

## 4. HEALTH CARE ACTIVITIES

### 4.4. Hospital discharges

Hospital discharge rates are a measure of the number of people who need to stay overnight in a hospital each year. Together with the average length of stay, they are important measures of hospital activities. However, overall discharge rates do not take into account differences in case-mix (the mix of the conditions leading to hospitalisation).

Hospital discharge rates are the highest in Austria and France, although the high rate in France is partly explained by the inclusion of some same-day separations (Figure 4.4.1). Discharge rates are also high in Germany, the Czech Republic, Poland and the Slovak Republic. They are the lowest in Mexico and Canada. In general, those countries that have more hospital beds tend to have higher discharge rates and *vice versa* (see Indicator 4.3 “Hospital beds”).

Over the past decade, discharge rates have increased in some countries, most notably in Korea and Turkey which started with relatively low levels. They remained stable in other countries such as Australia, Spain and the United States, while they fell significantly in Canada, Italy and Iceland. In Canada, a marked decline in the number of hospitalisations was accompanied by a strong rise in the number of day surgeries in or outside hospitals (CIHI, 2007).

Elderly populations account for a disproportionately high percentage of overall hospital discharges in all countries. In the United States, 24% of all hospital discharges in 2006 concerned people aged 75 years and over, up from 16% in 1990. However, population ageing may be a less important factor in explaining changes in hospitalisation rates than evolving clinical practices linked to advances in medical technologies. For example, hospital stays involving at least one revascularisation procedure (a coronary angioplasty or a coronary artery bypass graft) for people aged 75 to 84 doubled between 1990 and 2006 in the United States (NCHS, 2009).

On average across OECD countries, the main conditions leading to hospitalisation in 2007 were circulatory diseases which include ischemic heart disease, stroke and other diseases (13% of all discharges), pregnancy and childbirth (11%), diseases of the digestive system (10%), injuries and other external causes (9%), and cancers (9%).

Austria has the highest discharge rate for circulatory diseases, followed by Germany, Hungary and Poland (Figure 4.4.2). The high rate in Hungary is associated

with high mortality rate from circulatory diseases which may be used as a proxy indicator for the occurrence of these diseases (see Indicator 1.4 “Mortality from heart disease and stroke”). This is less the case for the other three countries that have high discharge rates. In Germany, the high discharge rate for ischemic heart disease is associated with the highest rate of revascularisation procedures (see Indicator 4.6 “Cardiac procedures”).

Austria, Hungary, Germany and Poland also have the highest discharge rates for cancer (Figure 4.4.3). The high rate in Hungary and Poland is associated with high mortality rates from cancer, which may also be used as a proxy for the occurrence of the disease (see Indicator 1.5 “Mortality from cancer”). However, this is not the case for Austria and Germany. In Austria, the high rate is associated with a high rate of hospital readmissions for further investigation and treatment of cancer patients (European Commission, 2008a).

