

Year 2010 Connecticut Hospitalizations

In 2010 there were 335,167 hospitalizations of Connecticut residents in Connecticut hospitals (Table H-1), not including those related to pregnancy and birth, with total charges of over 11.2 billion dollars. The 2010 census was used for the 2010 Connecticut population. By contrast, the 2009 population estimate used for 2009 tables was low and based on the 2000 census. The number of hospitalizations changed little from 2009 to 2010. The age-adjusted hospitalization rate for all conditions besides pregnancy and birth decreased 3.1% from the previous year to 8,416 per 100,000 residents of all ages. The lowest rate was for ages 5-14 and the highest for ages 65 and older. Overall, the median charge per hospital stay increased 6.0% to \$20,921 (unadjusted for inflation) and the median length of stay was three days. Among listed conditions and procedures, the longest median stays were for leukemia and Alzheimer's disease, and the highest median charges were for non-fatal spinal injury and leukemia.

The leading diagnosis for all ages combined, as well as for ages 65 and older, was diseases of the heart (Table H-5). Respiratory diseases was the leading cause of hospitalization for ages 0-4; while mental disorders was the leading cause for ages 5-14, 15-24, and 25-44. Digestive diseases was the leading cause of hospitalization for ages 45-64. Among black residents, respiratory diseases was the leading cause of hospitalization for all ages. Among Hispanic residents, digestive diseases was the leading cause for all ages (Table H-2).

The most common type of injury among males and females, whites, blacks, and Hispanics, was an unintentional fall (Tables H-3, H-4). Hospitalization rate ratios between the sexes and race/ethnicity groups appear in Tables H-6 and H-7. High male to female, black to white, and Hispanic to white ratios occurred simultaneously within many conditions, such as HIV/AIDS, amputation with diabetes, and firearms injury. High female to male ratios marked a few conditions, such as cholelithiasis (gallstones), and high white to black ratios were present for some conditions, such as hip fracture.

Hospitalizations related to pregnancy and birth (Tables H-1 and H-2) were not used in rankings or rate ratios reported in Tables H-2, H-5, H-6, and H-7. In 2010 there were 76,831 pregnancy and birth-related discharges, with charges of more than one billion dollars. For the most accurate record of Connecticut resident births and related risk factors and outcomes, see the "Vital Statistics" section of the DPH website.

The definitions of diagnostic categories used by the National Center for Health Statistics changed for 2009 data, and again for 2010 data, compared with 2008 data. Additional ICD-9-CM diagnoses are underlined. A comparison of 2010 counts based on the old and new definitions follows.

Definitions used in previous reports and [counts for Connecticut, 2010] :

Malignant neoplasms 140-208 [14,146]
Malignant neoplasms of colon and rectum 153-154, 197.5 [1,577]
Malignant neoplasms of lung and bronchus 162, 176.4, 197.0, 197.3 [1,945]
Benign neoplasms 210-229 [3,743]
Diabetes mellitus 250 [5,133]
Amputation with diabetes [529]
Coronary atherosclerosis 414.0 [6,971]

National Hospital Discharge Survey 2010 definitions used in this report and [counts for Connecticut, 2010],
% change with new definition:

Malignant neoplasms 140-209.36, 209.70-209.75, 209.79, 230-234 [14,554] +2.9%
Malignant neoplasms of colon and rectum 153-154, 197.5, 209.1[1,587] +0.6%
Malignant neoplasms of lung and bronchus 162, 176.4, 197.0, 197.3, 209.21 [1,965] +1.0%
Benign neoplasms 209.4-209.6, 210-229 [3,770] +0.7%
Diabetes mellitus 249, 250 [5,174] +0.8%
Amputation with diabetes 249, 250 with 84.1 [529] unchanged in 2010 under new definition
Coronary atherosclerosis 414.0, 414.2, 414.3 [6,971] unchanged