

¹HOSPITALIZATION FACT SHEET

- Patients 65 years of age and older comprise 13% of the American population, but they account for 39% of all discharges from non-federal short-stay (acute) hospitals and 48% of inpatient days of care.
- Among older patients, rates of hospitalization are more than twice as great for the age group 85 years and older compared with the age group 65 to 74 years, and over five times as great for middle-aged patients (age 45-64 years).
- Compared with middle-aged patients, older patients have longer lengths of hospitalization: an average of 6.2 days for those age 85 years and older compared to 4.8 days for those age 45-64.
- Rates of in-hospital mortality are four times greater for those patients 85 years of age and older compared to those 45-64 years of age. In 1999, 78% of hospital deaths occurred in patients age 65 years and over.
- The most frequent first listed diagnoses for patients age 65 years and older are diseases of the circulatory system, heart disease, and diseases of the respiratory tract.
- Independent risk factors for mortality include male sex, number of dependent activities of daily living (ADL) at discharge, congestive heart failure, cancer, creatinine level >3.0 mg/dL, and serum albumin <3.5 gm/dL.
- Depressive symptoms predict subsequent mortality: Patients with six or more symptoms of depression on the shortened Geriatric Depression Scale are more likely to die over the next three years compared to patients with less than 6 depressive symptoms.
- Changes in basic ADL (bathing, dressing, transferring, toileting and eating) are common Among general medicine patients age 70 years and older: 65% are discharged with baseline (prior to acute illness) function; and 35% are discharged with worse than baseline (functional decline).
- Oldest patients are at particularly high risk of poor functional outcomes because they are much less likely to recover ADL function lost before admission and more likely to develop new functional deficits during hospitalization.
- Risk factors for functional decline: age older than 75 years, cognitive impairment, dependence at baseline in 2 or more instrumental ADL (managing medications, handling finances, using transportation, performing household chores, shopping, preparing meals, using telephone).
- Clinical intervention trials show that the risk of functional decline, nursing home admission and impaired mobility can be reduced without increasing the costs of hospital care.

¹ Reprinted from: *Hospitalization Fact Sheet* in: Kozak LJ, Hall MJ, Owings MF. National Hospital Discharge Survey: 2000 Annual summary with detailed diagnosis and procedure data. National Center for Health Statistics. Vital Health Stat 13(153). 2002.