pregnancy, birth **and** puerperium, the greatest percentage of participation in total admissions would correspond to males (53%) and in second place to females (47%). In this case, the three large groups of diseases giving rise to the greatest number of admissions would coincide both in males and in females (circulatory, digestive and respiratory systems).

Admissions by large disease groups and sex (% of total admissions for each sex). Year 2005.

MALES	% of total admissions in males	FEMALES	% of total admissions in females	FEMALES (not considering complications in pregnancy, birth and puerperium)	% of total admissions in females
Circulatory system	15.4	Complications of pregnancy, birth and puerperium	24.0	Circulatory system	14.0
Digestive system	14.5	Circulatory system	10.6	Digestive system	12.4
Respiratory system	13.8	Digestive system	9.4	Respiratory system	10.3
Injuries and poisoning	9.9	Respiratory system	7.8	Neoplasias (tumours)	10.0
Neoplasias (tumours)	9.5	Neoplasias (tumours)	7.6	Injuries and poisoning	9.2
Osteomyoearticular system	6.6	Injuries and poisoning	7.0	Respiratory system	8.6

Hospitalisations by ages and large groups of diseases

The average age of persons admitted to hospital was 51 years old (53 for males and 50 for females). Autonomous communities with an average age below the national were: Comunidad Valenciana (50), Madrid (50), Illes Balears (50), Extremadura (50), Murcia (48), Andalucía (47), Canarias (47), Ceuta (43) and Melilla (38).

Persons 85 years of age and over represented 6.2% of total admissions in 2005, four tenths more than in 2004. The relative participation of this age group has increased gradually in recent years, from 5% in 1999.

Similarly in the period between 1992-2005 has increased in percentage participation of the older age groups (65-74, 75-84, 85 and over) in total hospital admissions, as a consequence of the greater representation of these ages in the group of population. These three age groups represented more than 37% of total hospitalisations in 2005, against 26.8% for 1992.

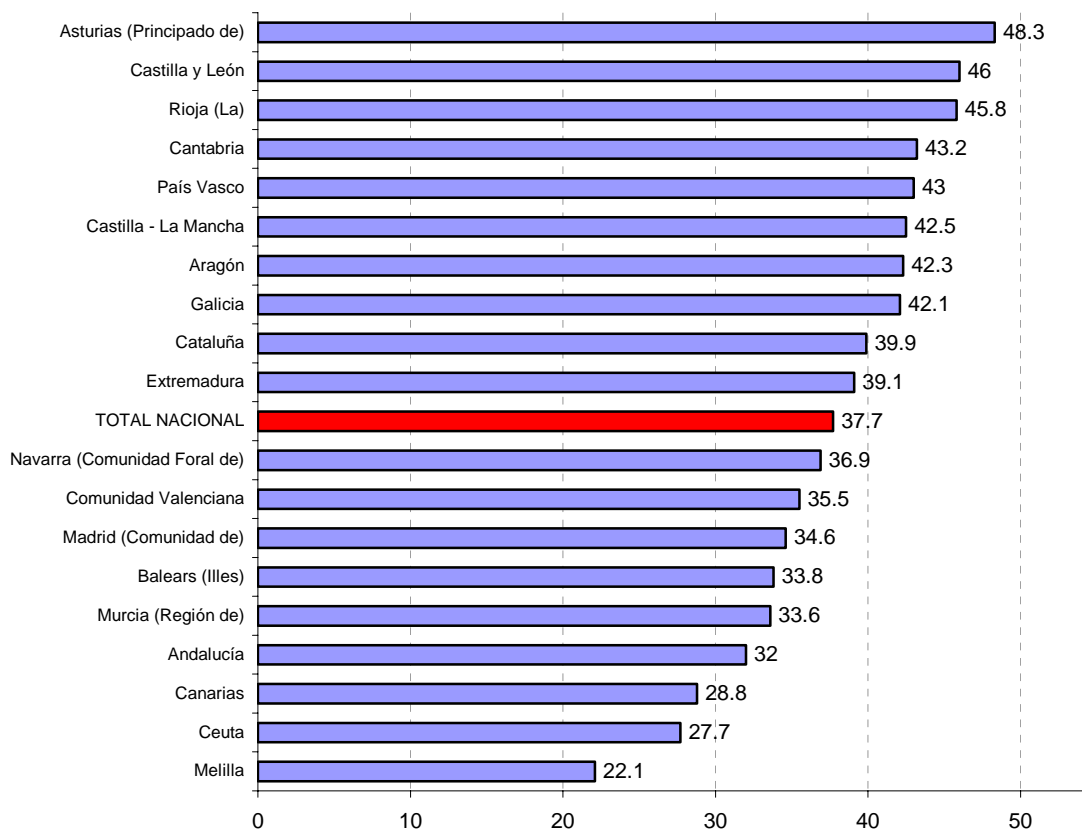
In contrast, and in the same period of time, the participation of the group of 25-34 years of age (17.5% in 1992) and, to a smaller degree, that of the group of 55-64 years of age (12.9% in 1992).

