

NCHS Dataline

A new feature of the National Center for Health Statistics' Centers for Disease Control and Prevention (CDC) website is the Trends in Health and Aging Data Warehouse, now available in Spanish. A new chartbook tracks hospitalization for injuries from 1971 to 2001, and the 2003 report on emergency departments documents a continued rise in the number of patients coupled with a decrease in the number of emergency departments (EDs) providing care in the United States.

TRENDS IN HEALTH AND AGING EN ESPANOL

There is a new Spanish-language version of the website, Data Warehouse on Trends in Health and Aging, (Banco de datos sobre tendencias en la salud y el envejecimiento) now on the NCHS website at: <http://www.cdc.gov/nchs/agingact.htm>. Its purpose is to make information about the health of older Americans more accessible to Spanish speakers throughout the world. Users can switch from Spanish to English on each page. The Warehouse is a comprehensive source of information about health and the use of health services by the aging population in the U.S. The Warehouse is maintained by NCHS and is supported by the National Institute on Aging of the National Institutes of Health. The main goal of the Warehouse is the analysis and dissemination of information about the health and health care use of the aging population. The collection of data tables are viewable online on with Beyond 20/20 software.¹

The warehouse includes data on a wide array of topics related to the aging population including: health status and disability, chronic conditions, functional status, risk factors and disease prevention, health care utilization, health expenditures, health insurance coverage, mortality, life expectancy, and socio-economic status and other demographic characteristics. A number of special topics are added periodically to expand the scope of the Data Warehouse. The 2004 annual bilingual (English and Spanish) CD-ROM from the Data Warehouse is also now available. It contains the Beyond 20/20 tables available on the Data Warehouse as of August 2004 and the tutorial materials on the use of Beyond 20/20 software.¹ The CD-ROM is available by request at nha@cdc.gov. Users may also use the same contact to arrange for a demonstration of the Data Warehouse capabilities and resources.

CHARTBOOK TRACKS INJURY HOSPITALIZATIONS

In 2001, injuries accounted for 1.8 million hospital discharges, nine million days of inpatient care, and overall represented about 6% of all hospitalizations. From 1979 to 2001, the discharge rate for injuries decreased on average of just over 4% per year, reflecting not only trends in the incidence of injury but also changes in health care utilization and resources and the impact of new medical technolo-

gies. The chartbook documents these changes and provides a comprehensive data resource for those involved in injury prevention and research. Data on injuries are used by public health officials and researchers to monitor trends, measure risk factors, evaluate the effectiveness of existing (and determine the need for new) policies and programs. This report also examines the health care impact. National data in the report are also valuable as a benchmark for states and localities.

"National Trends in Injury Hospitalizations, 1979–2001"² presents data from NCHS's National Hospital Discharge Survey,³ a nationally representative survey of discharges from non-federal, short-stay hospitals in the United States. The report uses newly-developed standardized categories and methods for analyzing and reporting injury hospital discharge data. The chartbook is organized into three sections: general statistics by demographic information, injury diagnoses and external causes of injuries, and utilization and payment. External causes of injury are defined and categorized in a two-dimensional matrix: mechanism (such as fall, motor vehicle, etc.) and intent (self-inflicted, assault, unintentional, or undetermined). This level of complexity and detail supports the analysis and application of the findings to efforts to better understand, prevent, or prepare for injuries in the population and the impact on health care. Trends are displayed by age and sex along with brief text highlights. The report is available to view or download on the NCHS website at www.cdc.gov/nchs.

INCREASE IN ED VISITS DOCUMENTED IN LATEST REPORT

Visits to the nation's hospital emergency departments reached a record high of nearly 114 million in 2003, but the number of emergency departments decreased by 14% from 1993 to 2003, according to a new NCHS report.

The report, "National Hospital Ambulatory Medical Care Survey: 2003 Emergency Department Summary,"⁴ attributes the rise in emergency department (ED) visits to increased use by adults, especially those aged 65 and over. Among people aged 65–74, the ED visit rate was more than five times as high as for those residing in a nursing home or other institution compared to those not living in an institutionalized setting. The report finds that Medicaid patients were four times (81 visits per 100 people) more likely to seek treatment from an ED than those with private insurance (22 visits per 100 people.) This annual study of the nation's emergency departments is part of a series of surveys of health care in the United States and provides current information for the development of policies and programs designed to meet America's health care needs.

Other findings in the report include:

- From 1993 through 2003, the number of ED visits increased 26%, from 90.3 million visits in 1993 to 114

million in 2003. In contrast, the U.S. population rose 12.3% during this period, and the 65-and-older population rose 9.6%.

- The average waiting time to see a physician was 46.5 minutes, the same as it was in 2000. The wait time was unchanged, despite increased visits. ED's have implemented a number of efficiencies including "fast track" units that may have kept the wait time constant. On average, patients spent 3.2 hours in the ED, including time with the physician and other clinical services.
- Injury, poisoning, and the adverse effects of medical treatment accounted for over 35% of ED visits. The leading causes of injuries were falls, being struck by or striking against objects or persons, and motor vehicle traffic incidents, accounting for 41% of injury-related visits. Some 1.7 million visits were for adverse effects of medical treatment.
- In 2003, patients arrived at the ED by ambulance in 14% of the visits, representing over 16 million ambulance transports. More than a third of patients who arrived at the ED by ambulance were 65 years of age and older.
- X-rays, CT scans, or other imaging tests were provided at about 43% of visits. Medications were provided at over 77% of visits, with painkillers being the most frequent prescription, accounting for just over 14% of the medications mentioned.
- About 58% of all EDs were located in metropolitan

areas, and they represented 82% of the annual usage. Board-certified emergency medicine physicians were available at 64% of EDs.

The CDC report describes hospital, patient and visit characteristics for hospital emergency departments in the United States as well as trends in ED use from 1993 to 2003. The information is based on data from the 2003 National Hospital Ambulatory Medical Care Survey (NHAMCS) Emergency Department Summary,⁴ which is a national probability-based sample survey of visits to emergency and outpatient departments of non-federal and short-stay hospitals in the United States conducted by CDC's National Center for Health Statistics. A copy of the full report is available from: www.cdc.gov/nchs.

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REFERENCES

1. Beyond 20/20, Inc. Beyond 20/20: Version 6.2. Ottawa, Canada: Beyond 20/20, Inc.; 2002.
2. Heinen, M, Hall MJ, Boudreault MA, Fingerhut, LA. National trends in injury hospitalizations, 1979–2001. Hyattsville (MD): National Center for Health Statistics; 2005.
3. National Center for Health Statistics. National Hospital Discharge Survey [cited 2005 Jul 15]. Available from: URL: <http://www.cdc.gov/nchs/about/major/hdasd/nhds.htm>
4. McCaig L, Burt C. National Hospital Ambulatory Medical Care Survey: 2003 Emergency Department Summary. Advance Data No. XXX. Hyattsville (MD): National Center for Health Statistics; 2005.