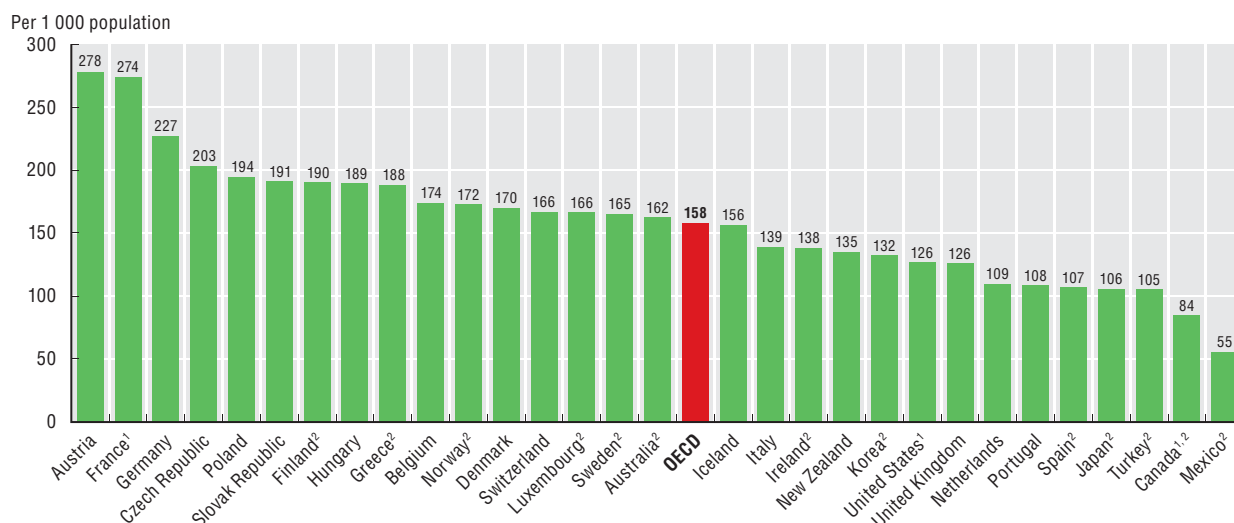
#### Definition and deviations

Discharge is defined as the release of a patient who has stayed at least one night in hospital. It includes deaths in hospital following inpatient care. Same-day separations are usually excluded, with the exceptions of Canada, France and the United States which include some same-day separations.

Healthy babies born in hospitals are excluded completely (or almost completely) from hospital discharge rates in several countries (*e.g.* Australia, Canada, Finland, Greece, Ireland, Japan, Korea, Luxembourg, Mexico, Norway, Sweden, Turkey). Ireland also excludes discharges related to pregnancy and childbirth and certain conditions originating in the perinatal period.

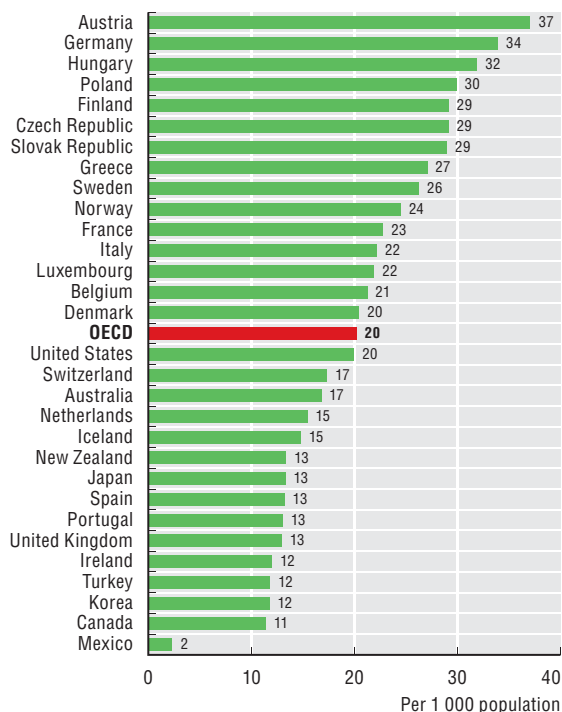
Some countries do not cover all hospitals. For instance, data for Denmark, Ireland, Mexico, Poland and the United Kingdom are restricted to public or publicly-funded hospitals only. Data for Portugal relate only to hospitals on the mainland (excluding the Islands of Azores and Madeira).

### 4.4.1 Hospital discharges per 1 000 population, 2007 (or latest year available)

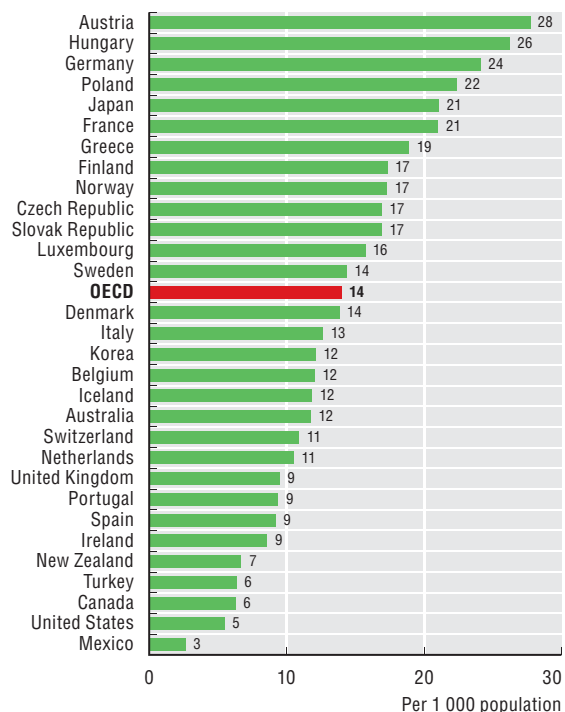


1. Includes same-day separations.
2. Excludes discharges of healthy babies born in hospital.

### 4.4.2 Hospital discharges for circulatory diseases per 1 000 population, 2007 (or latest year available)



### 4.4.3 Hospital discharges for cancers per 1 000 population, 2007 (or latest year available)



Source: OECD Health Data 2009.

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