Age groups with a greater participation in total hospital admissions and distribution of the most frequent diseases within each group. Year 2005.

Age groups	% Total admissions	Distribution of diseases for each age group	% of total for the group
From 75 to 84 years of age	15.9	Circulatory system	24.1
		Respiratory system	16.5
		Digestive system	11.8
		Neoplasias (tumours)	10.4
From 65 to 74 years of age	15.7	Circulatory system	20.4
		Neoplasias (tumours)	13.3
		Digestive system	13.3
		Respiratory system	11.7
From 25 to 34 years of age	14.5	Complications of pregnancy and birth	54.9
From 55 to 64 years of age	11.9	Circulatory system	16.5
		Digestive system	15.1
		Neoplasias (tumours)	14.0

If we consider the percentage of the number of admissions corresponding to persons above 65 years of age with respect to total admissions, the autonomous communities having the greatest rates in 2005 were Asturias, Castilla y León, La Rioja, Cantabria and País Vasco, all of them with high percentages of people over 65 years of age in the entire population.

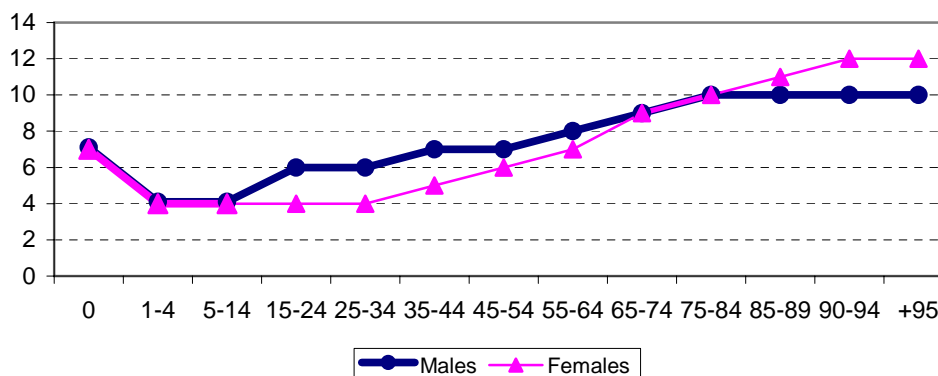
Percentage of hospital admissions corresponding to persons older than 65 years of age by autonomous community of hospitalisation.



Hospital stays by ages and large groups of diseases

The average stay by hospital admission in 2005 was seven days. By groups of diseases, **the longest stays** (not considering mental diseases) **corresponded to tumours (10 days)**, followed by diseases originating in the perinatal period (nine days).

Average stay by age and sex. Year 2005.



By ages, the highest average stay (11 days) corresponded to the age groups of persons over 85 years of age (85-89, 90-94 and over 95), followed by the group of persons of 75-84 years of age (10 days) and 65-74 years of age (nine days).

In ages 85 and over, the groups of diseases giving rise to the longest average stays (not considering mental diseases) were diseases of the skin and subcutaneous tissue (16 days, mainly due to bedsores) injuries and poisoning (13 days, where we can highlight fractures of femur with 15 days average stay), tumours (11 days) and infectious or parasitic diseases (11 days).

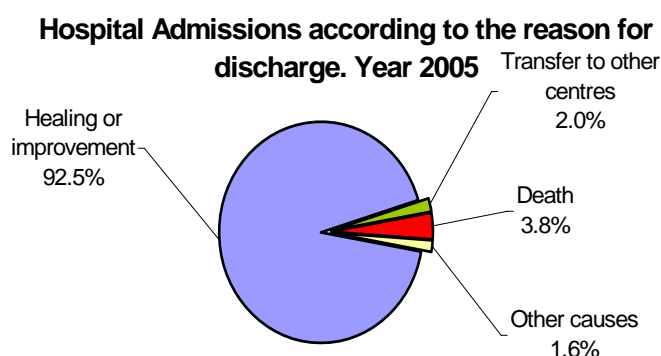
Variation of average stay by autonomous community of hospitalisation. Years 2004 and 2005.

