

## Year 2013 Connecticut Hospitalizations

In 2013 there were 319,159 hospitalizations of Connecticut residents in Connecticut hospitals (Table H-1), not including those related to pregnancy and birth, with total charges of over 13.3 billion dollars. The age-adjusted hospitalization rate for all conditions besides pregnancy and birth decreased 3.6% from the previous year to 7,813 per 100,000 residents of all ages. The lowest rate was for ages 5-14 (1,656 per 100,000) and the highest for ages 65 and older (27,260 per 100,000). Overall, the median charge per hospital stay increased 8.5% to \$26,395 (unadjusted for inflation) and the median length of stay was three days. Among listed conditions and procedures, the longest median stay was for leukemia (ten days), and the highest median charge was for leukemia (\$84,870).

The leading diagnosis for all ages combined, as well as for ages 45-64, was digestive diseases (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. Heart disease was the leading cause of hospitalization for ages 65 and older, and for males of all ages. Digestive diseases was the leading cause of hospitalization in women. Among white residents, the leading cause of hospitalization was heart disease, while among black residents and Hispanic residents, mental disorders was the leading cause (Table H-2). As leading causes are based on counts rather than rates, leading causes for all ages combined are somewhat influenced by age distributions.

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 some conditions, such as diabetes, 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 2013 there were 71,915 pregnancy and birth-related discharges, with charges of more than 1.1 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. For the most accurate record of Connecticut resident cancer risk factors and outcomes, see the “Tumor Registry” (CTR) section of the DPH website.