	2005	2004		2005	2004
National Total	7	7	Comunidad Valenciana	6	6
Andalucía	7	7	Extremadura	7	8
Aragón	7	7	Galicia	8	8
Asturias (Principado de)	8	8	Madrid (Comunidad de)	7	7
Balears (Illes)	6	6	Murcia (Región de)	7	6
Canarias	8	7	Navarra (Comunidad Foral de)	7	7
Cantabria	8	8	País Vasco	8	7
Castilla y León	8	8	Rioja (La)	7	7
Castilla - La Mancha	7	7	Ceuta	6	6
Cataluña	7	8	Melilla	7	7

Reasons for admission and admissions by casualty

The number of hospital admissions for persons admitted for casualties represented 59.1% of total admissions in 2005, against 58.7% in 2004.

The percentages registered in previous years were 57.9% in 2003, 58.4% in 2002, 56.8% in 2001 and 54.6% in 2000.



Methodology Annex

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

The information for hospital admissions for 2005 includes for the first time the publication of the Shortlist of diagnoses for international dissemination of Hospital Morbidity data, agreed upon by the main international organizations in the matter (Eurostat, OECD and WHO), which will allow a homogeneous comparison of figures and diagnoses between countries in the coming years.

The main novelty of said shortlist is the dissemination, for single diagnoses or groups thereof, of 149 items with a development level of four digits according to the International Classification of Diseases (ICD-9-MC).

It is worth mentioning among these groups of ICD codes the breakdown at the level of four digits of diagnoses included in "Mental disorders and behaviour due to the use of alcohol" and in "Mental disorders and behaviour due to the use of other psychoactive substances", that were disseminated with a development to three ICD digits in previous years.

Some diagnosis groups included in said shortlist are enumerated below:

Hospital discharges of some ICD diagnosis groups according to the Eurostat/OECD/WHO Shortlist. Year 2005.

ICD diagnoses	Admissions
Malignant ovary neoplasia (ICD: 1830)	4431
Dementia (ICD: 2900-2902, 2904-2909, 2941)	5256
Affective mood disorders (ICD: 296, 2980, 3004, 3011, 311)	24227
Mental and behavioural disorders induced by the use of alcohol: (ICD: 291, 303, 3050)	11109
Mental and behavioural disorders induced by the use of other psychoactive substances (ICD: 292, 2940, 304, 3051-3059)	8614
Alzheimer's disease (ICD: 3310)	2632
Alcoholic disease of the liver (ICD: 5710-5713)	11359
Other diseases of the liver (ICD: 570, 5714-573)	24648
Menstruation disorders, menopause and others (ICD: 6250-6255, 6258-627)	11635
Complications of labour and birth (ICD: 660-668, 6690-6694, 6698, 6699)	85104
Other deliveries (ICD: 6695, 6696, 6697)	32909

(The complete list of diagnoses in the Shortlist is published in Tables 3.1-3.4 and 4.1-4.4 of the Hospital Morbidity Survey 2005)

Hospital Morbidity Survey

The Hospital Morbidity Survey has as a main objective to know the demographic and health features of the patients discharged who have been admitted into a hospital as in-patients, as well as providing information at a provincial and state level on the rate of visits and use of hospital resources in a reference year.

The survey collects information by sampling 85% of Spanish hospitals in 2005, both public and private, making the number of patients collected directly from hospitals reach 90% of total hospital admissions with confinement occurring yearly in our country.

Health information focuses on the main diagnosis stated in the hospital discharge report received by the patient, and which has caused his admittance according to the criteria of the clinical department or doctor who treated the patient. The features gathered about the patient are: sex, age, date admitted, date discharged, province of residence, type of admittance and reason of the discharge.

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

As of year 2005 we have microdata with a breakdown level of 4 digits in the main diagnosis, in accordance with the International Classification of Diseases. (ICD-9-MC). From that same year, the publication includes the International Shortlist of Diagnosis Groups agreed by Eurostat, OECD and WHO for the dissemination of Hospital Morbidity data.

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